

House Bill 1036
Senate Amendments
Section-by-Section Analysis

HOUSE VERSION

SECTION 1. The heading to Chapter 1356, Insurance Code, is amended to read as follows:

CHAPTER 1356. ~~[LOW-DOSE]~~ MAMMOGRAPHY

SECTION 2. Sections 1356.001 and 1356.002, Insurance Code, are amended to read as follows:

Sec. 1356.001. DEFINITIONS ~~[DEFINITION]~~. In this chapter:

(1) "Breast tomosynthesis" means a radiologic mammography procedure that involves the acquisition of projection images over a stationary breast to produce cross-sectional digital three-dimensional images of the breast from which applicable breast cancer screening diagnoses may be determined.

(2) "Low-dose[,"low-dose] mammography" means:

(A) the x-ray examination of the breast using equipment dedicated specifically for mammography, including an x-ray tube, filter, compression device, and screens, ~~[films, and cassettes,]~~ with an average radiation exposure delivery of less than one rad mid-breast and[;] with two views for each breast;

(B) digital mammography; or

(C) breast tomosynthesis.

Sec. 1356.002. APPLICABILITY OF CHAPTER. (a) This chapter applies ~~[only]~~ to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage that is provided by a health group cooperative under Subchapter B of that chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including ~~[is delivered, issued for delivery, or renewed in this state and that is]~~ an individual, ~~[or]~~ group, blanket, or franchise ~~[accident and health]~~ insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of

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SECTION 1. Same as House version.

SECTION 2. Sections 1356.001 and 1356.002, Insurance Code, are amended to read as follows:

Sec. 1356.001. DEFINITIONS ~~[DEFINITION]~~. In this chapter:

(1) "Breast tomosynthesis" means a radiologic mammography procedure that involves the acquisition of projection images over a stationary breast to produce cross-sectional digital three-dimensional images of the breast from which applicable breast cancer screening diagnoses may be determined.

(2) "Low-dose[,"low-dose] mammography" means:

(A) the x-ray examination of the breast using equipment dedicated specifically for mammography, including an x-ray tube, filter, compression device, and screens, ~~[films, and cassettes,]~~ with an average radiation exposure delivery of less than one rad mid-breast and[;] with two views for each breast;

or

(B) digital mammography ~~other than~~ breast tomosynthesis.

Sec. 1356.002. APPLICABILITY OF CHAPTER. (a) This chapter applies ~~[only]~~ to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage that is provided by a health group cooperative under Subchapter B of that chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including ~~[is delivered, issued for delivery, or renewed in this state and that is]~~ an individual, ~~[or]~~ group, blanket, or franchise ~~[accident and health]~~ insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of

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coverage or similar coverage document offered by:

- (1) an insurance company;
 - (2) a group hospital service corporation operating under Chapter 842;
 - (3) a health maintenance organization operating under Chapter 843;
 - (4) an approved nonprofit health corporation that holds a certificate of authority under Chapter 844;
 - (5) a multiple employer welfare arrangement that holds a certificate of authority under Chapter 846;
 - (6) a stipulated premium company operating under Chapter 884;
 - (7) a fraternal benefit society operating under Chapter 885;
 - (8) a Lloyd's plan operating under Chapter 941; or
 - (9) an exchange operating under Chapter 942[, including a policy issued by a group hospital service corporation operating under Chapter 842].
- (b) This chapter applies to coverage under a group health benefit plan described by Subsection (a) provided to a resident of this state, regardless of whether the group policy or contract is delivered, issued for delivery, or renewed within or outside this state.
- (c) This chapter applies to group health coverage made available by a school district in accordance with Section 22.004, Education Code.
- (d) This chapter applies to a self-funded health benefit plan sponsored by a professional employer organization under Chapter 91, Labor Code.
- (e) Notwithstanding Section 22.409, Business Organizations Code, or any other law, this chapter applies to a church benefits board established under Chapter 22, Business Organizations Code.

