

By: Leach, Neave, Holland, King of Hemphill,  
et al.

H.B. No. 1588

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for scalp cooling systems,  
applications, and procedures for certain cancer patients.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subtitle E, Title 8, Insurance Code, is amended  
by adding Chapter 1380 to read as follows:

CHAPTER 1380. COVERAGE FOR SCALP COOLING FOR CANCER PATIENTS

Sec. 1380.001. DEFINITIONS. In this chapter:

(1) "Enrollee" means an individual entitled to  
coverage under a health benefit plan.

(2) "Scalp cooling" means a system, application, or  
procedure approved by the United States Food and Drug  
Administration for reducing hair loss in an individual undergoing  
chemotherapy treatment.

Sec. 1380.002. APPLICABILITY OF CHAPTER. (a) This chapter  
applies only to a health benefit plan that provides benefits for  
medical or surgical expenses incurred as a result of a health  
condition, accident, or sickness, including an individual, group,  
blanket, or franchise insurance policy or insurance agreement, a  
group hospital service contract, or an individual or group evidence  
of coverage or similar coverage document that is offered by:

(1) an insurance company;

(2) a group hospital service corporation operating  
under Chapter 842;

1           (3) a health maintenance organization operating under  
2 Chapter 843;

3           (4) an approved nonprofit health corporation that  
4 holds a certificate of authority under Chapter 844;

5           (5) a multiple employer welfare arrangement that holds  
6 a certificate of authority under Chapter 846;

7           (6) a stipulated premium company operating under  
8 Chapter 884;

9           (7) a fraternal benefit society operating under  
10 Chapter 885;

11           (8) a Lloyd's plan operating under Chapter 941; or

12           (9) an exchange operating under Chapter 942.

13           (b) Notwithstanding any other law, this chapter applies to:

14           (1) a small employer health benefit plan subject to  
15 Chapter 1501, including coverage provided through a health group  
16 cooperative under Subchapter B of that chapter; and

17           (2) a standard health benefit plan issued under  
18 Chapter 1507.

19           Sec. 1380.003. CONDITIONAL EXCEPTION. (a) This chapter  
20 does not apply to a qualified health plan if a determination is made  
21 under 45 C.F.R. Section 155.170 that:

22           (1) this chapter requires the plan to offer benefits  
23 in addition to the essential health benefits required under 42  
24 U.S.C. Section 18022(b); and

25           (2) this state is required to defray the cost of the  
26 benefits mandated under this chapter.

27           (b) If a determination described by Subsection (a) is made

1 as to a qualified health plan, this chapter does not apply to a  
2 non-qualified health plan if the non-qualified health plan is  
3 offered in the same market as the qualified health plan.

4 Sec. 1380.004. COVERAGE REQUIRED. (a) A health benefit  
5 plan must provide coverage for scalp cooling:

6 (1) for an enrollee who is undergoing or has undergone  
7 medical treatment for cancer; and

8 (2) that is determined by the enrollee's treating  
9 physician to be appropriate for the enrollee in connection with the  
10 side effects of the medical treatment for cancer.

11 (b) An additional premium may not be charged for the  
12 coverage required by Subsection (a).

13 (c) Coverage required under Subsection (a):

14 (1) must be provided in a manner determined to be  
15 appropriate in consultation with the treating physician and the  
16 enrollee;

17 (2) may be subject to annual deductibles, copayments,  
18 and coinsurance consistent with annual deductibles, copayments,  
19 and coinsurance required for other coverage under the health  
20 benefit plan; and

21 (3) may not be subject to annual dollar limits.

22 Sec. 1380.005. PREAUTHORIZATION. A health benefit plan may  
23 require prior authorization for scalp cooling in the same manner  
24 that the health benefit plan requires prior authorization for any  
25 other health benefit.

26 SECTION 2. Chapter 1380, Insurance Code, as added by this  
27 Act, applies only to a health benefit plan that is delivered, issued

H.B. No. 1588

1 for delivery, or renewed on or after January 1, 2022.

2 SECTION 3. This Act takes effect September 1, 2021.