H.B. No. 3912

A BILL TO BE ENTITLED 1 AN ACT 2 relating to the applicability of health benefit plan cost-sharing requirements for prescription insulin. 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 5 SECTION 1. Sections 1358.101(a) and (c), Insurance Code, are amended to read as follows: 6 7 (a) This subchapter applies only to a health benefit plan that provides benefits for medical or surgical expenses incurred as 8 a result of a health condition, accident, or sickness, including an 9 individual, group, blanket, or franchise insurance policy or 10 insurance agreement, a group hospital service contract, or a small 11 12 or large employer group contract or similar coverage document that is offered by: 13 14 an insurance company; a group hospital service corporation operating 15 (2) 16 under Chapter 842; (3) a fraternal benefit society operating under 17 Chapter 885; 18 (4) a stipulated premium company operating under 19 Chapter 884; 20 21 (5) a reciprocal exchange operating under Chapter 942; 22 a health maintenance organization operating under (6) 23 Chapter 843; 24 (7) a multiple employer welfare arrangement that holds

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H.B. No. 3912 1 a certificate of authority under Chapter 846; [or] (8) an approved nonprofit health corporation that 2 3 holds a certificate of authority under Chapter 844; or (9) a Lloyd's plan operating under Chapter 941. 4 5 (c) Notwithstanding any provision in Chapter 1551, 1575, 1579, or 1601 or any other law, this subchapter applies to: 6 7 a small employer health benefit plan subject to (1)Chapter 1501, including coverage provided through a health group 8 cooperative under Subchapter B of that chapter; 9 10 (2) a standard health benefit plan issued under Chapter 1507; 11 12 (3) a basic coverage plan under Chapter 1551; (4) [(2)] a basic plan under Chapter 1575; 13 14 (5) [(3)] a primary care coverage plan under Chapter 15 1579; [and] (6) [(4)] basic coverage under Chapter 1601; 16 17 (7) nonprofit agricultural organization health benefits offered by a nonprofit agricultural organization under 18 19 Chapter 1682; (8) alternative health benefit coverage offered by a 20 subsidiary of the Texas Mutual Insurance Company under Subchapter 21 22 M, Chapter 2054; 23 (9) health benefits provided by or through a church 24 benefits board under Subchapter I, Chapter 22, Business Organizations Code; 25 26 (10) a regional or local health care program operated under Section 75.104, Health and Safety Code; 27

H.B. No. 3912 (11) a self-funded health benefit plan sponsored by a 1 professional employer organization under Chapter 91, Labor Code; 2 (12) county employee group health benefits provided 3 under Chapter 157, Local Government Code; and 4 (13) health and accident coverage provided by a risk 5 pool created under Chapter 172, Local Government Code. 6 7 SECTION 2. Section 1358.102, Insurance Code, is amended to 8 read as follows: 9 Sec. 1358.102. EXCEPTION. This subchapter does not apply 10 to: a health benefit plan that provides coverage: 11 (1) 12 (A) only for a specified disease or for another single benefit; 13 only for accidental death or dismemberment; 14 (B) for wages or payments in lieu of wages for a 15 (C) period during which an employee is absent from work because of 16 17 sickness or injury; (D) as a supplement to a liability insurance 18 19 policy; (E) for credit insurance; 20 21 (F) only for dental or vision care; only for hospital expenses; or 2.2 (G) only for indemnity for hospital confinement; 23 (H) 24 (2) a Medicare supplemental policy as defined by Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss); 25 26 (3) medical payment insurance coverage provided under 27 a motor vehicle insurance policy;

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H.B. No. 3912

1 (4) a long-term care insurance policy, including a 2 nursing home fixed indemnity policy, unless the commissioner 3 determines that the policy provides benefit coverage so 4 comprehensive that the policy is a health benefit plan as described 5 by Section 1358.101; or

6 (5) [health and accident coverage provided by a risk
7 pool created under Chapter 172, Local Government Code; or

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[(6)] a workers' compensation insurance policy.

9 SECTION 3. The changes in law made by this Act apply only to 10 a health benefit plan that is delivered, issued for delivery, or 11 renewed on or after January 1, 2024. A health benefit plan 12 delivered, issued for delivery, or renewed before January 1, 2024, 13 is governed by the law as it existed immediately before the 14 effective date of this Act, and that law is continued in effect for 15 that purpose.

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

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