

## **BILL ANALYSIS**

Senate Research Center

H.B. 800  
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Health & Human Services  
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Engrossed

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

The State of Texas has the fifth highest teen-pregnancy rate in the nation and the highest rate of repeat births among teenagers aged 15 to 19. Teen pregnancy is more likely to occur among low-income students and children of parents who were also teen parents. Many teen mothers drop out of high school, sharply exacerbating education and income gaps among those families. There is also a considerable impact on our state budget. Texas is the last state to expand access to contraception for participants in the Children's Health Insurance Program (CHIP).

As the state works to reduce its rate of teen pregnancy, interested parties note that CHIP is not being utilized for this effort. In 2013, the legislature included teens ages 14–17 in the Texas Healthy Women Program and committed to funding women's healthcare including family planning. Texas remains one of the only states that has not expanded CHIP to include low-cost preventative and primary reproductive health care. H.B. 800 would expand CHIP coverage, with written parental consent, to include prescription contraceptive drugs and devices approved by the U.S. Food and Drug Administration. H.B. 800 excludes coverage of abortifacients or any other drug or device that terminates a pregnancy.

H.B. 800 amends current law relating to covered benefits under the child health 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 Section 62.151, Health and Safety Code, by amending Subsection (c) and adding Subsections (g) and (h), as follows:

(c) Requires the executive commissioner of the Health and Human Services Commission, except as provided by Subsection (g), in modifying the state child health plan (plan), to ensure that primary and preventive health benefits do not include reproductive services, other than prenatal care and care related to diseases, illnesses, or abnormalities related to the reproductive system.

(g) Requires the plan, subject to Subsection (h), to provide as covered benefits prescription contraceptive drugs, supplies, or devices approved by the United States Food and Drug Administration. Prohibits the plan from providing coverage for abortifacients or any other drug or device that terminates a pregnancy.

(h) Authorizes the plan to provide as covered benefits prescription contraceptive drugs, supplies, or devices for an enrolled child younger than 18 years of age for the purpose of primary and preventive reproductive health care only if the prescribing or dispensing health care provider receives written consent from the enrolled child's parent, guardian, or managing conservator, or from the enrolled child if authorized under Section 32.003 (Consent to Treatment by Child), Family Code, for the prescription or dispensing of the contraceptive drug, supply, or device.

SECTION 2. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes a delay of implementation until such a waiver or authorization is granted.

SECTION 3. Effective date: upon passage or September 1, 2019.