By: Giddings

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	A BILL TO BE ENTITLED
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1	AN ACT
2	relating to a regional health care delivery network pilot project
3	in the workers' compensation system.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Sections 408.0221, Labor Code, is amended to
6	read as follows:
7	Sec. 408.0221. Regional Health Care Delivery Networks;
8	Advisory Committee.
9	(a) In this section and in Section 408.0222:
10	(1) "Advisory committee" means the Health Care Network
11	Advisory Committee.
12	(2) "Regional network" means a regional workers'
13	compensation health care delivery network established [ <del>by the</del>
14	commission] under this section. In addition, any reference to
15	"regional network" is also applicable to the "pilot project"
16	defined in subdivision (3) of this subsection.
17	(3) "Pilot project" means the regional workers'
18	compensation health care pilot project established under
19	subsection (i) of this section.
20	(b) The regional networks established under this section
21	shall be fee-for-service networks designed to improve the quality
22	and reduce the cost of health care, with active health care
23	management and monitoring and a full range of health care services
24	or select health care services under contract as considered

feasible under the feasibility study required under Subsection (d). 1 2 (c) The Health Care Network Advisory Committee is 3 established to advise the commission on the implementation of this 4 section and Section 408.0222 and to monitor and oversee the 5 implementation of the regional network pilot project and regional 6 networks participating in the pilot project. Members of the 7 advisory committee are appointed by the governor for staggered 8 two-year terms, with the membership as follows:

9 (1) three employee representatives recommended by a10 recognized statewide labor federation;

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(2) three employer representatives;

12 (3) three ex officio insurance carrier 13 representatives, with one member representing state agencies, one 14 member representing the Texas <u>Mutual Insurance Company</u> [Workers' 15 <u>Compensation Insurance Fund</u>], and one member representing a 16 voluntary market insurance carrier;

17 (4) three ex officio health care provider 18 representatives;

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(5) one ex officio independent actuarial expert; and

20 (6) the commission's medical advisor, who shall serve21 as chair of the advisory committee.

(d) [The commission, on behalf of the advisory committee established under this section, shall establish and, through competitive procurement, contract with regional networks for the provision of health care under this subtitle.] The commission, on behalf of the advisory committee established under this section, shall, through competitive procurement, contract with one or more

entities to determine the feasibility of, develop, and evaluate the 1 2 regional networks established under this section. Those entities shall also recommend to the advisory committee appropriate network 3 4 standards and application requirements and assist the advisory committee during the procurement process. [The provision of health 5 6 care under this subtitle shall not apply to prescription medication or services as defined by Section 401.011(19), Subsection (e), 7 8 Labor Code.]

9 (e) The advisory committee shall make recommendations to 10 the commission regarding:

(1) the development of the standards by which health care services are provided through regional networks;

13 (2) regional network application requirements and 14 fees;

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(3) contract proposals;

16 (4) the feasibility of establishing one or more 17 regional networks using a phased implementation and evaluation 18 process;

19 (5) the use of consultants as necessary to assist the20 commission in the procurement of regional network contracts; and

(6) the selection of administrators to build andmanage the regional networks and to report on their progress.

(f) The advisory committee shall gather information from other entities, including the Research and Oversight Council on Workers' Compensation, the Texas Health Care Information Council, the Texas Department of Insurance, the Texas Department of Health, and the Employees Retirement System of Texas.

(g) The standards adopted for preferred provider networks 1 under Article 3.70-3C, Insurance Code, as added by Chapter 1024, 2 Acts of the 75th Legislature, Regular Session, 1997, apply as 3 minimum standards for regional health care delivery networks 4 created under this section and are adopted by reference in this 5 section except to the extent they are inconsistent with this 6 7 subtitle. The advisory committee may also recommend additional 8 standards, including standards that require:

9 (1) for each geographic region, access to an adequate 10 number of health care providers and treating doctors in each 11 appropriate health care discipline and the professional 12 specialties within those disciplines and a viable network through:

(A) the use of economic profiling as described by
Article 3.70-3C, Insurance Code, as added by Chapter 1024, Acts of
the 75th Legislature, Regular Session, 1997; and

