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S.B. No. 1001

A BILL TO BE ENTITLED

AN ACT

relating to the practice of certain professions regulated under the
Occupations Code.

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

SECTION 1. Title 2, Occupations Code, is amended by adding
Chapter 60 to read as follows:

CHAPTER 60. ABILITY TO PRACTICE PROFESSION

Sec. 60.001. PURPOSE. The purpose of this chapter is to
ensure that a person licensed under Title 3 may practice the
person's profession to the full extent authorized by law in
accordance with the person's education, training, and licensing.

Sec. 60.002. COLLABORATION BETWEEN PHYSICIANS AND
CHIROPRACTORS. A person licensed under Subtitle B, Title 3, and a
person licensed under Chapter 201 are authorized to:

(1) collaborate with each other in providing services
to a client if each person performs only those services that the
person is authorized under state law, rules, or regulations to
perform; or

(2) use objective or subjective means to analyze,
examine, evaluate, or otherwise determine the condition of the
person's client for the purpose of:

(A) providing services to the client that the
person is authorized under state laws, rules, or regulations to
provide; or

1 (B) referring the client to an appropriate person
2 licensed under Title 3 for the provision of services needed by the
3 client.

4 Sec. 60.003. AUTHORITY TO FORM CERTAIN ENTITIES AND
5 ASSOCIATIONS. (a) A person licensed under Subtitle B, Title 3,
6 and a person licensed under Chapter 201 may form a partnership,
7 professional association, or professional limited liability
8 company according to the requirements of this section and any other
9 applicable law.

10 (b) When persons licensed under Chapter 201 form a
11 professional entity with persons licensed under Subtitle B, Title
12 3, as provided by this section, the authority of each practitioner
13 is limited by that practitioner's scope of practice, and a
14 practitioner may not exercise control over another practitioner's
15 clinical authority granted by the other practitioner's license,
16 either through agreements, bylaws, directives, financial
17 incentives, or other arrangements that would assert control over
18 treatment decisions made by the practitioner.

19 (c) The state agencies exercising regulatory control over
20 professions to which this section applies continue to exercise
21 regulatory authority over their respective licenses.

22 (d) A person licensed under Subtitle B, Title 3, who forms a
23 professional entity under this section shall report the formation
24 of the entity and any material change in agreements, bylaws,
25 directives, financial incentives, or other arrangements related to
26 the operation of the entity to the Texas Medical Board no later than
27 the 30th day after the entity is formed or the material change is

1 made.

2 Sec. 60.004. BILLING AND REIMBURSEMENT FOR SERVICES.

3 (a) A person licensed under Chapter 201 may use the same billing
4 codes used by a person licensed under Chapter 453 if the billing
5 codes describe services that the person is authorized to provide
6 under state law, rules, or regulations.

7 (b) If physical modalities and procedures are covered
8 services under a health benefit plan and within the scope of the
9 license of a chiropractor and one or more other type of
10 practitioner, a health benefit plan issuer may not:

11 (1) deny payment or reimbursement for physical
12 modalities and procedures provided by a chiropractor if:

13 (A) the chiropractor provides the modalities and
14 procedures in strict compliance with laws and rules relating to a
15 chiropractor's license; and

16 (B) the health benefit plan issuer allows payment
17 or reimbursement for the same physical modalities and procedures
18 performed by another type of practitioner;

19 (2) make payment or reimbursement for particular
20 covered physical modalities and procedures within the scope of a
21 chiropractor's practice contingent on treatment or examination by a
22 practitioner that is not a chiropractor; or

23 (3) establish other limitations on the provision of
24 covered physical modalities and procedures that would prohibit a
25 covered person from seeking the covered physical modalities and
26 procedures from a chiropractor to the same extent that the covered
27 person may obtain covered physical modalities and procedures from

1 another type of practitioner.

2 (c) Nothing in this section requires an entity to cover
3 particular services or affects the ability of an entity to
4 determine whether specific procedures for which payment or
5 reimbursement is requested are medically necessary.

6 (d) This section does not apply to workers' compensation
7 insurance coverage as defined by Section 401.011, Labor Code, or a
8 self-insured employee welfare benefit plan subject to the Employee
9 Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et
10 seq.).

11 SECTION 2. This Act takes effect September 1, 2011.