BILL ANALYSIS

Senate Research Center

H.B. 2146 By: Chisum (Bivins) Business & Commerce 5/6/2001 Engrossed

DIGEST AND PURPOSE

Current law does not require an issuer of group health benefit plans to provide a small employer with the claims experience of the employees covered by a group health benefit plan. H.B. 2146 requires the issuer of a group health benefit plan to provide a small employer with the claims experience of the small employer's employees covered by the plan.

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 Chapter 21E, Insurance Code, by adding Article 21.49-19, as follows:

Art. 21.49-19. HEALTH BENEFIT CLAIM COST INFORMATION REQUIRED TO BE PROVIDED TO EMPLOYER

- Sec. 1. DEFINITION OF GROUP HEALTH BENEFIT PLAN. (a) Defines "group health benefit plan."
 - (b) Provides that the term "group health benefit plan" includes a small employer health benefit plan written under Chapter 26 of this code.
- Sec. 2. APPLICABILITY OF ARTICLE. Provides that this article applies only to a group health benefit plan issued to provide health benefits to the employees of one or more employers that sponsor the plan.
- Sec. 3. CLAIM COST INFORMATION. (a) Requires the issuer of the plan, on the request of an employer sponsoring a group health benefit plan, to provide to the employer the claims cost information for employees covered by the plan during the preceding calendar year.
 - (b) Authorizes claims cost information provided under this section to be provided either in the aggregate or on a detailed basis, but prohibits it from including any information through which a specific individual enrolled in the group health benefit plan may be identified or diagnosis codes or other information through which a diagnosis of a specific individual enrolled in the group health benefit plan may be identified.
 - (c) Provides that information obtained by the employer under this section is confidential and may be used by the employer only for purposes relating to obtaining and maintaining group health benefit plan coverage for the employer's employees.

SECTION 2. Effective date: September 1, 2001. Makes application of this Act prospective.