

## **BILL ANALYSIS**

Senate Research Center  
86R5898 MEW-D

S.B. 437  
By: Nelson  
Business & Commerce  
4/3/2019  
As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

When a person overdoses on an opioid, their breathing and pulse slow, leading to brain damage or death. A dose of an opioid antagonist, like naloxone, stops those effects for 60 to 90 minutes by binding to the brain's opioid receptors and essentially switching them off creating a window during which a person can receive emergency care.

Some life insurers consider the use of prescription drugs when reviewing policy applicants, and it can be difficult to tell the difference between someone who carries naloxone to save others and someone who carries naloxone because they are personally at risk for an overdose. S.B. 437 prohibits life insurance companies from denying or limiting coverage based on a prescription or obtainment of an opioid antagonist.

As proposed, S.B. 437 amends current law relating to prohibited practices by a life insurance company relating to an individual's prescription for or obtainment of an opioid antagonist.

### **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 1101, Insurance Code, by adding Subchapter E, as follows:

#### **SUBCHAPTER E. PROHIBITED PRACTICES RELATING TO PRESCRIPTION FOR OR OBTAINMENT OF OPIOID ANTAGONIST**

Sec. 1101.201. DEFINITION. Defines "opioid antagonist."

Sec. 1101.202. APPLICABILITY OF SUBCHAPTER. Provides that this subchapter applies to a life insurance policy issued or delivered in this state, or issued by a life insurance company organized in this state.

Sec. 1101.203. PROHIBITION. (a) Prohibits, except as provided by Subsection (b), a life insurance company, because an individual has been prescribed or has obtained through a standing order an opioid antagonist, from:

- (1) denying coverage to the individual;
- (2) refusing to renew the individual's coverage;
- (3) canceling the individual's coverage;
- (4) limiting the amount, extent, or kind of coverage available to the individual; or

(5) charging the individual or a group to which the individual belongs a rate that is different from the rate charged to other individuals or groups, respectively, for the same coverage.

(b) Provides that Subsection (a) does not apply to an individual who has a demonstrated history of drug abuse.

SECTION 2. Effective date: September 1, 2019.