S.B. No. 1001 Carona, et al. By: (Chisum) Substitute the following for S.B. No. 1001: By: Geren C.S.S.B. No. 1001 A BILL TO BE ENTITLED 1 AN ACT 2 relating to the practice of certain professions regulated under the Occupations Code and the payment and reimbursement of certain 3 4 professionals. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 5 SECTION 1. Subtitle A, Title 3, Occupations Code, 6 is 7 amended by adding Chapter 115 to read as follows: CHAPTER 115. ABILITY TO PRACTICE PROFESSION 8 Sec. 115.001. PURPOSE. The purpose of this chapter is to 9 ensure that certain persons licensed under this title may practice 10 their professions to the full extent authorized by law in 11 accordance with the person's education, training, and licensing. 12 Sec. 115.002. COLLABORATION BETWEEN PHYSICIANS AND 13 14 CHIROPRACTORS. A person licensed under Subtitle B and a person licensed under Chapter 201 are authorized to: 15 16 (1) collaborate with each other in providing services to a client if each person performs only those services that the 17 person is authorized under state law, rules, or regulations to 18 19 perform; or (2) use objective or subjective means to analyze, 20 21 examine, evaluate, or otherwise determine the condition of the person's client for the purpose of: 22 23 (A) providing services to the client that the person is authorized under state laws, rules, or regulations to 24

1

C.S.S.B. No. 1001

## 1 provide; or

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

5 <u>Sec. 115.003. AUTHORITY TO FORM CERTAIN ENTITIES AND</u> 6 <u>ASSOCIATIONS. (a) A person licensed under Subtitle B and a person</u> 7 <u>licensed under Chapter 201 may form a partnership, professional</u> 8 <u>association, or professional limited liability company according</u> 9 to the requirements of this section and any other applicable law.

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

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.

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

C.S.S.B. No. 1001

1 made.

Sec. 115.004. BILLING AND REIMBURSEMENT FOR SERVICES. (a) A
person licensed under Chapter 201 may use the same billing codes
used by a person licensed under Chapter 453 if the billing codes
describe services that the person is authorized to provide under
state law, rules, or regulations.

7 (b) If physical modalities and procedures are covered 8 services under a health insurance policy, as defined by Section 9 <u>1451.101</u>, Insurance Code, and within the scope of the license of a 10 chiropractor and one or more other type of practitioner, a health 11 insurance policy issuer shall comply with Section 1451.109, 12 Insurance Code, and any other applicable law.

13 SECTION 2. Section 1451.109, Insurance Code, is amended to 14 read as follows:

15 Sec. 1451.109. SELECTION OF CHIROPRACTOR. (a) An insured 16 may select a chiropractor to provide the medical or surgical 17 services or procedures scheduled in the health insurance policy 18 that are within the scope of the chiropractor's license.

19 (b) If physical modalities and procedures are covered 20 services under a health insurance policy and within the scope of the 21 license of a chiropractor and one or more other type of 22 practitioner, a health insurance policy issuer may not:

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

(A) the chiropractor provides the modalities and
 procedures in strict compliance with laws and rules relating to a

27 chiropractor's license; and

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C.S.S.B. No. 1001 1 (B) the health insurance policy issuer allows payment or reimbursement for the same physical modalities and 2 procedures performed by another type of practitioner; 3 4 (2) make payment or reimbursement for particular 5 covered physical modalities and procedures within the scope of a chiropractor's practice contingent on treatment or examination by a 6 7 practitioner that is not a chiropractor; or 8 (3) establish other limitations on the provision of covered physical modalities and procedures that would prohibit an 9 insured from seeking the covered physical modalities and procedures 10 from a chiropractor to the same extent that the insured may obtain 11 12 covered physical modalities and procedures from another type of 13 practitioner. 14 (c) Nothing in this section requires a health insurance 15 policy issuer to cover particular services or affects the ability of a health insurance policy issuer to determine whether specific 16 17 procedures for which payment or reimbursement is requested are medically necessary. 18 19 (d) This section does not apply to: (1) workers' compensation insurance coverage as 20 21 defined by Section 401.011, Labor Code; 22 (2) a self-insured employee welfare benefit plan subject to the Employee Retirement Income Security Act of 1974 (29 23 24 U.S.C. Section 1001 et seq.); 25 (3) the child health plan program under Chapter 62, 26 Health and Safety Code, or the health benefits plan for children 27 under Chapter 63, Health and Safety Code; or

C.S.S.B. No. 1001

(4) a Medicaid managed care program operated under
 Chapter 533, Government Code, or a Medicaid program operated under
 Chapter 32, Human Resources Code.

4 SECTION 3. The changes in law made by this Act to Section 1451.109, Insurance Code, apply only to a health insurance policy 5 6 that is delivered, issued for delivery, or renewed on or after the effective date of this Act. A policy delivered, issued for 7 delivery, or renewed before the effective date of this Act is 8 governed by the law as it existed immediately before the effective 9 date of this Act, and that law is continued in effect for that 10 purpose. 11

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SECTION 4. This Act takes effect September 1, 2011.