

1-1 By: Johnson of Dallas, et al. H.B. No. 109  
1-2 (Senate Sponsor - Zaffirini)  
1-3 (In the Senate - Received from the House April 24, 2023;  
1-4 April 25, 2023, read first time and referred to Committee on  
1-5 Administration; April 26, 2023, reported favorably by the  
1-6 following vote: Yeas 7, Nays 0; April 26, 2023, sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	Hall	X		
1-10	Springer	X		
1-11	Alvarado	X		
1-12	Johnson	X		
1-13	Menéndez	X		
1-14	Middleton	X		
1-15	Parker	X		

1-16 A BILL TO BE ENTITLED  
1-17 AN ACT

1-18 relating to health benefit coverage for hearing aids for children  
1-19 and adults.

1-20 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-21 SECTION 1. Chapter 1365, Insurance Code, is amended by  
1-22 designating Sections 1365.001 through 1365.004 as Subchapter A and  
1-23 adding a subchapter heading to read as follows:

1-24 SUBCHAPTER A. GENERAL PROVISIONS

1-25 SECTION 2. Sections 1365.001 and 1365.002, Insurance Code,  
1-26 are amended to read as follows:

1-27 Sec. 1365.001. APPLICABILITY OF SUBCHAPTER [~~CHAPTER~~]. This  
1-28 subchapter [~~chapter~~] applies only to a group health benefit plan  
1-29 that provides hospital and medical coverage on an expense-incurred,  
1-30 service, or prepaid basis, including a group policy, contract, or  
1-31 plan that is offered in this state by:

1-32 (1) an insurer;

1-33 (2) a group hospital service corporation operating  
1-34 under Chapter 842; or

1-35 (3) a health maintenance organization operating under  
1-36 Chapter 843.

1-37 Sec. 1365.002. APPLICABILITY OF GENERAL PROVISIONS OF OTHER  
1-38 LAW. The provisions of Chapter 1201, including provisions relating  
1-39 to the applicability, purpose, and enforcement of that chapter,  
1-40 construction of policies under that chapter, rulemaking under that  
1-41 chapter, and definitions of terms applicable in that chapter, apply  
1-42 to this subchapter [~~chapter~~].

1-43 SECTION 3. Chapter 1365, Insurance Code, is amended by  
1-44 adding Subchapter B to read as follows:

1-45 SUBCHAPTER B. HEARING AID COVERAGE

1-46 Sec. 1365.051. APPLICABILITY. (a) This subchapter applies  
1-47 only to a health benefit plan that provides benefits for medical or  
1-48 surgical expenses incurred as a result of a health condition,  
1-49 accident, or sickness, including an individual, group, blanket, or  
1-50 franchise insurance policy or insurance agreement, a group hospital  
1-51 service contract, or an individual or group evidence of coverage or  
1-52 similar coverage document that is offered by:

1-53 (1) an insurance company;

1-54 (2) a group hospital service corporation operating  
1-55 under Chapter 842;

1-56 (3) a health maintenance organization operating under  
1-57 Chapter 843;

1-58 (4) an approved nonprofit health corporation that  
1-59 holds a certificate of authority under Chapter 844;

1-60 (5) a multiple employer welfare arrangement that holds  
1-61 a certificate of authority under Chapter 846;

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

2-3 (7) a fraternal benefit society operating under  
2-4 Chapter 885;

2-5 (8) a Lloyd's plan operating under Chapter 941; or

2-6 (9) an exchange operating under Chapter 942.

2-7 (b) This subchapter applies to coverage under a group health  
2-8 benefit plan described by Subsection (a) provided to a resident of  
2-9 this state, regardless of whether the group policy, agreement, or  
2-10 contract is delivered, issued for delivery, or renewed within or  
2-11 outside this state.

2-12 (c) Notwithstanding any other law, this subchapter applies  
2-13 to:

2-14 (1) a small employer health benefit plan subject to  
2-15 Chapter 1501, including coverage provided through a health group  
2-16 cooperative under Subchapter B of that chapter;

2-17 (2) a standard health benefit plan issued under  
2-18 Chapter 1507;

2-19 (3) a basic coverage plan under Chapter 1551;

2-20 (4) a basic plan under Chapter 1575;

2-21 (5) a primary care coverage plan under Chapter 1579;

2-22 (6) a plan providing basic coverage under Chapter  
2-23 1601;

2-24 (7) a regional or local health care program operated  
2-25 under Section 75.104, Health and Safety Code; and

2-26 (8) a self-funded health benefit plan sponsored by a  
2-27 professional employer organization under Chapter 91, Labor Code.

2-28 Sec. 1365.052. EXCEPTION. This subchapter does not apply  
2-29 to:

2-30 (1) a plan that provides coverage:

2-31 (A) for wages or payments in lieu of wages for a  
2-32 period during which an employee is absent from work because of  
2-33 sickness or injury; or

2-34 (B) only for hospital expenses; or

2-35 (2) the state Medicaid program, including the Medicaid  
2-36 managed care program operated under Chapter 533, Government Code.

2-37 Sec. 1365.053. CHOICE OF HEARING AID. (a) A health benefit  
2-38 plan that provides coverage for hearing aids may not deny an  
2-39 enrollee's claim for a hearing aid solely on the basis that the  
2-40 price of the hearing aid is more than the benefit available under  
2-41 the health benefit plan.

2-42 (b) Notwithstanding Section 1367.253(d), this section  
2-43 applies to a health benefit plan subject to Subchapter F, Chapter  
2-44 1367.

2-45 (c) Nothing in this section requires a health benefit plan  
2-46 to pay an enrollee's claim for a hearing aid in an amount that is  
2-47 more than the benefit available under the health benefit plan.

2-48 SECTION 4. This Act applies only to a health benefit plan  
2-49 that is delivered, issued for delivery, or renewed on or after  
2-50 January 1, 2024.

2-51 SECTION 5. This Act takes effect September 1, 2023.

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