16 (B) limitations on the number of providers, as17 provided by that article;

18 (2) the ability of an employee to receive treatment by 19 a regional network provider within a reasonable amount of time of 20 the regional network's knowledge of the need or request for 21 treatment and within a reasonable travel distance for the employee;

(3) a reasonable effort by the regional network to
attract health care providers who reflect the ethnic and cultural
background of the regional employee population;

(4) the availability of board-certified occupational medicine specialists to provide expertise on disability management and prevention and treatment of occupational injuries and

1 illnesses;

2 (5) accreditation of the regional networks or a
3 commitment to seek accreditation from a nationally recognized
4 organization such as the American Accreditation HealthCare
5 Commission or the National Committee for Quality Assurance;

6 (6) the use of strict credentialing criteria by 7 regional networks in the selection and deselection of its health 8 care providers, including verification that the provider:

9 (A) is on the commission's list of approved 10 doctors, if the provider is required to be on that list;

(B) has not, at the time of selection or deselection, been sanctioned or made subject to additional utilization review requirements by the commission;

14 (C) is not, at the time of selection or 15 deselection, subject to sanctions or substantive practice 16 restrictions imposed by the provider's licensing authority;

17 (D) has or is able to obtain practice privileges,
18 if required, at a participating hospital; and

(E) is covered by professional liability
 insurance coverage as required by the regional network contract;

(7) satisfactory evidence of the regional network's ability to comply with any financial requirements and ensure delivery of services;

(8) compliance with ongoing training and educational
 requirements established by the commission;

26 (9) the use of nationally recognized, scientifically27 valid, and outcome-based treatment standards as guidelines for

1 health care;

2 (10) disclosure of the availability of interpreter
3 services as appropriate for the evaluation and treatment of
4 employees;

5 (11) timely and accurate reporting of data to 6 appropriately manage and determine the effectiveness of the 7 regional network in reducing medical costs and ensuring quality of 8 care;

9 (12) a process for reconsideration of medical 10 necessity denials and dispute resolution within the regional 11 network; [and]

12 (13) a process for reviewing requests for a change in 13 treating doctors made under Section 408.0222(s); and

14 <u>(14) methods, resources, and procedures for</u> 15 <u>monitoring the quality of care provided to injured workers and for</u> 16 <u>identifying and eliminating inappropriate utilization of medical</u> 17 services.

The advisory committee and the Research and Oversight 18 (h) Workers' Compensation shall develop 19 Council on evaluation standards and specifications as necessary to implement a regional 20 network report card. The commission shall ensure that the report 21 card is published and available for inspection. The commission 22 shall, on behalf of and at the direction of the advisory committee, 23 24 enter into an interagency contract with another state agency or 25 state university with a proven research capacity to produce all or 26 part of the report card, or to oversee production of the report card. Initial funding to produce or oversee production of the 27

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advisory committee to improve the quality and reduce the costs of 1 2 health care provided to employees of employers participating in the pilot project. The advisory committee may initiate the pilot 3 4 project in a designated geographic region or regions. On or before January 1, 2004, the State Office of Risk Management, University of 5 6 Texas system, Texas A&M University system, and Texas Department of 7 Transportation shall, through competitive procurement, individually or collectively contract with one or more regional 8 networks for the provision of health care under this subtitle as 9 part of the pilot project. For the purposes of this section and 10 Section 408.0222, the pilot project is initiated on the date that 11 12 employees begin to receive medical care in the network, and unless continued by statute, ends three years from that date. A network 13 that contracts with a public employer covered under Subtitle C of 14 15 this title, other than an employer covered under Chapter 504, must meet the network standards, report card requirements, and data 16 reporting requirements established by the advisory committee. The 17 regional network administrators shall report quarterly to the 18 commission and the advisory committee on the progress 19 of implementing the regional network pilot project [networks] and 20 shall submit consolidated annual reports by November 1 of each 21 22 subsequent year. The Research and Oversight Council on Workers' Compensation shall report to the legislature by February 1, 2005 23 24 [January 1 of each odd-numbered year] on the status of the regional 25 network pilot project [implementation of regional networks] under this section. The Research and Oversight Council on Workers' 26 Compensation shall have access to confidential information from 27

