HOUSE RESEARCH ORGANIZATION bill analysis 4/17/2023		(2nd reading) HB 916 Ordaz et al.
SUBJECT:	Relating to health benefit plan coverage of contraceptive drugs	
COMMITTEE:	Insurance — favorable, without amendment	
VOTE:	7 ayes — Oliverson, A. Johnson, Cortez, Caroline Harris, Julie Paul, Perez	Johnson,
	0 nays	
	1 absent — Hull	
	1 present not voting — Cain	
WITNESSES:	For — Carolena Cogdill, Haven Health Clinics; Scott Simpson, Texas Medical Association and Texas Section American College of OB/GYN; Kristen Lenau, Texas Women's Healthcare Coalition (<i>Registered, but did</i> <i>not testify</i> : Nadia Islam, City of San Antonio; Katherine Strandberg, Every Body Texas; Stacey Pouge, Every Texan; Jennifer Biundo, Healthy Futures of Texas; Lindsay Lanagan, Legacy Community Health; Bill Kelly, Mayor's Office City of Houston; Christine Yanas, Methodist Healthcare Ministries of South Texas, Inc.; Maureen Milligan, Teaching Hospitals of Texas; Tom Banning, Texas Academy of Family Physicians; Shelby Tracy, Texas Association of Community Health Centers; David Reynolds, Texas Chapter American College of Physicians; Esmeralda Flores, Texas Council on Family Violence; Carisa Lopez, Texas Freedom Network; Sara Gonzalez, Texas Hospital Association; Joshua Houston, Texas Impact; Jill Sutton, Texas Osteopathic Medical Association; Ware Wendell, Texas Watch; Laura Atlas Kravitz, Texas Women's Foundation (TXWF))	
	Against — None	

On — (*Registered, but did not testify*: Priscilla Parrilla, Health & Human Services Commission (HHSC))

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DIGEST: HB 916 would require certain health benefit plans providing prescription contraceptive coverage, including the Medicaid and CHIP coverage programs, to provide enrollees with: a three-month supply of a covered contraceptive drug at one-time, • the first time an enrollee obtained the drug; and a 12-month supply of the same contraceptive drug at one-time, each subsequent time the enrollee obtained the drug, regardless of whether the enrollee was enrolled in the plan the first time the enrollee obtained the drug. Under the bill, an enrollee could obtain only one 12-month supply of a covered contraceptive drug during each 12-month calendar year. The bill would take effect September 1, 2023, and would apply only to health benefit plans delivered, issued, or renewed on or after January 1, 2024. **SUPPORTERS** HB 916 would help ensure women were able to consistently take the SAY: contraceptive drugs they needed. Requiring monthly refills of contraceptives can lead to missed dosages when refills are not accessible in a timely manner. This can lead to unplanned pregnancies and costs that individuals may be unable to afford. The initial three-month supply of contraceptive drugs that would be authorized under the bill would help to provide the time needed for a woman to know whether the drug was working for her. Allowing a woman to then receive a full year of that contraceptive drug could help reduce the number of missed doses that could occur if a refill was late. More consistent use of contraceptives could help to reduce unplanned pregnancies and allow women to choose the best timing for their pregnancies. CRITICS No concerns identified. SAY: NOTES: According to the Legislative Budget Board, no significant impact to the

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state is anticipated.