Amend CSHB 2256 (Senate committee printing) as follows:
(1) In SECTION 1 of the bill, in added Section 1467.057(d), Insurance Code (page 4, line 46), strike "Sections 151.012 and 151.013, Civil Practice and Remedies Code, do", and substitute "Section 151.012, Civil Practice and Remedies Code, does".
(2) In SECTION 2 of the bill, in added Section 1301.0055(2), Insurance Code (page 6, line 10), strike "health care practitioners" and substitute "contracted physicians and health care providers".
(3) In SECTION 2 of the bill, in added Section 1301.0055, Insurance Code (page 6, lines 12-14), strike Subdivision (3) and substitute the following:
(3) on good cause shown, may allow departure from local market network adequacy standards if the commissioner posts on the department's Internet website the name of the preferred provider plan, the insurer offering the plan, and the affected local market.
(4) In SECTION 5 of the bill, in added Section 324.101(a)(7), Health and Safety Code (page 7, line 9), strike "facility-based physician who" and substitute "facility-based physician or facility-based physician group that".
(5) In SECTION 5 of the bill, in added Section 324.101(a)(8), Health and Safety Code (page 7, line 16), strike "facility-based physician who" and substitute "facility-based physician or facility-based physician group that".
(6) In SECTION 6 of the bill (page 7, line 20), strike "This Act applies" and substitute "(a) Except as provided by Subsection (b), this Act applies".
(7) In SECTION 6 of the bill (page 7, between lines 24 and 25), insert the following:
(b) Section 1467.002(2), Insurance Code, as added by this Act, applies to a health benefit claim filed under a group policy or contract executed under Chapter 1551, Insurance Code, on or after September 1, 2010. A claim filed under a group policy or contract executed under Chapter 1551, Insurance Code, before September 1, 2010, is governed by the law as it existed immediately before September 1, 2010, and that law is continued in effect for that
purpose.

