

1-1 By: Paxton S.B. No. 1852
1-2 (In the Senate - Filed March 7, 2019; March 18, 2019, read
1-3 first time and referred to Committee on Business & Commerce;
1-4 April 9, 2019, reported favorably by the following vote: Yeas 9,
1-5 Nays 0; April 9, 2019, sent to printer.)

1-6 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-7				
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 disclosures required in connection with the issuance of
1-20 certain health benefit plans.

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

1-22 SECTION 1. Section 1507.006(b), Insurance Code, is amended
1-23 to read as follows:

1-24 (b) Each applicant for initial coverage [~~and each~~
1-25 ~~policyholder on renewal of coverage~~] must sign the disclosure
1-26 statement provided by the health carrier under Subsection (a) and
1-27 return the statement to the health carrier. Under a group policy or
1-28 contract, the term "applicant" means the employer.

1-29 SECTION 2. Section 1507.056(b), Insurance Code, is amended
1-30 to read as follows:

1-31 (b) Each applicant for initial enrollment [~~and each~~
1-32 ~~contract holder on renewal~~] must sign the disclosure statement
1-33 provided by the health maintenance organization under Subsection
1-34 (a) and return the statement to the health maintenance
1-35 organization. Under a group evidence of coverage, the term
1-36 "applicant" means the employer.

1-37 SECTION 3. The change in law made by this Act applies only
1-38 to a policy or evidence of coverage delivered, issued for delivery,
1-39 or renewed on or after the effective date of this Act. A policy or
1-40 evidence of coverage delivered, issued for delivery, or renewed
1-41 before the effective date of this Act is governed by the law as it
1-42 existed immediately before the effective date of this Act, and that
1-43 law is continued in effect for that purpose.

1-44 SECTION 4. This Act takes effect September 1, 2019.

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