

By: Hughes

S.B. No. 34

A BILL TO BE ENTITLED

AN ACT

relating to a uniform coordination of benefits questionnaire for health benefit plans.

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

SECTION 1. Chapter 1203, Insurance Code, is amended by adding Subchapter D to read as follows:

SUBCHAPTER D. COORDINATION OF BENEFITS QUESTIONNAIRE

Sec. 1203.151. 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 issued 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 company operating under
2 Chapter 884;

3 (7) a Lloyd's plan operating under Chapter 941; or

4 (8) an exchange operating under Chapter 942.

5 (b) Notwithstanding any other law, this subchapter applies
6 to:

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

10 (2) a standard health benefit plan issued under
11 Chapter 1507;

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

13 (4) a basic plan under Chapter 1575;

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

15 (6) a plan providing basic coverage under Chapter
16 1601;

17 (7) alternative health benefit coverage offered by a
18 subsidiary of the Texas Mutual Insurance Company under Subchapter
19 M, Chapter 2054;

20 (8) group health coverage made available by a school
21 district in accordance with Section 22.004, Education Code;

22 (9) the state Medicaid program, including the Medicaid
23 managed care program operated under Chapter 533, Government Code;

24 (10) the child health plan program under Chapter 62,
25 Health and Safety Code;

26 (11) a regional or local health care program operated
27 under Section 75.104, Health and Safety Code; and

1 (12) a self-funded health benefit plan sponsored by a
2 professional employer organization under Chapter 91, Labor Code.

3 Sec. 1203.152. CREATION OF UNIFORM COORDINATION OF BENEFITS
4 QUESTIONNAIRE. In collaboration with appropriate stakeholders,
5 the commissioner shall adopt rules establishing a uniform
6 coordination of benefits questionnaire to be used by all health
7 benefit plan issuers in this state.

8 Sec. 1203.153. UNIFORM COORDINATION OF BENEFITS
9 QUESTIONNAIRE REQUIRED. Each health benefit plan issuer that
10 issues a health benefit plan that includes a coordination of
11 benefits provision shall use the uniform coordination of benefits
12 questionnaire established under Section 1203.152 and make the
13 questionnaire available to health care providers as appropriate.

14 SECTION 2. (a) Not later than the 121st day after the
15 effective date of this Act, the commissioner of insurance shall
16 adopt rules establishing the uniform coordination of benefits
17 questionnaire under Section 1203.152, Insurance Code, as added by
18 this Act.

19 (b) The changes in law made by this Act apply only to the use
20 of a coordination of benefits questionnaire on or after the 151st
21 day after the effective date of this Act.

22 SECTION 3. This Act takes effect on the 91st day after the
23 last day of the legislative session.