

MANDATED HEALTH BENEFITS AS OF JANUARY 1, 2014

The chart below shows the benefits that must be included in major medical plans in Texas. Unless otherwise noted, these requirements apply to plans offered by health maintenance organizations (HMOs) or carriers writing preferred provider benefit plans or exclusive provider benefit plans.

We have included links to the Texas statutes and rules requiring these benefits. The mandated benefits that are required by federal law have been marked with an asterisk, even though some may not be required under state law. In most cases, a mandated benefit marked with an asterisk is one that is included in the federally chosen Affordable Care Act benchmark plan, and so must be included in all individual and small group plans in Texas. If you are concerned about the way your plan is providing a mandated benefit, you may file a complaint with the department by clicking [here](#).

This chart does not contain all federal requirements. You can read more on our website about the federal requirements by clicking [here](#). If your health plan has been the same since before March 23, 2010, when Congress passed the Affordable Care Act, your plan might be “grandfathered” and exempt from some federal mandates. If you have specific questions about the federal requirements, you should contact the federal Health and Human Services Commission by clicking [here](#) or the Department of Labor by clicking [here](#).

We made every effort to ensure the accuracy of the information in this document, but you should consult the Texas Insurance Code (TIC), the Texas Administrative Code (TAC), and other applicable state and federal laws about the extent and nature of applicable requirements. All dealings with the department are governed and controlled solely by applicable statutes and regulations and not by this document.

OTHER SPECIALTY PLANS

Some consumers might purchase specialty plans, such as association plans or consumer choice plans.

Association plans - Health plans offered to individual consumers through their membership in an association are generally subject to the Texas requirements for large employer plans, and are subject to federal requirements for individual plans.

Consumer Choice Plans – A consumer choice plan is one that does not contain all the mandated benefits. An insurer or HMO offering an employer plan that contains all the state mandated benefits may also offer a consumer choice plan that excludes some of the state mandates.

MANDATED BENEFITS	STATE SOURCES	INDIVIDUAL AND SMALL EMPLOYER PLANS (* INDICATES THE "YES" ENTRY MAY BE REQUIRED BY FEDERAL LAW)	LARGE EMPLOYER PLANS, INCLUDING ASSOCIATION PLANS	LARGE EMPLOYER CONSUMER CHOICE PLANS, INCLUDING ASSOCIATION PLANS
AUTISM SPECTRUM DISORDER— COVERAGE FOR TREATMENT, SCREENING, AND SERVICES ¹	TIC Section 1355.015 28 TAC Sections 21.4401— 21.4404	Yes*	Yes	No
BRAIN INJURY—ACQUIRED BRAIN INJURY, INCLUDING ADDITIONAL REQUIREMENTS FOR SMALL EMPLOYER PLANS	TIC Sections 1352.003 and 1352.0035 28 TAC Sections 21.3101— 21.3105	Yes*	Yes	No
CARDIOVASCULAR DISEASE— SCREENING TESTS, INCLUDING REQUIREMENTS FOR THE SCREENING LABORATORY	TIC Chapter 1376	Yes*	Yes	No
CHEMICAL DEPENDENCY— BENEFITS FOR NECESSARY CARE AND TREATMENT	TIC Chapter 1368 28 TAC Sections 3.8001— 3.8030 28 TAC Section 11.509(3)	Yes*	Yes	No
CHEMICAL DEPENDENCY— TREATMENT FACILITY	TIC Sections 1368.005 and 1368.007 28 TAC Section 11.509(3)	Yes*	Yes	No

¹ The Texas Legislature expanded the autism mandate in 2013, but the new required benefits in SB 1484 that expand autism coverage beyond age 9, do not apply to individual plans or to employer or association consumer choice plans. See [SB 1484](#).

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CHILDREN—COVERAGE FOR DEVELOPMENTAL DELAYS, IF ELIGIBLE FOR COVERAGE UNDER THE POLICY OR PLAN	TIC Chapter 1367, Subchapter E	Offer for Individual Plans only, no requirement for Small Employer Plans	Offer	No
CHILDREN—HEARING SCREENING AND NECESSARY DIAGNOSTIC FOLLOW-UP CARE, IF ELIGIBLE FOR COVERAGE UNDER THE POLICY OR PLAN	TIC Chapter 1367, Subchapter C	Yes*	Yes	Yes
CHILDREN—IMMUNIZATIONS BIRTH THROUGH AGE 6, IF ELIGIBLE FOR COVERAGE UNDER THE POLICY OR PLAN	TIC Section 1367.053 28 TAC Section 11.508(a)(1)(H)	Yes*	Yes	Yes
CHILDREN—RECONSTRUCTIVE SURGERY FOR CRANIOFACIAL ABNORMALITIES IN A CHILD, IF ELIGIBLE FOR COVERAGE UNDER THE POLICY OR PLAN	TIC Section 1367.153	Yes*	Yes	Yes
COLORECTAL CANCER TESTING	TIC Chapter 1363	Yes*	Yes	Yes
DIABETES	TIC Chapter 1358 28 TAC Section 11.508(b)(3) 28 TAC Sections 21.2601—21.2607	Yes*	Yes	Yes

