1-1 By: Button, et al. (Senate Sponsor - Parker) H.B. No. 1649 1-2 (In the Senate - Received from the House May 8, 2023; 1-3 May 9, 2023, read first time and referred to Committee on Health & 1-4 Human Services; May 21, 2023, reported favorably by the following 1-5 vote: Yeas 6, Nays 2, one present not voting; May 21, 2023, sent to 1-6 printer.)

1-7

COMMITTEE VOTE

1-8		Yea	Nay	Absent	PNV
1-9	Kolkhorst	Х	-		
1-10	Perry	Х			
1-11	Blanco	Х			
1-12	Hall		Х		
1-13	Hancock	Х			
1-14	Hughes	Х			
1-15	LaMantia				Х
1-16	Miles	Х			
1-17	Sparks		Х		

1**-**18 1**-**19

A BILL TO BE ENTITLED AN ACT

1-20 relating to health benefit coverage for certain fertility 1-21 preservation services under certain health benefit plans. 1-22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-23 SECTION 1. Chapter 1366, Insurance Code, is amended by 1-24 adding Subchapter C to read as follows:

1-25 COVERAGE FOR CERTAIN FERTILITY PRESERVATION SERVICES SUBCHAPTER C. Sec. 1366.101. 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 1-26 1-27 1-28 health condition, accident, or sickness, including an individual, 1-29 1-30 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 in this state by: 1-31 1-32 1-33 (1) an insurance company; 1-34 (2) 1-35 a group hospital service corporation operating under Chapter 842; 1-36 1-37 (3) a health maintenance organization operating under 1-38 Chapter 843; 1-39 (4)an approved nonprofit health corporation that 1-40 holds a certificate of authority under Chapter 844; 1-41 (5) a multiple employer welfare arrangement that holds authority under Chapter 846; a stipulated premium company 1-42 a certificate of (6)1-43 operating under Chapter 884; 1-44 1-45 a fraternal benefit society operating under (7)Chapt<u>er 885;</u> 1-46 1-47 a Lloyd's plan operating under Chapter 941; or (8)1-48 (9) an exchange operating under Chapter 942. 1-49 Notwithstanding any other law, this subchapter applies (b) 1-50 to: 1-51 (1) a small employer health benefit plan subject to Chapter 1501, including coverage provided through a health group cooperative under Subchapter B of that chapter; and 1-52 1-53 1-54 a standard health benefit plan (2) issued under 1-55 Chapter 1507. 1-56 Sec. 1366.102. EXCEPTIONS. This subchapter does not apply 1-57 to: 1-58 a health benefit plan that provides coverage: (1)(A) for wages or payments in lieu of wages for a 1-59 1-60 period during which an employee is absent from work because of sickness or injury; or 1-61

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	II.D. NO. 1049
2-1	(B) only for hospital expenses;
2-2	(2) Medicaid managed care programs operated under
2-3	Chapter 533, Government Code;
2-4	(3) Medicaid programs operated under Chapter 32, Human
2-5	Resources Code; or
2-6	(4) the state child health plan operated under Chapter
2-7	62 or 63, Health and Safety Code.
2-8	Sec. 1366.103. REQUIRED COVERAGE. (a) Subject to
2-9	Subsection (b), a health benefit plan must provide coverage for
2-10	fertility preservation services to a covered person who will
2-11	receive a medically necessary treatment, including surgery,
2-12	chemotherapy, and radiation, that the American Society of Clinical
2-13	Oncology or the American Society for Reproductive Medicine has
2-14	established may directly or indirectly cause impaired fertility.
2-15	(b) The fertility preservation services described by
2-16	Subsection (a) must be standard procedures to preserve fertility
2-17	consistent with established medical practices or professional
2-18	guidelines published by the American Society of Clinical Oncology
2-19	or the American Society for Reproductive Medicine.
2-20	SECTION 2. This Act applies only to a health benefit plan
2-21	that is delivered, issued for delivery, or renewed on or after
2-22	January 1, 2024.
2-23	SECTION 3. This Act takes effect September 1, 2023.

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