

By: Thompson

H.B. No. 1163

A BILL TO BE ENTITLED

AN ACT

1  
2 relating to contracts between certain health care providers and  
3 health benefit plans.

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

5 SECTION 1. Section 3(b), Article 3.70-3C, Insurance Code,  
6 as added by Chapter 1024, Acts of the 75th Legislature, Regular  
7 Session, 1997, is amended by adding Subdivision (5) to read as  
8 follows:

9 (5) An insurer may not withhold a designation to a  
10 practitioner described by Subsection (q) of this section who  
11 complies with the terms and conditions established by the insurer.

12 SECTION 2. Section 3, Article 3.70-3C, Insurance Code, as  
13 added by Chapter 1024, Acts of the 75th Legislature, Regular  
14 Session, 1997, is amended by adding Subsections (p) and (q) to read  
15 as follows:

16 (p) An insurer shall pay a podiatrist licensed by the Texas  
17 State Board of Podiatric Medical Examiners for a covered service  
18 the same amount and in the same manner as a physician who renders  
19 the same covered service.

20 (q) An insurer may not withhold the designation of preferred  
21 provider to a practitioner who joins the professional practice of a  
22 preferred provider, applies to the insurer for designation as a  
23 preferred provider, and complies with the terms and conditions of  
24 eligibility to be a preferred provider.

1 SECTION 3. Section 843.303, Insurance Code, as effective  
2 June 1, 2003, is amended by adding Subsection (c) to read as  
3 follows:

4 (c) A health maintenance organization may not deny a  
5 contract to a physician or provider described by Section 843.320.

6 SECTION 4. Subchapter I, Chapter 843, Insurance Code, as  
7 effective June 1, 2003, is amended by adding Sections 843.319 and  
8 843.320 to read as follows:

9 Sec. 843.319. PODIATRIST SERVICES. A health maintenance  
10 organization shall pay a podiatrist licensed by the Texas State  
11 Board of Podiatric Medical Examiners for a covered service the same  
12 amount and in the same manner as a physician who renders the same  
13 covered service.

14 Sec. 843.320. CERTAIN REQUIRED CONTRACTS. A health  
15 maintenance organization may not deny a contract to a physician or  
16 provider who joins the professional practice of a contracting  
17 physician or provider, satisfies the application procedures of the  
18 health maintenance organization, and meets the qualification  
19 requirements for contracting with the health maintenance  
20 organization.

21 SECTION 5. Section 3(p), Article 3.70-3C, and Section  
22 843.319, Insurance Code, as added by this Act, apply only to a claim  
23 for reimbursement submitted to an insurer or health maintenance  
24 organization on or after September 1, 2003. A claim submitted  
25 before that date is governed by the law as it existed immediately  
26 before the effective date of this Act, and that law is continued in  
27 effect for that purpose.

1           SECTION 6. Section 3(q), Article 3.70-3C, and Section  
2 843.320, Insurance Code, as added by this Act, apply only to an  
3 application for designation as a preferred provider or an  
4 application to contract with a health maintenance organization  
5 submitted to an insurer or health maintenance organization on or  
6 after September 1, 2003. An application submitted before that date  
7 is governed by the law as it existed immediately before the  
8 effective date of this Act, and that law is continued in effect for  
9 that purpose.

10           SECTION 7. This Act takes effect September 1, 2003.