(l) The board shall adopt rules to implement this section, including rules specifying:
(1) the records that must be maintained under this section;
(2) the requirements for policies and procedures for operation of a pharmacy when a
pharmacist is not on-site; and
(3) the training requirements for pharmacy technicians.

SECTION 2. Chapter 568, Occupations Code, is amended by adding Section 568.008 to
read as follows:
Sec. 568.008. TECHNICIANS IN HOSPITALS WITH CLINICAL PHARMACY PRO-
GRAM. (a) In this section, “clinical pharmacy program” means a program that provides
pharmaceutical care services as specified by board rule.
(b) A Class C pharmacy that has an ongoing clinical pharmacy program may allow a
pharmacy technician to verify the accuracy of work performed by another pharmacy
technician relating to the filling of floor stock and unit dose distribution systems for a
patient admitted to the hospital if the patient’s orders have previously been reviewed and
approved by a pharmacist.
(c) The pharmacist-in-charge of the clinical pharmacy program shall adopt policies and
procedures for the verification process authorized by this section.
(d) A hospital must notify the board before implementing the verification process author-
ized by this section.
(e) The board shall adopt rules to implement this section, including rules specifying:
(1) the duties that may be verified by another pharmacy technician;
(2) the records that must be maintained for the verification process; and
(3) the training requirements for pharmacy technicians who verify the accuracy of the
work of other pharmacy technicians.

SECTION 3. This Act takes effect immediately if it receives a vote of two-thirds of all the
members elected to each house, as provided by Section 39, Article III, Texas Constitution. If
this Act does not receive the vote necessary for immediate effect, this Act takes effect
September 1, 2009.

Passed by the House on April 24, 2009: Yeas 140, Nays 0, 1 present, not voting; that the
House refused to concur in Senate amendments to H.B. No. 1924 on May 29, 2009,
and requested the appointment of a conference committee to consider the differ-
ences between the two houses; the House adopted the conference committee
report on H.B. No. 1924 on May 31, 2009: Yeas 145, Nays 0, 1 present, not voting;
passed by the Senate, with amendments, on May 25, 2009: Yeas 31, Nays 0; at the
request of the House, the Senate appointed a conference committee to consider the
differences between the two houses; the Senate adopted the conference committee
report on H.B. No. 1924 on May 31, 2009: Yeas 31, Nays 0.

Approved June 19, 2009.

CHAPTER 1129
H.B. No. 2000
AN ACT
relating to health benefit plan coverage for certain amino acid-based elemental formulas.

Be it enacted by the Legislature of the State of Texas:

SECTION 1. Subtitle E, Title 8, Insurance Code, is amended by adding Chapter 1377 to
read as follows:
CHAPTER 1377. COVERAGE FOR CERTAIN AMINO ACID-BASED ELEMENTAL FORMULAS

SUBCHAPTER A. GENERAL PROVISIONS

Sec. 1377.001. DEFINITION. In this chapter, “enrollee” means an individual entitled to coverage under a health benefit plan.

Sec. 1377.002. APPLICABILITY OF CHAPTER. (a) This chapter applies only to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage provided by a health group cooperative under Subchapter B of that chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of coverage or similar coverage document that is offered by:

(1) an insurance company;
(2) a group hospital service corporation operating under Chapter 842;
(3) a fraternal benefit society operating under Chapter 885;
(4) a stipulated premium company operating under Chapter 884;
(5) an exchange operating under Chapter 942;
(6) a Lloyd’s plan operating under Chapter 941;
(7) a health maintenance organization operating under Chapter 843;
(8) a multiple employer welfare arrangement that holds a certificate of authority under Chapter 846; or
(9) an approved nonprofit health corporation that holds a certificate of authority under Chapter 844.

(b) Notwithstanding any provision in Chapter 1551, 1575, 1579, or 1601 or any other law, this chapter applies to:

(1) a basic coverage plan under Chapter 1551;
(2) a basic plan under Chapter 1575;
(3) a primary care coverage plan under Chapter 1579; and
(4) basic coverage under Chapter 1601.

