

1-1 By: Guillen, et al. (Senate Sponsor - Schwertner) H.B. No. 2516
1-2 (In the Senate - Received from the House May 6, 2025;
1-3 May 7, 2025, read first time and referred to Committee on Health &
1-4 Human Services; May 19, 2025, reported favorably by the following
1-5 vote: Yeas 6, Nays 0; May 19, 2025, sent to printer.)

1-6 COMMITTEE VOTE

1-7	Yea	Nay	Absent	PNV
1-8	X			
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13			X	
1-14			X	
1-15			X	
1-16	X			

1-17 A BILL TO BE ENTITLED
1-18 AN ACT

1-19 relating to the eligibility of certain individuals younger than 65
1-20 years of age to purchase Medicare supplement benefit plans.

1-21 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-22 SECTION 1. This Act shall be known as the Chris Larkin ALS
1-23 Act.

1-24 SECTION 2. Subchapter B, Chapter 1652, Insurance Code, is
1-25 amended by adding Sections 1652.059 and 1652.060 to read as
1-26 follows:

1-27 Sec. 1652.059. COVERAGE FOR CERTAIN INDIVIDUALS YOUNGER
1-28 THAN 65. (a) In this section, "entity" means an entity that
1-29 delivers or issues for delivery a Medicare supplement benefit plan
1-30 in this state.

1-31 (b) An entity that offers coverage under a Medicare
1-32 supplement benefit plan to individuals 65 years of age or older must
1-33 offer the same coverage to individuals younger than 65 years of age
1-34 who are eligible for and enrolled in Medicare by reason of
1-35 disability, end stage renal disease, or amyotrophic lateral
1-36 sclerosis.

1-37 (c) Except as otherwise provided by rules adopted under
1-38 Section 1652.051, any benefit, protection, policy, or procedure
1-39 applicable to coverage under a plan for an individual 65 years of
1-40 age or older must apply to coverage offered under Subsection (b).

1-41 (d) A standardized Plan A, Plan B, or Plan D Medicare
1-42 supplement benefit plan offered under Subsection (b) must be
1-43 offered at the same premium rate charged for the plan to an
1-44 individual 65 years of age. A premium rate for a Medicare
1-45 supplement benefit plan offered under Subsection (b), other than
1-46 Plan A, Plan B, or Plan D, may not exceed 200 percent of the premium
1-47 rate charged for the same plan to an individual 65 years of age.

1-48 Sec. 1652.060. ENROLLMENT PERIOD FOR CERTAIN INDIVIDUALS
1-49 YOUNGER THAN 65. (a) In this section, "entity" means an entity
1-50 that delivers or issues for delivery a Medicare supplement benefit
1-51 plan in this state.

1-52 (b) An individual eligible for coverage under a Medicare
1-53 supplement benefit plan under Section 1652.059 may enroll any time
1-54 during the six-month period beginning the first day of the first
1-55 month the individual becomes enrolled for benefits under Medicare
1-56 Part B.

1-57 (c) During an enrollment period, an entity may not, with
1-58 respect to an applicant who is an individual described by
1-59 Subsection (b):

1-60 (1) deny or condition the issuance or effectiveness of
1-61 a Medicare supplement benefit plan or certificate that the entity

offers and is available for issuance in this state;

(2) subject the applicant to medical underwriting or discriminate in the price of a Medicare supplement benefit plan or certificate because of the applicant's health status, claims experience, receipt of health care, or medical condition;

(3) impose a waiting period; or

(4) impose a limitation or exclusion of benefits based on the applicant's preexisting condition.

(d) The commissioner shall adopt rules as necessary to administer this section, including rules designating enrollment periods.

SECTION 3. The changes in law made by this Act apply only to a Medicare supplement benefit plan delivered, issued for delivery, or renewed on or after September 1, 2025.

SECTION 4. In addition to other enrollment periods provided by law, an individual younger than 65 years of age and enrolled in Medicare Part B by reason of disability, end stage renal disease, or amyotrophic lateral sclerosis on the effective date of this Act may apply for coverage under a Medicare supplement benefit plan:

(1) after August 31, 2025, and before March 2, 2026; or

(2) if the individual is unable to submit an application for coverage under the plan during the period described by Subdivision (1) of this section because the application is not available and the individual requested the application during that period, during a six-month period beginning on the date the application initially becomes available.

SECTION 5. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2025.

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