

By: Lucio III

H.B. No. 2755

A BILL TO BE ENTITLED

AN ACT

relating to health benefit coverage for general anesthesia in connection with certain pediatric dental services.

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

SECTION 1. Chapter 1367, Insurance Code, is amended by adding Subchapter G to read as follows:

SUBCHAPTER G. PEDIATRIC DENTISTRY

Sec. 1367.301. APPLICABILITY OF SUBCHAPTER. (a) This subchapter 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;

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

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

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

1 (6) a stipulated premium insurance company operating
2 under Chapter 884;

3 (7) a fraternal benefit society operating under
4 Chapter 885;

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

6 (9) an exchange operating under Chapter 942.

7 (b) Notwithstanding any other law, this subchapter applies
8 to:

9 (1) a small employer health benefit plan subject to
10 Chapter 1501, including coverage provided through a health group
11 cooperative under Subchapter B of that chapter;

12 (2) a standard health benefit plan issued under
13 Chapter 1507;

14 (3) a basic coverage plan under Chapter 1551;

15 (4) a basic plan under Chapter 1575;

16 (5) a primary care coverage plan under Chapter 1579;

17 (6) a plan providing basic coverage under Chapter
18 1601;

19 (7) health benefits provided by or through a church
20 benefits board under Subchapter I, Chapter 22, Business
21 Organizations Code;

22 (8) a regional or local health care program operated
23 under Section 75.104, Health and Safety Code; and

24 (9) a self-funded health benefit plan sponsored by a
25 professional employer organization under Chapter 91, Labor Code.

26 (c) This subchapter applies to coverage under a group health
27 benefit plan described by Subsection (a) provided to a resident of

1 this state, regardless of whether the group policy, agreement, or
2 contract is delivered, issued for delivery, or renewed in this
3 state.

4 Sec. 1367.302. COVERAGE FOR GENERAL ANESTHESIA. A health
5 benefit plan that provides coverage for general anesthesia may not
6 exclude from coverage general anesthesia services in connection
7 with dental services provided to a covered individual who is:

8 (1) younger than 18 years of age; and

9 (2) unable to undergo the dental service in an office
10 setting due to a documented physical, mental, or medical reason
11 determined by the individual's physician or by the dentist
12 providing the dental care.

13 Sec. 1367.303. COVERAGE NOT REQUIRED. This subchapter does
14 not require a health benefit plan to provide coverage for dental
15 care or procedures.

16 SECTION 2. Subchapter G, Chapter 1367, Insurance Code, as
17 added by this Act, applies only to a health benefit plan that is
18 delivered, issued for delivery, or renewed on or after January 1,
19 2022.

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