

## **BILL ANALYSIS**

Senate Research Center

S.B. 494  
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State Affairs  
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Enrolled

### **DIGEST AND PURPOSE**

Under current law, health maintenance organizations are required to update their list of health care providers on a quarterly basis, but are not required to indicate these updates on their Internet site. Preferred provider organizations are required to update their lists on an annual basis. In addition, these updates do not indicate which providers are accepting new patients and which are not. S.B. 494 requires insurers, group hospital service corporations, and health maintenance organizations that maintain an Internet site to list on that site those physicians and providers that may be used by insureds or enrollees, and to indicate which providers are accepting new patients. Furthermore, the bill requires that the site be updated at least quarterly.

### **RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the commissioner of insurance in SECTION 1 (Section 6A, Article 3.70-3C, Insurance Code), SECTION 2 (Section 842.261, Insurance Code), and SECTION 3 (Section 843.2015, Insurance Code) of this bill.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Article 3.70-3C, Insurance Code, by adding Section 6A, as follows:

Sec. 6A. INFORMATION AVAILABLE THROUGH INTERNET SITE. (a) Requires an insurer subject to this article that maintains an Internet site to list on that site preferred providers, including mental health and substance abuse providers, that may be used by insureds in accordance with the terms of the insured's preferred provider benefit plan. Requires the listing to identify those physicians and providers who continue to be available to provide services to new patients or clients.

(b) Requires an insurer to update the Internet site subject to this section at least quarterly.

(c) Authorizes the commissioner of insurance (commissioner) to adopt rules necessary to implement this article, including rules that govern the form and content of the information required under Subsection (a).

(d) Provides that this section applies to an entity subject to Chapter 941 or 942 and to an arrangement that holds a certificate under Chapter 846, notwithstanding any other provision of this article.

SECTION 2. Amends Subchapter F, Chapter 842, Insurance Code, by adding Section 842.261, as follows:

Sec. 842.261. INFORMATION AVAILABLE THROUGH INTERNET SITE. (a) Requires a group hospital service corporation that maintains an Internet site to list on that site preferred providers, including mental health and substance abuse providers, that may be used

by members in accordance with the terms of the policy or certificate applicable to the member. Requires the listing to identify those physicians and providers who continue to be available to provide services to new patients or clients.

(b) Requires the group hospital service corporation to update the Internet site subject to this section at least quarterly.

(c) Authorizes the commissioner to adopt rules necessary to implement this article, including rules that govern the form and content of the information required under Subsection (a).

SECTION 3. Amends Subchapter F, Chapter 843, Insurance Code, by adding Section 843.2015, as follows:

Sec. 843.2015. INFORMATION AVAILABLE THROUGH INTERNET SITE. (a) Requires a health maintenance organization that maintains an Internet site to list on that site preferred providers, including mental health and substance abuse providers, that may be used by enrollees in accordance with the terms of the insured's preferred provider benefit plan. Requires the listing to identify those physicians and providers who continue to be available to provide services to new patients or clients.

(b) Requires the health maintenance organization to update the Internet site subject to this section at least quarterly.

(c) Authorizes the commissioner of insurance to adopt rules necessary to implement this article, including rules that govern the form and content of the information required under Subsection (a).

SECTION 4. Provides that an insurer, group hospital service corporation, or health maintenance organization is not required to comply with the change in law made by this Act before January 1, 2004.

SECTION 5. Effective date: September 1, 2003.