By: Harris of Williamson H.B. No. 4501

## A BILL TO BE ENTITLED

1	AN ACT
2	relating to a uniform coordination of benefits questionnaire for
3	health benefit plans.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Chapter 1203, Insurance Code, is amended by
6	adding Subchapter C to read as follows:
7	SUBCHAPTER C. COORDINATION OF BENEFITS QUESTIONNAIRE
8	Sec. 1203.101. APPLICABILITY OF SUBCHAPTER. (a) This
9	subchapter applies only to a health benefit plan that provides
10	benefits for medical or surgical expenses incurred as a result of a
11	health condition, accident, or sickness, including an individual,
12	group, blanket, or franchise insurance policy or insurance
13	agreement, a group hospital service contract, or an individual or
14	group evidence of coverage or similar coverage document that is
15	issued by:
16	(1) an insurance company;
17	(2) a group hospital service corporation operating
18	under Chapter 842;
19	(3) a health maintenance organization operating under
20	Chapter 843;
21	(4) an approved nonprofit health corporation that
22	holds a certificate of authority under Chapter 844;
23	(5) a multiple employer welfare arrangement that holds
24	a certificate of authority under Chapter 846;

```
H.B. No. 4501
```

```
(6) a stipulated premium company operating under
1
2
   Chapter 884;
3
               (7) a fraternal benefit society operating under
4
   Chapter 885;
5
              (8) a Lloyd's plan operating under Chapter 941; or
              (9) an exchange operating under Chapter 942.
6
7
         (b) Notwithstanding any other law, this subchapter applies
8
   to:
9
              (1) a small employer health benefit plan subject to
   Chapter 1501, including coverage provided through a health group
10
   cooperative under Subchapter B of that chapter;
11
12
               (2) a standard health benefit plan issued under
   Chapter 1507;
13
14
               (3) a basic coverage plan under Chapter 1551;
15
              (4) a basic plan under Chapter 1575;
16
              (5) a primary care coverage plan under Chapter 1579;
17
               (6) a plan providing basic coverage under Chapter
18
   1601;
              (7) nonprofit agricultural organization health
19
   benefits offered by a nonprofit agricultural organization under
20
21
   Chapter 1682;
22
               (8) alternative health benefit coverage offered by a
   subsidiary of the Texas Mutual Insurance Company under Subchapter
23
24
   M, Chapter 2054;
25
              (9) health benefits provided by or through a church
26
   benefits board under Subchapter I, Chapter 22, Business
   Organizations Code;
27
```

- 1 (10) group health coverage made available by a school
- 2 district in accordance with Section 22.004, Education Code;
- 3 (11) the state Medicaid program, including the
- 4 Medicaid managed care program operated under Chapter 533,
- 5 Government Code;
- 6 (12) the child health plan program under Chapter 62,
- 7 <u>Health and Safety Code;</u>
- 8 <u>(13) a regional or local health care program operated</u>
- 9 under Section 75.104, Health and Safety Code;
- 10 (14) a self-funded health benefit plan sponsored by a
- 11 professional employer organization under Chapter 91, Labor Code;
- 12 (15) county employee group health benefits provided
- 13 under Chapter 157, Local Government Code; and
- 14 (16) health and accident coverage provided by a risk
- 15 pool created under Chapter 172, Local Government Code.
- Sec. 1203.102. CREATION OF UNIFORM COORDINATION OF BENEFITS
- 17 QUESTIONNAIRE. In collaboration with appropriate stakeholders,
- 18 the commissioner shall adopt rules establishing a uniform
- 19 coordination of benefits questionnaire to be used by all health
- 20 benefit plan issuers and administrators in this state.
- 21 Sec. 1203.103. UNIFORM COORDINATION OF BENEFITS
- 22 QUESTIONNAIRE REQUIRED. Each health benefit plan issuer and
- 23 <u>administrator</u> shall use the uniform coordination of benefits
- 24 questionnaire established under Section 1203.102 and make the
- 25 questionnaire available to health care providers as appropriate.
- SECTION 2. (a) Not later than January 1, 2024, the
- 27 commissioner of insurance shall adopt rules establishing the

H.B. No. 4501

- 1 uniform coordination of benefits questionnaire under Section
- 2 1203.102, Insurance Code, as added by this Act.
- 3 (b) The changes in law made by this Act apply only to the use
- 4 of a coordination of benefits questionnaire on or after February 1,
- 5 2024.
- 6 SECTION 3. This Act takes effect September 1, 2023.