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coverage or similar coverage document offered by:

- (1) an insurance company;
 - (2) a group hospital service corporation operating under Chapter 842;
 - (3) a health maintenance organization operating under Chapter 843;
 - (4) an approved nonprofit health corporation that holds a certificate of authority under Chapter 844;
 - (5) a multiple employer welfare arrangement that holds a certificate of authority under Chapter 846;
 - (6) a stipulated premium company operating under Chapter 884;
 - (7) a fraternal benefit society operating under Chapter 885;
 - (8) a Lloyd's plan operating under Chapter 941; or
 - (9) an exchange operating under Chapter 942[, including a policy issued by a group hospital service corporation operating under Chapter 842].
- (b) This chapter applies to coverage under a group health benefit plan described by Subsection (a) provided to a resident of this state, regardless of whether the group policy or contract is delivered, issued for delivery, or renewed within or outside this state.
- (c) This chapter applies to group health coverage made available by a school district in accordance with Section 22.004(b), Education Code.
- (d) This chapter applies to a self-funded health benefit plan sponsored by a professional employer organization under Chapter 91, Labor Code.
- (e) Notwithstanding Section 22.409, Business Organizations Code, or any other law, this chapter applies to a church benefits board established under Chapter 22, Business Organizations Code.

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(f) Notwithstanding Section 75.104, Health and Safety Code, or any other law, this chapter applies to a regional or local health care program established under Chapter 75, Health and Safety Code.

(g) Notwithstanding any provision in Chapter 1551 or any other law, this chapter applies to a basic coverage plan under Chapter 1551.

(h) Notwithstanding any other law, a standard health benefit plan provided under Chapter 1507 must provide the coverage required by this chapter.

SECTION 3. Chapter 1356, Insurance Code, is amended by adding Section 1356.0021 to read as follows:

Sec. 1356.0021. EXCEPTIONS. This chapter does not apply to:

(1) the child health plan program operated under Chapter 62, Health and Safety Code;

(2) the health benefits plan for children operated under Chapter 63, Health and Safety Code;

(3) the state Medicaid program operated under Chapter 32, Human Resources Code; and

(4) the Medicaid managed care program operated under Chapter 533, Government Code.

SECTION 4. Section 1356.005(a), Insurance Code, is amended to read as follows:

(a) A health benefit plan that provides coverage to a female who is 35 years of age or older must include coverage for an annual screening by all forms of low-dose mammography for

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(f) Notwithstanding Section 75.104, Health and Safety Code, or any other law, this chapter applies to a regional or local health care program established under Chapter 75, Health and Safety Code.

(g) Notwithstanding any provision in Chapter 1551 or any other law, this chapter applies to a basic coverage plan under Chapter 1551.

(h) Notwithstanding any other law, a standard health benefit plan provided under Chapter 1507 must provide the coverage required by this chapter.

SECTION 3. Chapter 1356, Insurance Code, is amended by adding Sections 1356.0021 and 1356.006 to read as follows:

Sec. 1356.0021. EXCEPTIONS. This chapter does not apply to:

(1) the child health plan program operated under Chapter 62, Health and Safety Code;

(2) the health benefits plan for children operated under Chapter 63, Health and Safety Code;

(3) the state Medicaid program operated under Chapter 32, Human Resources Code; and

(4) the Medicaid managed care program operated under Chapter 533, Government Code.

Sec. 1356.006. OPTIONAL OFFER OF COVERAGE. A health benefit plan issuer may offer a health benefit plan that provides coverage for breast tomosynthesis.

No equivalent provision.

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the presence of occult breast cancer.

SECTION 5. The changes in law made by this Act apply only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2018. A plan delivered, issued for delivery, or renewed before January 1, 2018, is governed by the law as it existed immediately before the effective date of this Act, and that law is continued in effect for that purpose.

SECTION 6. This Act takes effect September 1, 2017.

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SECTION 4. Same as House version.

SECTION 5. Same as House version.

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