H.B. No. 916

1	AN ACT
2	relating to health benefit plan coverage of prescription
3	contraceptive drugs.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 1369.102, Insurance Code, is amended to
6	read as follows:
7	Sec. 1369.102. APPLICABILITY OF SUBCHAPTER. <u>Except as</u>
8	otherwise provided by this subchapter, this [ <del>This</del> ] subchapter
9	applies only to a health benefit plan, including a small employer
10	health benefit plan written under Chapter 1501, that provides
11	benefits for medical or surgical expenses incurred as a result of a
12	health condition, accident, or sickness, including an individual,
13	group, blanket, or franchise insurance policy or insurance
14	agreement, a group hospital service contract, or an individual or
15	group evidence of coverage or similar coverage document that is
16	offered by:
17	<pre>(1) an insurance company;</pre>
18	(2) a group hospital service corporation operating
19	under Chapter 842;
20	(3) a fraternal benefit society operating under
21	Chapter 885;
22	(4) a stipulated premium company operating under
23	Chapter 884;
24	(5) a reciprocal exchange operating under Chapter 942;

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H.B. No. 916 1 (6) a health maintenance organization operating under 2 Chapter 843; 3 (7)a multiple employer welfare arrangement that holds a certificate of authority under Chapter 846; or 4 5 (8) an approved nonprofit health corporation that 6 holds a certificate of authority under Chapter 844. 7 SECTION 2. Subchapter C, Chapter 1369, Insurance Code, is 8 amended by adding Section 1369.1031 to read as follows: 9 Sec. 1369.1031. CERTAIN COVERAGE REQUIRED. (a) This section applies to a health benefit plan described by Section 10 1369.102. 11 12 (b) Notwithstanding any other law, this section applies to: (1) a standard health benefit plan issued under 13 14 Chapter 1507; 15 (2) a basic coverage plan under Chapter 1551; 16 (3) a basic plan under Chapter 1575; 17 (4) a primary care coverage plan under Chapter 1579; (5) a plan providing basic coverage under Chapter 18 19 1601; (6) group health coverage made available by a school 20 district in accordance with Section 22.004, Education Code; and 21 22 (7) the state Medicaid program, including the Medicaid 23 managed care program operated under Chapter 533, Government Code. 24 (c) A health benefit plan that provides benefits for a prescription contraceptive drug must provide for an enrollee to 25 26 obtain up to: 27 (1) a three-month supply of the covered prescription

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contraceptive drug at one time the first time the enrollee obtains 1 2 the drug; and 3 (2) a 12-month supply of the covered prescription contraceptive drug at one time each subsequent time the enrollee 4 obtains the same drug, regardless of whether the enrollee was 5 enrolled in the health benefit plan the first time the enrollee 6 7 obtained the drug. 8 (d) An enrollee may obtain only one 12-month supply of a covered prescription contraceptive drug during each 12-month 9 10 period. SECTION 3. The change in law made by this Act applies only 11 to a health benefit plan that is delivered, issued for delivery, or 12 renewed on or after January 1, 2024. A health benefit plan that is 13

15 is governed by the law as it existed immediately before the 16 effective date of this Act, and that law is continued in effect for 17 that purpose.

delivered, issued for delivery, or renewed before January 1, 2024,

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SECTION 4. This Act takes effect September 1, 2023.

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President of the Senate

Speaker of the House

I certify that H.B. No. 916 was passed by the House on April 18, 2023, by the following vote: Yeas 136, Nays 9, 1 present, not voting; and that the House concurred in Senate amendments to H.B. No. 916 on May 19, 2023, by the following vote: Yeas 137, Nays 3, 2 present, not voting.

## Chief Clerk of the House

I certify that H.B. No. 916 was passed by the Senate, with amendments, on May 17, 2023, by the following vote: Yeas 31, Nays O.

Secretary of the Senate

APPROVED: \_\_\_\_\_

Date

Governor