

## **BILL ANALYSIS**

C.S.H.B. 118  
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Insurance  
Committee Report (Substituted)

### **BACKGROUND AND PURPOSE**

According to the American Cancer Society, prostate cancer is the second leading cause of cancer deaths among men in the United States and a significant health care problem due to its high incidence. The clinical value of prostate cancer screening across a broad age range has been scientifically validated and endorsed by the American Urological Association, American Cancer Society, National Comprehensive Cancer Network, American Society of Clinical Oncology, and American College of Physicians-American Society of Internal Medicine.

Early detection for men at high risk improves outcomes, and targeting men with risk factors for prostate cancer can reduce health disparities in the populations most impacted by this disease. Existing law requires certain health benefit plans to provide coverage for prostate cancer screening for these at-risk men. However, the cost of preventive care screening services may deter or prevent men, especially those in underserved populations, from undergoing tests to detect early-stage prostate cancer. C.S.H.B. 118 seeks to address this issue by prohibiting health benefit plans from charging any premium, copayment, deductible, coinsurance, or any other form of cost sharing for a covered benefit under the required coverage for prostate cancer screening.

### **CRIMINAL JUSTICE IMPACT**

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

### **RULEMAKING AUTHORITY**

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

### **ANALYSIS**

C.S.H.B. 118 amends the Insurance Code to prohibit a health benefit plan that provides coverage for an annual diagnostic examination for the detection of prostate cancer as required by state law from charging any premium, copayment, coinsurance, deductible, or any other form of cost sharing for a covered benefit under the required coverage, which include a physical examination and, for certain at-risk males, a prostate-specific antigen test.

C.S.H.B. 118 revises the applicability of statutory provisions governing health benefit plan coverage for certain tests to detect prostate cancer as follows:

- expands the applicability to include the following:
  - a Lloyd's plan;
  - a reciprocal and interinsurance exchange;

- a small employer health benefit plan subject to the Health Insurance Portability and Availability Act, including coverage provided through a health group cooperative under that act;
- a standard consumer choice of benefits health benefit plan;
- a basic coverage plan under the Texas Employees Group Benefits Act;
- TRS-Care and TRS-ActiveCare;
- basic coverage under the State University Employees Uniform Insurance Benefits Act;
- group health coverage made available by a school district;
- Medicaid and CHIP;
- a regional or local health care program that contracts with health care providers to provide services directly to the employees of participating small employers and their dependents; and
- a self-funded health benefit plan sponsored by a professional employer organization;
- removes language specifying that the provisions apply to a multiple employer welfare arrangement only to the extent permitted by the federal Employee Retirement Income Security Act of 1974; and
- removes a plan that provides health and accident coverage through a risk pool created under the Texas Political Subdivision Employees Uniform Group Benefits Act from the list of applicable plans.

C.S.H.B. 118 applies only to a health benefit plan delivered, issued for delivery, or renewed on or after January 1, 2024. The bill provides for the delayed implementation of any provision for which an applicable state agency determines a federal waiver or authorization is necessary for implementation until the waiver or authorization is requested and granted.

C.S.H.B. 118 repeals Section 1575.159, Insurance Code.

### **EFFECTIVE DATE**

September 1, 2023.

### **COMPARISON OF INTRODUCED AND SUBSTITUTE**

While C.S.H.B. 118 may differ from the introduced in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute does not include a provision from the introduced that made statutory provisions governing health benefit plan coverage for certain tests to detect prostate cancer applicable to health benefits provided by or through a church benefits board. The substitute removes a health benefit plan that provides health and accident coverage through a risk pool created under the Texas Political Subdivision Employees Uniform Group Benefits Act from the applicability of such provisions, whereas the introduced did not.