

BILL ANALYSIS

H.B. 5178
By: Howard
Insurance
Committee Report (Unamended)

BACKGROUND AND PURPOSE

The bill author has informed the committee that biomarker testing has become an increasingly common tool used to detect, manage, and treat a range of conditions. The 88th Texas Legislature passed legislation that required certain health benefit plans to cover biomarker tests supported by medical and scientific evidence such as FDA approval or Centers for Medicare and Medicaid Services coverage decisions. However, the bill author has further informed the committee that while this legislation helped ensure that Texans receiving treatment for diseases such as cancer are covered by insurance, health benefit plans are not explicitly required to cover biomarker testing for organ transplants despite the value of this testing in detecting graft rejection, monitoring graft status, and evaluating the efficacy of immunosuppressive therapy, resulting in individuals being required to pay out of pocket. H.B. 5178 seeks to ensure that Texans who received an organ transplant have equitable access to the best that modern medicine has to offer by requiring health benefit plans to provide biomarker testing coverage for enrollees who have received an organ transplant, subject to the same conditions prescribed under current law for biomarker testing for other diseases or conditions.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 5178 amends the Insurance Code to revise the requirement for a health benefit plan to provide coverage for biomarker testing for the purpose of diagnosis, treatment, appropriate management, or ongoing monitoring of an enrollee's disease or condition to guide treatment when the test is supported by certain kinds of medical and scientific evidence by specifying that an applicable condition includes the condition of having received an organ transplant.

If before implementing any of the bill's provisions a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision must request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

H.B. 5178 applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2026. A health benefit plan delivered, issued for delivery, or renewed before that date is governed by the law as it existed immediately before the bill's effective date, and that law is continued in effect for that purpose.

EFFECTIVE DATE

September 1, 2025.