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1 workers' compensation networks participating in the pilot project 2 upon request, including copies of network fee schedules and contact information for participating providers. The council shall conduct 3 a survey with workers' compensation networks participating in the 4 5 pilot project regarding administrative burdens that are imposed on 6 or waived for preferred providers under the network contract, 7 aggregate data on the number of fee and medical necessity disputes handled within the network, treatment or utilization guidelines 8 used by the network, and disability management guidelines used by 9 the network. Confidential network information obtained by council 10 remains confidential and is not subject to public disclosure under 11 Chapter 552, Texas Government Code. The council shall standardize 12 its information requests to participating networks and provide 13 14 reasonable notice by which these networks must comply with the 15 information request under this subsection. If the council finds that certain participating networks have not reasonably complied 16 17 with the council's information request, then the council shall notify the participating network of its noncompliance and forward a 18 copy of this notice to the advisory committee, the contracting 19 entity, and the commission. A network that does not comply with the 20 21 council's information request is subject to a maximum Class B administrative violation for each week of noncompliance. 22

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(j) The commission shall ensure that [regional network contracts provide that] insurance carriers participating in the pilot project have reasonable rights to conduct audits of the regional networks in the pilot project under this subsection. Insurance carriers participating in the regional network <u>pilot</u>

H.B. No. 3589 1 project shall be allowed the opportunity for consolidated audits of 2 the regional networks.

(k) The cost of assessing the feasibility of, developing, 3 4 and evaluating the regional networks created under this section, including the initial creation and production of a report card, 5 6 shall be funded through an assessment on the subsequent injury fund established under Section 403.006. This cost may not exceed a total 7 8 of \$1.5 million for the regional networks. The cost of ongoing 9 regional network administration and management services and report card administration shall either be included in the fees for health 10 care services paid by insurance carriers participating in the 11 12 regional network or by assessments on networks participating in the 13 pilot project.

14 (1)Based on the information compiled for the annual reports 15 submitted under Subsection (i), the regional network administrators[, in consultation with actuaries with whom the 16 17 regional networks contract, ] shall determine on an annual basis any cost savings to the operation of the workers' compensation system 18 derived from the use of the regional networks and the amount of 19 those savings, and shall submit this information as part of the 20 21 annual report. The regional networks shall contract with independent actuaries or financial advisors to produce this 22 determination if required to do so by the regional network contract 23 24 or the standards adopted under Section 408.0221. On receipt on the first annual report from the networks in the pilot project, the 25 26 advisory committee shall decide whether to expand the pilot project to include insurance carriers not listed in Subsection (i). If the 27

advisory committee chooses to expand the pilot to include other 1 2 insurance carriers, then an insurance carrier not listed in Subsection (i) may elect to participate or not participate, through 3 4 a written participation agreement with the commission on behalf of the advisory committee, in the pilot project established by this 5 6 section. An insurance carrier that elects to participate in the 7 pilot project may elect to contract directly with one or more regional networks for the provision of health care under this 8 subtitle as part of the pilot project. A network that contracts 9 with an insurance carrier that elects to participate in the pilot 10 project must meet the network standards, report card requirements, 11 12 and data reporting requirements established by the advisory 13 committee. 14 (m) The regional network pilot project may, but is not 15 required to, comply with any or all of the following statutory provisions of the Labor Code and related commission rules: 16 (1) Section 413.014, related to preauthorization and 17 concurrent review of medical services; 18 (2) Section 413.011, related to reimbursement 19 policies and guidelines and treatment guidelines; and 20 21 Labor Code or commission rule timeframes related (3) to the payment of medical bills. 22 (n) The applicability of the statutory and rule provisions 23 24 in Subsection (m) shall be determined through the contract negotiations described in this section. 25 SECTION 2. Section 408.0222, Labor Code, is amended to read 26 as follows: 27

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Sec. 408.0222. Participation In Regional Network <u>Pilot</u>
 <u>Project</u>; Selection Of Doctor Within Regional Network; Benefit
 Incentives.

