# **BILL ANALYSIS**

Senate Research Center

C.S.S.B. 172 By: Zaffirini Health & Human Services 3-4-97 Committee Report (Substituted)

# **DIGEST**

Currently, Texas law requires immunizations of children by the time they enter school, which is generally when they are six years old. The Insurance Code does not require health benefit plans to pay for immunizations of children of those insured. This bill would require certain health benefit plans to pay for certain immunizations of children between the years of 0 to 6 of those insured by the plans.

# **PURPOSE**

As proposed, C.S.S.B. 172 requires certain health care plans to provide childhood immunizations for certain diseases without requiring the insured to pay a deductible, copayment, or coinsurance requirement.

### **RULEMAKING AUTHORITY**

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

# **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Chapter 21E, Insurance Code, by adding Article 21.53F, as follows:

Art. 21.53F. COVERAGE FOR CHILDHOOD IMMUNIZATIONS

Sec. 1. DEFINITION. Defines "health benefit plan."

Sec. 2. SCOPE OF ARTICLE. Sets forth the health benefit plans that are within the scope of this article and those that are not within the scope of this article. Provides that a long-term care policy is not within the scope of this article unless the commissioner of the Texas Department of Insurance (commissioner) determines that such a policy provides benefit coverage so comprehensive that the policy is a health benefit plans as described by Subsection (a) of this section.

Sec. 3. REQUIRED BENEFIT FOR CHILDHOOD IMMUNIZATIONS. Requires a health benefit plan that provides benefits for a family member of the insured to provide immunization for each child described in this section, from birth through the date the child is six years of age, for diphtheria, haemophilus influenzae type b; hepatitis B; measles; mumps; pertussis; polio; rubella; tetanus; varicella; and any other immunization that is required by law for the child. Provides that a child is entitled to benefits under this section if the child, as a result of the child's relationship to an enrollee in the health benefit plan, would be entitled to benefits under an accident and sickness insurance policy under Subsection (K), (L), or (M), Article 3.70-2, Insurance Code.

Sec. 4. FIRST DOLLAR COVERAGE REQUIRED. Prohibits the benefits required under Section 3 from being made subject to a deductible, copayment, or coinsurance requirement. Provides that Subsection (a) of this section does not prohibit the application of a deductible, copayment, or coinsurance requirement to another service provided at the same time as the immunization.

SECTION 2. Effective date: September 1, 1997.

SECTION 3. Emergency clause.

# **SUMMARY OF COMMITTEE CHANGES**

Amends SECTION 1, Section 2, Article 21.53F Insurance Code, to provide that this article applies to, among others, certain health benefit plans offered by a multiple employer welfare arrangement subject to regulation under Chapter 3I, Insurance Code. Deletes proposed provisions providing that this article applies to certain health benefit plans offered by a multiple employer welfare arrangement as defined by Section 3, Employee Retirement Income Security Act of 1974 (29 U.S.C. Section 1002), or those plans offered by any other entity not licensed under this code or another insurance law of this state that contracts directly for health care services on a risk sharing basis, including an entity that contracts for health care services on a capitation basis. Amends proposed provisions in Subsection (b), to provide that this article does not apply to a small employer health benefit plan written under Chapter 26, Insurance Code, or a plan that provides coverage for limited benefits, credited insurance, limited to dental care or care of vision, or hospital confinement indemnity coverage. Make nonsubstantive changes.

Amends SECTION 1, Section 3, Article 21.53F, Insurance Code, to revise proposed provisions in which children are entitled to benefits under this section.

Amends SECTION 1, Section 4, Article 21.53F, Insurance Code, to revise proposed provisions in regard to the prohibition of a deductible, copayment, or coinsurance requirement.