

BILL ANALYSIS

H.B. 389
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Insurance
Committee Report (Unamended)

BACKGROUND AND PURPOSE

A medically reviewed article on WebMD indicates that about 10 percent of new cancer diagnoses in this country occur in patients age 45 and under. According to the Department of State Health Services, approximately 7,800 Texans between the age of 15 and 39 are diagnosed with cancer each year. Patients undergoing chemotherapy often experience egg or sperm damage or infertility. Fertility preservation services allow patients to freeze healthy eggs, sperm, or embryos. Though fertility preservation allows patients with a viable way to start a family, the price tag associated with the service is largely cost-prohibitive. Currently, Texas provides insurance coverage for in vitro fertilization, though no coverage is required for fertility preservation.

The lack of insurance coverage for fertility preservation services for cancer patients was raised by a group of such patients who learned that their health insurance plan would not cover the services. The cost for fertility preservation services for women can range anywhere from \$10,000 to \$15,000 with additional storage fees of \$300 to \$600 per year according to the Alliance for Fertility Preservation, and services for men can range from \$1,000 to \$12,000 with storage fees similar to those for women. This cost is often prohibitive for cancer patients hoping to start a family. H.B. 389 seeks to remove that prohibitive cost barrier for cancer patients to access fertility preservation services by requiring certain health benefit plans to provide coverage for these services to a covered individual who will receive certain medically necessary treatments.

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

H.B. 389 amends the Insurance Code to require certain health benefit plans to provide coverage for fertility preservation services to a covered person who will receive a medically necessary treatment, including surgery, chemotherapy, and radiation, that the American Society of Clinical Oncology or the American Society for Reproductive Medicine has established may directly or indirectly cause impaired fertility. The bill requires those fertility preservation services to be standard procedures to preserve fertility consistent with established medical practices or professional guidelines published by the American Society of Clinical Oncology or the American Society for Reproductive Medicine.

H.B. 389 specifies the types of plans to which its provisions apply and establishes exceptions to that applicability for CHIP, Medicaid, Medicaid managed care, or a health benefit plan that provides coverage for wages or payments in lieu of wages for a period during which an employee is absent from work because of sickness or injury or that provides coverage only for hospital expenses.

H.B. 389 applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2024.

EFFECTIVE DATE

September 1, 2023.