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4 (a) An insurance carrier or a self-insurer certified to 5 provide workers' compensation coverage in this state may elect to 6 participate or not participate, by contract, in [a regional 7 network] the pilot project in accordance with Section 408.0221(m) [established under Section 408.0221]. A public employer covered 8 9 under Subtitle C of this title, other than an employer covered under Chapter 504, is required to participate in <u>the</u> [a] regional network 10 pilot project established under Section 408.0221. An insurance 11 carrier who elects to participate in the pilot project [regional 12 networks agrees] is required to abide by the terms of the regional 13 network contracts between the commission and the regional networks. 14

(b) [An insurance carrier may limit its election to
participate in a regional network established under Section
408.0221 to a particular employer or a particular region of this
state. This subsection expires January 1, 2006.

19 (c)] A health care provider participating in the [a]
 20 regional network pilot project established under Section 408.0221
 21 may perform only those procedures that are within the scope of the
 22 practice for which the health care provider is licensed.

23 (c) [(d)] An employee participating in the regional network 24 pilot project established under Section 408.0221 may elect to 25 participate or not participate in <u>the</u> [<del>a</del>] regional network 26 [established under Section 408.0221]. Only an employee covered by 27 an insurance carrier who is participating [has elected to

participate] in the [a] regional network pilot project established 1 under Section 408.0221 may elect to participate in the [that] 2 3 regional network. An eligible employee may elect to participate or not participate in the regional network for each compensable injury 4 5 sustained by the employee. Except as provided by this section, the employee's election to participate in the network is effective for 6 7 all medical care related to an [that] injury occurring on or after 8 the date the insurance carrier begins to participate in the pilot project. The advisory committee shall make recommendations and the 9 commission, by rule, shall establish: 10

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(1) the form and manner by which an employee:

12 13 (A) receives notice of the employee's rights;

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(A) receives notice of the employee's rights; or(B) documents the employee's election or

14 rescission of a prior election;

15 (2) the timing and recovery of a payment of enhanced 16 benefits; and

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(3) other related issues.

18 (d) [(e)] Except as provided by Subsection (e) [(f)], an 19 employee shall make the election described by this section during 20 an employer-designated enrollment period or at the time of 21 employment. An employee who has elected to participate in the 22 network may rescind that election at any time before the earlier of:

(1) the date on which the employee begins to receive
 enhanced income benefits under Subsection (1) [(m)]; or

(2) the 14th day after the date on which the employee
receives health care from a network health care provider for that
injury.

H.B. No. 3589 (e) [(f)] An employee may elect to participate in the [a]1 2 regional network pilot project established under Section 408.0221 at any time with the insurance carrier's agreement. An employee is 3 4 not bound by an election to participate in the  $[\frac{1}{4}]$  regional network 5 pilot project [made under Subsection (d) or this subsection] if: 6 (1)the insurance carrier waives the election; the commission invalidates the election based on a 7 (2) 8 determination of coercion; 9 the employee relocates to an area outside of the (3) regional network's service area, and the regional network is not 10 able to identify alternate network providers to provide health care 11 services reasonable for the employee's medical condition; or 12 (4) notwithstanding 13 Subsection (m) [(n)],the 14 commission sets aside the employee's election based on a finding 15 that: 16 (A) the worker was bound by an election to 17 participate in the network; 18 the carrier disputes the compensability of (B) the employee's injury; and 19 20 (C) network health care providers are unwilling 21 to provide health care to the employee pending the resolution of the 22 dispute. (f) [(q)] An insurance carrier who elects to participate in 23 24 [a regional network] the pilot project established under Section 408.0221 shall provide each employer who obtains coverage through 25 26 the insurance carrier with adequate information about the regional

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network to share with the employer's employees. Before an employee

1 makes an election under this section to participate in <u>the</u> [<del>a</del>]
2 regional network <u>pilot project</u>, the employer shall provide the
3 employee with:

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4 (1) a complete, plain-language description of the 5 regional network's services, restrictions, and benefits, including 6 a description of the enhanced income benefits that may be due; and

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(2) access to the most recent:

8 (A) list of doctors available through the9 regional network; and

10 (B) regional network report card developed under11 Section 408.0221.

