

By: Harris of Williamson

H.B. No. 4500

Substitute the following for H.B. No. 4500:

By: Oliverson

C.S.H.B. No. 4500

A BILL TO BE ENTITLED

1 AN ACT
2 relating to electronic verification of health benefits by health
3 benefit plan issuers for certain physicians and health care
4 providers.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

6 SECTION 1. Subtitle A, Title 8, Insurance Code, is amended
7 by adding Chapter 1223 to read as follows:

8 CHAPTER 1223. VERIFICATION OF HEALTH BENEFITS

9 Sec. 1223.001. APPLICABILITY OF CHAPTER. (a) This chapter
10 applies only to a health benefit plan that provides benefits for
11 medical or surgical expenses incurred as a result of a health
12 condition, accident, or sickness, including an individual, group,
13 blanket, or franchise insurance policy or insurance agreement, a
14 group hospital service contract, or an individual or group evidence
15 of coverage or similar coverage document that is issued by:

16 (1) an insurance company;

17 (2) a group hospital service corporation operating
18 under Chapter 842;

19 (3) a health maintenance organization operating under
20 Chapter 843;

21 (4) an approved nonprofit health corporation that
22 holds a certificate of authority under Chapter 844;

23 (5) a multiple employer welfare arrangement that holds
24 a certificate of authority under Chapter 846;

- 1 (6) a stipulated premium company operating under
2 Chapter 884;
- 3 (7) a Lloyd's plan operating under Chapter 941; or
4 (8) an exchange operating under Chapter 942.
- 5 (b) Notwithstanding any other law, this chapter applies to:
- 6 (1) a small employer health benefit plan subject to
7 Chapter 1501, including coverage provided through a health group
8 cooperative under Subchapter B of that chapter;
- 9 (2) a standard health benefit plan issued under
10 Chapter 1507;
- 11 (3) a basic coverage plan under Chapter 1551;
12 (4) a basic plan under Chapter 1575;
13 (5) a primary care coverage plan under Chapter 1579;
14 (6) a plan providing basic coverage under Chapter
15 1601;
- 16 (7) nonprofit agricultural organization health
17 benefits offered by a nonprofit agricultural organization under
18 Chapter 1682;
- 19 (8) alternative health benefit coverage offered by a
20 subsidiary of the Texas Mutual Insurance Company under Subchapter
21 M, Chapter 2054;
- 22 (9) group health coverage made available by a school
23 district in accordance with Section 22.004, Education Code;
- 24 (10) a regional or local health care program operated
25 under Section 75.104, Health and Safety Code; and
- 26 (11) a self-funded health benefit plan sponsored by a
27 professional employer organization under Chapter 91, Labor Code.

1 (c) This chapter does not apply to the state Medicaid
2 program, including the Medicaid managed care program operated under
3 Chapter 533, Government Code, or the child health plan program
4 operated under Chapter 62, Health and Safety Code.

5 Sec. 1223.002. INTERNET WEBSITE FOR VERIFICATION REQUIRED
6 FOR EMERGENCY PHYSICIANS AND HEALTH CARE PROVIDERS. (a) A health
7 benefit plan issuer shall maintain and make available a secure
8 system on the issuer's Internet website that allows a physician or
9 health care provider for a hospital or freestanding emergency
10 medical care facility to determine at any time:

11 (1) whether the physician's or provider's patient is
12 covered by the issuer's health benefit plan; and

13 (2) the deductible, copayment, or coinsurance for
14 which the patient is responsible.

15 (b) A health benefit plan issuer may provide the information
16 described by Subsection (a) through:

17 (1) an existing Internet portal that is available at
18 all times; or

19 (2) an Internet portal that is:

20 (A) provided by a third party contracting with
21 the issuer; and

22 (B) available at all times.

23 SECTION 2. This Act takes effect January 1, 2024.