

By: Van de Putte

S.B. No. 1312

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.