12 (g) [(h)] An employer shall not discharge, subject to 13 disciplinary action, or take an adverse employment action against 14 an employee who elects not to participate in a regional network 15 created under Section 408.0221 if the employer's action would not 16 have occurred in the absence of the employee's election not to 17 participate.

18 (h) [(i)] An employee may bring suit against an employer for 19 violation of Subsection (g) [(h)] if:

(1) the employee gives written notice of intent to bring suit to the employer within 60 days of the alleged violation; and

(2) the employer does not reinstate the employee and pay actual wages lost and reasonable attorney's fees incurred due to the employer's action within 60 days of notification of the employee's intent to bring suit.

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(i) [(j)] Subsection (h) does not authorize a cause of

1 action or damages against the state, a state agency, or an employee 2 of the state beyond the actions and damages authorized by Chapter 101, Civil Practice and Remedies Code. The employee must bring suit 3 for an employer's violation of Subsection (g) [(h)] within one year 4 5 of the alleged violation. A suit under this section may be brought 6 in the county in which: (1) the plaintiff resides; 7 8 (2) the plaintiff was employed; or 9 (3) the defendant's primary place of business is located. 10 (j) [(k)] If the employee prevails in an action under 11 12 Subsection (h) [(i)], the employee may recover: (1) lost wages; 13 14 (2) reinstatement of front pay as equitable relief in 15 lieu of reinstatement; (3) reasonable attorney's fees; and 16 17 (4) court costs. (k) [(1)] A suit under this section is the exclusive remedy 18 for violation of Subsection (g) [(h)], and the provisions of 19 Chapter 451 do not apply to such a violation. Parties may not 20 maintain an action under Rule 42, Texas Rules of Civil Procedure. 21 (1) [(m)] An employee who elects to participate in a 22 regional network created under Section 408.0221 shall receive: 23 24 (1)notwithstanding Section 408.082(c), income 25 benefits from the date disability begins if the disability lasts two weeks or longer; and 26 (2) notwithstanding Section 408.061, an increased 27

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1 maximum weekly benefit of up to 150 percent of the state average
2 weekly wage for temporary income benefits.

3 (m) [(n)] Except for emergency care, or as otherwise 4 provided by this section, an employee who elects to participate in 5 the [a] regional network pilot project shall receive medical 6 treatment, including referrals, from health care providers within 7 the regional network. An employee or an employee's treating doctor 8 may use a health care provider outside of the regional network with 9 the approval of the regional network for good cause consistent with the regional network contract. If medically necessary services are 10 not available through regional network health care providers, the 11 regional network must, on the request of a regional network health 12 care provider, within a reasonable time allow a referral to a 13 14 nonregional network health care provider and shall fully reimburse the nonregional network physician or provider at the rate provided 15 by the commission fee guidelines or an agreed rate. For purposes of 16 17 this subsection, "emergency care" has the meaning assigned by Section 2(g), Texas Health Maintenance Organization Act (Article 18 19 20A.02, Vernon's Texas Insurance Code).

(n) [(o)] A health care provider who participates in the  $[\frac{1}{a}]$ 20 21 regional network pilot project created under Section 408.0221 shall be reimbursed and be subject to utilization review as provided by 22 23 the regional network contract. The insurance carrier is 24 responsible for payment of regional network providers as provided 25 by the contract with the regional network. A non-network provider 26 who does not obtain the approval of the regional network to provide 27 services may not be reimbursed by the insurance carrier, unless the

provider requested and received verification from the insurance carrier that the employee was not bound by a network election under Subsection (d) [(e)].

(o) [(p)] To resolve an issue regarding the necessity or the
appropriateness of care, or referrals to nonregional network
physicians or providers, an employee or an employee's treating
doctor may request a review by an independent review organization
under Section 413.031(d).

(p)  $\left[\frac{q}{q}\right]$  An employee who elects to participate in the  $\left[\frac{a}{a}\right]$ 9 regional network pilot project established under Section 408.0221 10 shall select an initial treating doctor within the regional network 11 as provided by the regional network contract. An employee who 12 requests to change treating doctors within the regional network is 13 not subject to Section 408.022. At the sole discretion of the 14 15 regional network, an employee may select a treating doctor outside of the regional network if: 16

(1) the employee has a preexisting relationship with a doctor who maintains the employee's medical records and has a documented history of treatment before the date of injury; and

20 (2) that doctor agrees in writing to abide by the 21 rules, terms, and conditions of the regional network contract, 22 including an agreement to refer the employee within the regional 23 network for services available through the regional network.

