

HOUSE BILL 313

By Johnson G

AN ACT to amend Tennessee Code Annotated, Title 56,
Chapter 7, relative to health insurance.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 56, Chapter 7, Part 23, is amended by adding the following as a new section:

(a) As used in this section, "health benefit plan" means any hospital or medical expense policy; health, hospital, or medical service corporation contract; a policy or agreement entered into by a health insurer or a health maintenance organization contract offered by an employer; other plans administered by the state government; or any certificate issued under the policies, contracts, or plans. "Health benefit plan" does not include policies or certificates covering only accident, credit, dental, disability income, long-term care, hospital indemnity, medicare supplement as defined in 42 U.S.C. § 1395ss(g)(1), specified disease, vision care, other limited benefit health insurance, coverage issued as a supplement to liability insurance, workers' compensation insurance, automobile medical payment insurance, or insurance under which benefits are payable with or without regard to fault and that is statutorily required to be contained in any liability insurance policy or equivalent self-insurance.

(b) A health benefit plan must provide, at a minimum, coverage for:

(1) Items or services that have a rating of "A" or "B" in the recommendation of the United States Preventive Services Task Force;

(2) Immunizations that have a recommendation from the American Academy of Pediatrics, the American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists;

(3) With respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in the most recent version of the comprehensive Bright Future Guidelines developed by the American Academy of Pediatrics; and

(4) With respect to women, preventive care and screenings as set forth in the comprehensive guidelines supported by the Health Resources and Services Administration and issued pursuant to 45 CFR § 147.130(a)(1)(iv).

(c) Notwithstanding § 56-7-1005, this section does not apply to any state or local insurance program, under title 8, chapter 27, and any managed care organization contracting with the state to provide insurance through the TennCare program.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring it, and shall apply to health benefit plans that are issued, entered into, or renewed on or after January 1, 2020.