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EMERGENCY CARE	<p>TIC Section 843.002(7)</p> <p>TIC Section 1271.155</p> <p>TIC Section 1301.155</p> <p>28 TAC Sections 11.506(10) and 11.508(a)(1)(J)</p>	Yes	Yes	Yes
HIV, AIDS, OR HIV-RELATED ILLNESSES	<p>TIC Section 1202.052</p> <p>TIC Sections 1364.001—1364.053 and 1364.101</p> <p>TIC Section 1551.205</p> <p>TIC Section 1601.109</p>	Yes*	Yes	No
HOME HEALTH (SEE HMO BENEFIT STANDARDS FOR SIMILAR HMO MANDATE)	TIC Chapter 1351	Yes*	Offer	No
HMO ADDITIONAL MANDATORY BENEFITS	<p>TIC Section 1271.156</p> <p>28 TAC Section 11.508(a)</p>	Yes (HMOs Only)	Yes (HMOs Only)	Yes (HMOs Only)
MENTAL HEALTH—PSYCHIATRIC DAY TREATMENT FACILITY	<p>TIC Chapter 1355, Subchapter C</p> <p>28 TAC Sections 11.509(5) and 11.510(3)</p>	Yes*	Offer	No

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MENTAL ILLNESS—CRISIS STABILIZATION AND RESIDENTIAL TREATMENT FOR CHILDREN AND ADOLESCENTS	TIC Sections 1355.051—1355.058 28 TAC Section 11.509(5)	Yes*	Yes	No
MENTAL ILLNESS—MENTAL HEALTH PARITY	28 TAC Sections 21.2401—21.2407	Yes*	Yes	Yes*
MENTAL ILLNESS—SERIOUS MENTAL ILLNESS	TIC Chapter 1355 TIC Section 1551.205	Yes*	Yes	Yes
OSTEOPOROSIS, DETECTION AND PREVENTION	TIC Chapter 1361 28 TAC Section 11.509(4)	Yes*	Yes	No
PRESCRIPTION DRUGS—AMINO ACID-BASED FORMULAS	TIC Section 1377.051	Yes*	Yes	No
PRESCRIPTION DRUGS—CONTRACEPTIVE DRUGS AND DEVICES AND RELATED SERVICES	TIC Section 1369.104 28 TAC Section 21.404	Yes*	Yes	No
PRESCRIPTION DRUGS—OFF-LABEL DRUGS	TIC Section 1369.004 28 TAC Sections 21.3010—21.3011	Yes*	Yes	No
PRESCRIPTION DRUGS—ORAL ANTICANCER MEDICATIONS	TIC Chapter 1369, Subchapter E	Yes*	Yes	No
PRESCRIPTION DRUGS—PHENYLKETONURIA (PKU)	TIC Chapter 1359	Yes*	Yes	Yes

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PROSTATE TESTING	TIC Section 1362.003	Yes*	Yes	Yes
PROSTHETIC OR ORTHOTIC DEVICES	TIC Section 1371.003	Yes*	Yes	No
REHABILITATION THERAPIES— COVERAGE	TIC Section 1271.156	Yes (HMOs only)	Yes (HMOs only)	No
SPEECH AND HEARING	TIC Sections 1365.003—1365.004 28 TAC Section 11.510(2)	Yes*	Offer	No
TEMPOROMANDIBULAR JOINT (TMJ)	TIC Section 1360.004 28 TAC Section 11.509(6)	Yes*	Yes	No
TRANSPLANT DONOR COVERAGE	28 TAC Section 3.3040(h)	Yes*	No	No
WOMEN'S HEALTH— HUMAN PAPILLOMAVIRUS AND CERVICAL CANCER TESTING	TIC Chapter 1370	Yes	Yes	Yes
WOMEN'S HEALTH— IN VITRO FERTILIZATION	TIC Sections 1366.003—1366.004 28 TAC Section 11.510(1)	No (offer Small Employer Plans)	Offer	No
WOMEN'S HEALTH— MAMMOGRAPHY	TIC Section 1356.005	Yes	Yes	Yes
WOMEN'S HEALTH— MASTECTOMY OR LYMPH NODE DISSECTION, MINIMUM STAY	TIC Section 1357.054	Yes	Yes	No

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WOMEN'S HEALTH— MASTECTOMY, RECONSTRUCTIVE SURGERY	TIC Sections 1357.003 and 1357.004 28 TAC Section 11.508(b)(1)	Yes*	Yes	Yes*
WOMEN'S HEALTH—PREGNANCY, NONDISCRIMINATION	28 TAC Section 21.404(6)	Yes*)	Yes*	Yes*
WOMEN'S HEALTH—PREGNANCY, COMPLICATIONS	28 TAC Section 21.405	Yes	Yes	Yes
WOMEN'S HEALTH—PREGNANCY, MATERNITY MINIMUM STAY (IF MATERNITY IS COVERED)	TIC Section 1366.055 28 TAC Section 11.508(b)(2)	Yes	Yes	Yes*