

BILL ANALYSIS

Senate Research Center
86R31723 PMO-D

C.S.H.B. 170
By: Bernal et al. (Alvarado)
Business & Commerce
5/19/2019
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

C.S.H.B. 170 amends current law relating to coverage for mammography under certain health benefit plans.

RULEMAKING AUTHORITY

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

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 1356.001, Insurance Code, by adding Subdivision (1-a), as follows:

(1-a) Defines "diagnostic mammogram" to mean an imaging examination designed to evaluate:

- (A) a subjective or objective abnormality detected by a physician in a breast;
- (B) an abnormality seen by a physician on a screening mammogram;
- (C) an abnormality previously identified by a physician as probably benign in a breast for which follow-up imaging is recommended by a physician; or
- (D) an individual with a personal history of breast cancer.

SECTION 2. Amends Section 1356.002, Insurance Code, by amending Subsection (g) and adding Subsection (i), as follows:

(g) Provides that, notwithstanding any provision in Chapter 1551 (Texas Employees Group Benefit Act), 1575 (Texas Public School Employees Group Benefits Program), 1579 (Texas School Employees Uniform Group Health Coverage), or 1601 (Uniform Insurance Benefits Acts for Employees of the University of Texas System and the Texas A&M University System) or any other law, this chapter (Mammography) applies to:

- (1) makes nonsubstantive changes to this subdivision;
- (2) a basic plan under Chapter 1575;
- (3) a primary care coverage plan under Chapter 1579; and
- (4) basic coverage under Chapter 1601.

(i) Provides that, to the extent allowed by federal law, this chapter applies to:

- (1) the state Medicaid program operated under Chapter 32 (Medical Assistance Program, Human Resources Code); and

(2) a Medicaid managed care program operated under Chapter 533 (Medicaid Managed Care Program), Government Code.

SECTION 3. Amends Section 1356.005, Insurance Code, by adding Subsection (a-1) to require a health benefit plan that provides coverage for a screening mammogram to provide coverage for a diagnostic mammogram that is no less favorable than the coverage for a screening mammogram.

SECTION 4. Repealer: Section 1356.0021 (Exceptions), Insurance Code.

SECTION 5. Requires an agency affected by the provision, if before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, to request the waiver or authorization and authorizes the agency to delay implementing that provision until the waiver or authorization is granted.

SECTION 6. Makes application of this Act prospective to January 1, 2020.

SECTION 7. Effective date: September 1, 2019.