By: Smithee

H.B. No. 1902

A BILL TO BE ENTITLED 1 AN ACT 2 relating to disclosure requirements for health care provider directories maintained by certain health benefit plan issuers. 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 5 SECTION 1. Section 1451.501(1-a), Insurance Code, is amended to read as follows: 6 7 (1-a) "Facility-based physician or provider" means a physician or health care provider [radiologist, anesthesiologist, 8 9 pathologist, emergency department physician, neonatologist, or 10 assistant surgeon]: 11 (A) to whom a facility has granted clinical 12 privileges; and (B) who provides services to patients of the 13 14 facility under those clinical privileges. SECTION 2. Sections 1451.504(c) and (d), Insurance Code, 15 are amended to read as follows: 16 (c) For each health care provider that is a facility 17 included in the directory under this section, the directory must: 18 (1) list under the facility name separate headings for 19 specialties, including radiologists, anesthesiologists, nurse 20 anesthetists, pathologists, emergency department physicians, 21 neonatologists, <u>nurse midwives</u>, <u>surgical</u> assistants, <u>physical</u> 22 23 therapists, occupational therapists, speech-language pathologists, and any other specialty identified by commissioner 24

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1 rule [and assistant surgeons];

2 (2) list under each heading described by Subdivision 3 (1) each facility-based physician <u>or provider</u> described by 4 Subsection (a) practicing in the specialty corresponding with that 5 heading that is a preferred provider, exclusive provider, or 6 network physician <u>or provider</u>;

7 (3) for the facility and each facility-based physician 8 <u>or provider</u> described by Subdivision (2), clearly indicate each 9 health benefit plan issued by the issuer that may provide coverage 10 for the services provided by that facility or <u>facility-based</u> 11 physician <u>or provider</u>; and

12 (4) include the facility in a listing of all13 facilities included in the directory indicating:

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(A) the name of the facility;

(B) the municipality in which the facility is located or county in which the facility is located if the facility is in the unincorporated area of the county;

(C) for each specialty of facility-based 18 19 physician or provider practicing at the facility, the name, street address, and telephone number of any facility-based physician or 20 provider that is a preferred provider, exclusive provider, or 21 network physician or provider or of the physician or provider group 22 23 in which the facility-based physician or provider practices;

(D) each health benefit plan issued by the issuer
 that may provide coverage for the services provided by the
 facility; and

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(E) each health benefit plan issued by the issuer

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3 (d) The directory must list a facility-based physician <u>or</u> 4 <u>provider</u> individually and, if the physician <u>or provider</u> belongs to 5 a physician <u>or provider</u> group, as part of the physician <u>or provider</u> 6 group.

SECTION 3. A health benefit plan issuer shall update the
issuer's physician and health care provider directory and Internet
website to conform with Subchapter K, Chapter 1451, Insurance Code,
as amended by this Act, not later than January 1, 2024.

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SECTION 4. This Act takes effect September 1, 2023.

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