

1-1 By: Huffman, et al. S.B. No. 1028
 1-2 (In the Senate - Filed March 4, 2021; March 18, 2021, read
 1-3 first time and referred to Committee on Business & Commerce;
 1-4 April 19, 2021, reported adversely, with favorable Committee
 1-5 Substitute by the following vote: Yeas 8, Nays 0; April 19, 2021,
 1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8	X			
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13	X			
1-14			X	
1-15	X			
1-16	X			
1-17	X			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 1028 By: Hancock

1-19 A BILL TO BE ENTITLED
 1-20 AN ACT

1-21 relating to health benefit plan coverage for colorectal cancer
 1-22 early detection.

1-23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-24 SECTION 1. Section 1363.001, Insurance Code, is amended to
 1-25 read as follows:

1-26 Sec. 1363.001. APPLICABILITY OF CHAPTER. This chapter
 1-27 applies only to a health benefit plan, including a small employer
 1-28 health benefit plan written under Chapter 1501 or coverage that is
 1-29 provided by a health group cooperative under Subchapter B of that
 1-30 chapter, that:

1-31 (1) provides benefits for medical or surgical expenses
 1-32 incurred as a result of a health condition, accident, or sickness,
 1-33 including:

1-34 (A) an individual, group, blanket, or franchise
 1-35 insurance policy or insurance agreement, a group hospital service
 1-36 contract, or an individual or group evidence of coverage that is
 1-37 offered by:

1-38 (i) an insurance company;

1-39 (ii) a group hospital service corporation
 1-40 operating under Chapter 842;

1-41 (iii) a fraternal benefit society operating
 1-42 under Chapter 885;

1-43 (iv) a Lloyd's plan operating under Chapter
 1-44 941;

1-45 (v) a stipulated premium company operating
 1-46 under Chapter 884; ~~or~~

1-47 (vi) a health maintenance organization
 1-48 operating under Chapter 843; or

1-49 (vii) a reciprocal or interinsurance
 1-50 exchange operating under Chapter 942; and

1-51 (B) to the extent permitted by the Employee
 1-52 Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et
 1-53 seq.), a health benefit plan that is offered by:

1-54 (i) a multiple employer welfare arrangement
 1-55 as defined by Section 3 of that Act; or

1-56 (ii) another analogous benefit
 1-57 arrangement;

2-1 (2) is offered by an approved nonprofit health
2-2 corporation operating under Chapter 844; or

2-3 (3) provides health and accident coverage through a
2-4 risk pool created under Chapter 172, Local Government Code,
2-5 notwithstanding Section 172.014, Local Government Code, or any
2-6 other law.

2-7 SECTION 2. Section 1363.002, Insurance Code, is amended to
2-8 read as follows:

2-9 Sec. 1363.002. EXCEPTION. This chapter does not apply to:

2-10 (1) a plan that provides coverage:

2-11 (A) only for a specified disease or other limited
2-12 benefit;

2-13 (B) only for accidental death or dismemberment;

2-14 (C) for wages or payments in lieu of wages for a
2-15 period during which an employee is absent from work because of
2-16 sickness or injury;

2-17 (D) as a supplement to a liability insurance
2-18 policy; ~~or~~

2-19 (E) only for indemnity for hospital confinement;

2-20 or

2-21 (F) only for dental or vision care;

2-22 (2) ~~[a small employer health benefit plan written~~
2-23 ~~under Chapter 1501,~~

2-24 ~~[(3)]~~ a Medicare supplemental policy as defined by
2-25 Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss),
2-26 as amended;

2-27 (3) a credit-only insurance policy;

2-28 (4) a workers' compensation insurance policy;

2-29 (5) medical payment insurance coverage provided under
2-30 a motor vehicle insurance policy; ~~or~~

2-31 (6) a limited benefit policy that does not provide
2-32 coverage for physical examinations or wellness exams;

2-33 (7) a multiple employer welfare arrangement that holds
2-34 a certificate of authority under Chapter 846; or

2-35 (8) ~~[(6)]~~ a long-term care policy, including a nursing
2-36 home fixed indemnity policy, unless the commissioner determines
2-37 that the policy provides benefit coverage so comprehensive that the
2-38 policy is a health benefit plan as described by Section 1363.001.

2-39 SECTION 3. Section 1363.003, Insurance Code, is amended to
2-40 read as follows:

2-41 Sec. 1363.003. MINIMUM COVERAGE REQUIRED. (a) A health
2-42 benefit plan that provides coverage for screening medical
2-43 procedures must provide to each individual enrolled in the plan who
2-44 is 45 ~~50~~ years of age or older and at normal risk for developing
2-45 colon cancer coverage for expenses incurred in conducting a
2-46 medically recognized screening examination for the detection of
2-47 colorectal cancer.

2-48 (b) The minimum coverage required under this section must
2-49 include:

2-50 (1) all colorectal cancer examinations, preventive
2-51 services, and laboratory tests assigned a grade of "A" or "B" by the
2-52 United States Preventive Services Task Force for average-risk
2-53 individuals, including the services that may be assigned a grade of
2-54 "A" or "B" in the future [a fecal occult blood test performed
2-55 annually and a flexible sigmoidoscopy performed every five years];
2-56 and ~~or~~

2-57 (2) an initial colonoscopy or other medical test or
2-58 procedure for colorectal cancer screening and a follow-up
2-59 colonoscopy if the results of the initial colonoscopy, test, or
2-60 procedure are abnormal [a colonoscopy performed every 10 years].

2-61 (c) For an enrollee in a managed care plan as defined by
2-62 Section 1451.151, the plan may impose a cost-sharing requirement
2-63 for coverage described by this section only if the enrollee obtains
2-64 the covered benefit or service outside the plan's network.

2-65 SECTION 4. The change in law made by this Act applies only
2-66 to a health benefit plan that is delivered, issued for delivery, or
2-67 renewed on or after January 1, 2022. A health benefit plan that is
2-68 delivered, issued for delivery, or renewed before January 1, 2022,
2-69 is governed by the law as it existed immediately before the

3-1 effective date of this Act, and that law is continued in effect for
3-2 that purpose.

3-3 SECTION 5. This Act takes effect September 1, 2021.

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