Amend SB 23, on third reading, as follows:

(1) In added Subdivision (1), Section 1302.001, Insurance Code, as added by Floor Amendment No. 6, by Eiland, after "provider.", insert "The term does not include a discount health care program operator."

(2) In added Section 1302.001, Insurance Code, as added by Floor Amendment No. 6, by Eiland, following Subdivision (1) of that section, insert the following new subdivision:

(1-a) "Discount health care program operator" means a person who, in exchange for fees, dues, charges, or other consideration operates a discount health care program and contracts with providers, provider networks, or other discount health care program operators to offer access to health care services at a discount and determines the charges to members.

(3) In added Subdivision (2), Section 1302.001, Insurance Code, as added by Floor Amendment No. 6, by Eiland, between "<u>means</u>" and "<u>a hospital</u>" insert "<u>an individual licensed in this state to</u> <u>engage in a health profession, other than a physician, and a health</u> <u>care facility, including</u>".

(4) In Paragraph (A), Subdivision (2), of added Section 1302.002, Insurance Code, as added by Floor Amendment No. 6, by Eiland, at the end of the paragraph, strike "<u>or</u>".

(5) In Paragraph (B), Subdivision (2), of added Section 1302.002, Insurance Code, as added by Floor Amendment No. 6, by Eiland, at the end of the paragraph, strike the underlined period and substitute the following:

"<u>;</u> or

(C) a discount health care program."

(6) In added Section 1302.151, Insurance Code, as added by Floor Amendment No. 6, by Eiland, following Subsection (c) of that section, insert the following new Subsections (d) and (e):

(d) Notwithstanding Subsection (b)(1), a discount broker may offer, but may not require, a contract containing more than one line of business if each line of business is presented in a separate exhibit of the contract that includes:

(1) material contract provisions uniquely applicable to the line of business;

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(2) full and complete disclosure of how the contracted fee schedule for the line of business will be computed, including the percent of billed charges and percent of Medicare;

(3) a toll-free number or electronic address through which the physician may request the fee schedule applicable to any covered services that the physician intends to provide; and

(4) a contract cover page that includes a separate signature line for each line of business for the physician to indicate assent to provide services for that line of business and permit disclosure or transfer of the physician's contracted discounted fee.

(e) For purposes of this section, "transfer" does not include a transfer to a discount health care program.

(7) Strike added Subsection (c), Section 1301.056, Insurance Code, as added by Floor Amendment No. 6, by Eiland, and substitute the following:

"(c) <u>An insurer, third-party administrator, or other entity</u> may not access a discounted fee, as described by Subsection (a), <u>unless notice has been provided to the contracted physicians</u>, <u>practitioners, institutional providers, and organizations of</u> <u>physicians and health care providers. For the purposes of the</u> <u>notice requirements of this subsection, the term "other entity"</u> <u>does not include an employer that contracts with an insurer or</u> <u>third-party administrator. For the purposes of this section, the</u> <u>term "other entity" does not include a discount health care program</u> <u>operator as that term is defined by Section 1302.001.</u>".