By: Madden

H.B. No. 3093

## A BILL TO BE ENTITLED

## AN ACT

2 relating to improving access to health care for the citizens of 3 Texas by providing for the reimbursement and use of particular 4 health care practitioners who are licensed by the state to provide 5 certain services.

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

7 SECTION 1. Section 3, Article 21.52, Insurance Code,
8 subsection (d) is amended to read as follows:

Sec. 3. SELECTION OF PRACTITIONERS. (d) There shall not be 9 any Classification, differentiation, or other discrimination in 10 11 the Payment schedule or the payment provisions in a health 12 insurance Policy, nor in the amount or manner of payment or reimbursement Thereunder, between scheduled services or procedures 13 14 when performed by a doctor of podatric medicine, a doctor of optometry, a doctor of chiropractic, a licensed dentist, an 15 16 occupational therapist, a physical therapist, а licensed audiologist, a licensed speech-language pathologist, a licensed 17 18 master social worker--advanced clinical practitioner, a licensed dietician, a licensed professional counselor, a licensed marriage 19 and family therapist, a psychologist, a licensed psychological 20 21 associate, a licensed chemical dependency counselor, an advanced 22 practice nurse or a registered nurse first assistant to provide the services scheduled in the policy, a physician assistant or a 23 licensed surgical assistant to provide the services scheduled in 24

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the policy, a licensed acupuncturist, a licensed hearing instrument 1 2 fitter and dispenser, or which fall within the scope of that practitioner's license or certification and the same services or 3 procedures when performed by an other practitioner of the healing 4 5 arts who services or procedures are covered by the policy. However, a health insurance policy may provide for a different amount of 6 7 payment or reimbursement for scheduled services or procedures when 8 performed by an advanced practice nurse or physician assistant 9 provided the reimbursement methodology used to calculate the payment for the service or procedure is the same methodology used to 10 calculate the payment when the service or procedure is provided by a 11 12 physician. This section applies to a carrier's rate of payment of reimbursement to these types of providers or practitioners under a 13 health insurance policy; it does not apply to an insured 14 15 cost-sharing amounts, such as coinsurance, copayments or deductibles. 16

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SECTION 2. This Act takes effect September 1, 2003.

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