Sec. 1377.003. EXCEPTION. This chapter does not apply to:

(1) a plan that provides coverage:
   (A) only for benefits for a specified disease or for another limited benefit, other than a plan that provides benefits for a disease or disorder listed in Section 1377.051(a);
   (B) only for accidental death or dismemberment;
   (C) for wages or payments in lieu of wages for a period during which an employee is absent from work because of sickness or injury;
   (D) as a supplement to a liability insurance policy;
   (E) only for dental or vision care; or
   (F) only for indemnity for hospital confinement;
(2) a Medicare supplemental policy as defined by Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss);
(3) a workers’ compensation insurance policy;
(4) medical payment insurance coverage provided under an automobile insurance policy;
(5) a credit insurance policy;
(6) a limited benefit policy that does not provide coverage for physical examinations or wellness exams; or
(7) a long-term care insurance policy, including a nursing home fixed indemnity policy, unless the commissioner determines that the policy provides benefit coverage so comprehensive that the policy is a health benefit plan as described by Section 1377.002.

[Sections 1377.004-1377.050 reserved for expansion]

SUBCHAPTER B. COVERAGE FOR CERTAIN AMINO ACID–BASED ELEMENTAL FORMULAS

Sec. 1377.051. REQUIRED COVERAGE FOR CERTAIN AMINO ACID–BASED ELEMENTAL FORMULAS. (a) A health benefit plan must provide coverage as provided by this chapter for amino acid-based elemental formulas, regardless of the formula delivery method, that are used for the diagnosis and treatment of:

(1) immunoglobulin E and non-immunoglobulin E mediated allergies to multiple food proteins;

(2) severe food protein-induced enterocolitis syndrome;

(3) eosinophilic disorders, as evidenced by the results of a biopsy; and

(4) impaired absorption of nutrients caused by disorders affecting the absorptive surface, functional length, and motility of the gastrointestinal tract.

(b) Subject to Subsection (c), the coverage required under Subsection (a) is required if the treating physician has issued a written order stating that the amino acid-based elemental formula is medically necessary for the treatment of an enrollee who is diagnosed with a disease or disorder listed in Subsection (a). The coverage must include coverage of any medically necessary services associated with the administration of the formula.

(c) A health benefit plan must provide the coverage described by Subsection (a) on a basis no less favorable than the basis on which prescription drugs and other medications and related services are covered by the plan, and to the same extent that the plan provides coverage for drugs that are available only on the orders of a physician.

Sec. 1377.052. UTILIZATION REVIEW. (a) A utilization review agent acting on behalf of a health benefit plan issuer may review a treating physician’s determination of the medical necessity of the use of an amino acid-based elemental formula for the treatment of an enrollee who is diagnosed with a disease or disorder listed in Section 1377.051(a).

(b) Utilization review under this section is subject to Chapter 4201.

SECTION 2. Chapter 1377, Insurance Code, as added by this Act, applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2010. A health benefit plan that is delivered, issued for delivery, or renewed before January 1, 2010, is covered by the law in effect at the time the plan was delivered, issued for delivery, or renewed, and that law is continued in effect for that purpose.

SECTION 3. This Act takes effect September 1, 2009.

Passed by the House on May 14, 2009: Yeas 99, Nays 28, 1 present, not voting; that the House refused to concur in Senate amendments to H.B. No. 2000 on May 29, 2009, and requested the appointment of a conference committee to consider the differences between the two houses; the House adopted the conference committee report on H.B. No. 2000 on May 31, 2009: Yeas 142, Nays 0, 1 present, not voting; passed by the Senate, with amendments, on May 25, 2009: Yeas 28, Nays 3; at the request of the House, the Senate appointed a conference committee to consider the differences between the two houses; the Senate adopted the conference committee report on H.B. No. 2000 on May 31, 2009: Yeas 28, Nays 3.

Approved June 19, 2009.

Effective September 1, 2009.