24 (q) [(r)] An employee is subject to the selection of doctor, 25 change of doctor, and other medical benefit and income benefit 26 requirements established under this chapter and Chapter 413 [if an 27 employee]:

(1) <u>if the employee</u> elects not to participate in <u>the</u>
 [<del>a</del>] regional network <u>pilot project</u> established under Section
 408.0221; or

4 (2) <u>as described by Subsection (e)</u> [is employed by an
5 employer for whom the insurance carrier has not elected to
6 participate in a regional network established under Section
7 408.0221].

8 <u>(r)</u> [<del>(s)</del>] An employee may change treating doctors within 9 the regional network established under Section 408.0221 in which 10 the employee is participating in accordance with the regional 11 network contract and is entitled to:

(1) make one change from the initial treating doctor
to an alternate treating doctor within the regional network unless
the change is for the purpose of securing a new impairment rating or
new determination of maximum medical improvement; and

16 (2) request additional changes of the treating doctor17 in the manner provided by the regional network contract.

18 <u>(s)</u> [<del>(t)</del>] An employee or insurance carrier may request that 19 the commission order an examination under Section 408.0041 if an 20 employee has received conflicting impairment ratings or 21 determinations of maximum medical improvement from more than one 22 treating doctor.

23 <u>(t)</u> [<del>(u)</del>] For purposes of this section, the following is not 24 a selection of an alternate doctor in a regional network 25 established under Section 408.0221:

(1) a referral made by the doctor chosen by the
employee if the referral is medically reasonable and necessary;

H.B. No. 3589 (2) the receipt of services ancillary to surgery; 1 2 (3) the obtaining of a second opinion only on the 3 appropriateness of the diagnosis or treatment; 4 (4) the selection of a doctor because the original 5 doctor: 6 (A) dies; 7 (B) retires; or 8 (C) becomes unavailable, [<del>or</del>] unable, or 9 unwilling to provide medical care to the employee; or (5) a change of doctor required because of a change of 10 residence by the employee. 11 SECTION 3. Section 408.023, Labor Code, is amended to read 12 as follows: 13 Sec. 408.0223. Insurance Carrier Networks. 14 15 (a) In this section, "insurance carrier network" means a voluntary workers' compensation health care delivery network 16 17 established by an insurance carrier. The term does not include a regional network established under Section 408.0221. 18 This subtitle does not prohibit an insurance carrier, 19 (b) whether doing business as an individual carrier or as a group, from 20 21 participating in or maintaining voluntary insurance carrier networks if those voluntary insurance carrier networks allow 22 selection of doctors as provided by Section 408.022. 23

(c) This subtitle does not prohibit an insurance carrier
 from concurrently participating in an insurance carrier network and
 a regional network established under Section 408.0221.

27 (d) The standards adopted for preferred provider networks

under Article 3.70-3C, Insurance Code, as added by Chapter 1024, 1 Acts of the 75th Legislature, Regular Session, 1997, and as 2 subsequently amended, apply as minimum standards for insurance 3 4 carrier networks and are adopted by reference in this section 5 except to the extent those standards are inconsistent with this subtitle. The advisory committee, defined in Section 408.0221, may 6 recommend additional standards for insurance carrier networks that 7 are no more stringent than the additional standards that the 8 9 advisory committee recommends for the regional [health care delivery] network pilot project [networks] pursuant to Section 10 408.0221(g). 11

(e) [The] <u>On behalf of the advisory committee, the</u> Texas
 Workers' Compensation Commission shall adopt rules, as necessary,
 to implement additional standards for insurance carrier networks.

15 SECTION 4. This Act takes effect immediately if it receives 16 a vote of two-thirds of all the members elected to each house, as 17 provided by Section 39, Article III, Texas Constitution. If this 18 Act does not receive the vote necessary for immediate effect, this 19 Act takes effect September 1, 2003.