Amend SB 418 (house committee printing) as follows:

- (1) In SECTION 4 of the bill, in added Section 3E, Article 3.70-3C, Insurance Code, insert a new Subsection (h) to read as follows (page 13, between lines 12 and 13) and reletter subsections appropriately:
- (h) Notwithstanding any other provision of this article, if an insurer declines to verify a medical care or health care service under this section, the physician or provider is not required to comply with any contractual requirement that the physician or provider hold a patient harmless for the medical care or health care service under Section 3(k) of this article. A contract between an insurer and a physician or provider must provide that the exercise of the physician's or provider's rights under this subsection may not be the basis for termination of or discrimination against the physician or provider under the contract or the basis for a penalty or discrimination against the physician or provider in participation in other health care products or plans.
- (2) In SECTION 4 of the bill, in Subsection (c) of added Section 3G, Article 3.70-3C, Insurance Code, strike "mailed or otherwise transmitted" (page 16, lines 5-6) and substitute "issued and transmitted".
- (3) In SECTION 4 of the bill, in added Section 3J, Article 3.70-3C, Insurance Code, between "process" and "claims", insert "or pay" (page 22, line 5).
- (4) In SECTION 16 of the bill, in amended Section 843.344, Insurance Code, between "process" and "claims", insert "or pay" (page 39, line 1).
- (5) In SECTION 19 of the bill, in added Section 843.347, Insurance Code, insert a new Subsection (h) to read as follows (page 41, between lines 24 and 25):
- (h) Notwithstanding any other provision of this chapter, if a health maintenance organization declines to verify a health care service under this section, the physician or provider is not required to comply with any contractual requirement that the physician or provider hold a patient harmless for the health care service under Section 843.361. A contract between a health maintenance organization and a physician or provider must provide

that the exercise of the physician's or provider's rights under this subsection may not be the basis for termination of or discrimination against the physician or provider under the contract or the basis for a penalty or discrimination against the physician or provider in participation in other health care products or plans.

(6) In SECTION 19 of the bill, in Subsection (d) of added Section 843.348, Insurance Code, strike "mailed or otherwise transmitted" (page 42, line 19) and substitute "issued and transmitted".