

By: Hinojosa, et al.
(Guerra, Raymond)

S.B. No. 1150

A BILL TO BE ENTITLED

AN ACT

1
2 relating to a provider protection plan that ensures efficiency and
3 reduces administrative burdens on providers participating in a
4 Medicaid managed care model or arrangement.

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

6 SECTION 1. Subchapter A, Chapter 533, Government Code, is
7 amended by adding Section 533.0055 to read as follows:

8 Sec. 533.0055. PROVIDER PROTECTION PLAN. (a) The
9 commission shall develop and implement a provider protection plan
10 that is designed to reduce administrative burdens placed on
11 providers participating in a Medicaid managed care model or
12 arrangement implemented under this chapter and to ensure efficiency
13 in provider enrollment and reimbursement. The commission shall
14 incorporate the measures identified in the plan, to the greatest
15 extent possible, into each contract between a managed care
16 organization and the commission for the provision of health care
17 services to recipients.

18 (b) The provider protection plan required under this
19 section must provide for:

20 (1) prompt payment and proper reimbursement of
21 providers by managed care organizations;

22 (2) prompt and accurate adjudication of claims
23 through:

24 (A) provider education on the proper submission

1 of clean claims and on appeals;

2 (B) acceptance of uniform forms, including HCFA
3 Forms 1500 and UB-92 and subsequent versions of those forms,
4 through an electronic portal; and

5 (C) the establishment of standards for claims
6 payments in accordance with a provider's contract;

7 (3) adequate and clearly defined provider network
8 standards that are specific to provider type, including physicians,
9 general acute care facilities, and other provider types defined in
10 the commission's network adequacy standards in effect on January 1,
11 2013, and that ensure choice among multiple providers to the
12 greatest extent possible;

13 (4) a prompt credentialing process for providers;

14 (5) uniform efficiency standards and requirements for
15 managed care organizations for the submission and tracking of
16 preauthorization requests for services provided under the Medicaid
17 program;

18 (6) establishment of an electronic process, including
19 the use of an Internet portal, through which providers in any
20 managed care organization's provider network may:

21 (A) submit electronic claims, prior
22 authorization requests, claims appeals and reconsiderations,
23 clinical data, and other documentation that the managed care
24 organization requests for prior authorization and claims
25 processing; and

26 (B) obtain electronic remittance advice,
27 explanation of benefits statements, and other standardized

1 reports;

2 (7) the measurement of the rates of retention by
3 managed care organizations of significant traditional providers;

4 (8) the creation of a work group to review and make
5 recommendations to the commission concerning any requirement under
6 this subsection for which immediate implementation is not feasible
7 at the time the plan is otherwise implemented, including the
8 required process for submission and acceptance of attachments for
9 claims processing and prior authorization requests through an
10 electronic process under Subdivision (6) and, for any requirement
11 that is not implemented immediately, recommendations regarding the
12 expected:

13 (A) fiscal impact of implementing the
14 requirement; and

15 (B) timeline for implementation of the
16 requirement; and

17 (9) any other provision that the commission determines
18 will ensure efficiency or reduce administrative burdens on
19 providers participating in a Medicaid managed care model or
20 arrangement.

21 SECTION 2. As soon as possible, but not later than September
22 1, 2014, the Health and Human Services Commission shall implement
23 the provider protection plan required under Section 533.0055,
24 Government Code, as added by this Act.

25 SECTION 3. If before implementing any provision of this Act
26 a state agency determines that a waiver or authorization from a
27 federal agency is necessary for implementation of that provision,

1 the agency affected by the provision shall request the waiver or
2 authorization and may delay implementing that provision until the
3 waiver or authorization is granted.

4 SECTION 4. This Act takes effect September 1, 2013.