

Amend CSHB 574 (house committee printing) as follows:

(1) On page 1, line 23, strike "843.363(a)" and substitute "843.363".

(2) On page 1, at the end of line 23, add "by amending Subsection (a) and adding Subsection (a-1)".

(3) On page 2, between lines 20-21, insert the following:

(a-1) A health maintenance organization may not, as a condition of payment with a physician, dentist, or provider, or in any other manner, require a physician, dentist, or provider to provide a notification form stating that the physician, dentist, or provider is an out-of-network provider to a current, prospective, or former patient, or a person designated by the patient, if the form contains additional information that is intended, or is otherwise required to be presented in a manner that is intended, to intimidate the patient.

(4) Add the following appropriately numbered SECTION to the bill and renumber SECTIONS of the bill accordingly:

SECTION _____. Section 1301.067, Insurance Code, is amended by adding Subsection (a-1) to read as follows:

(a-1) An insurer may not, as a condition of payment with a physician or health care provider or in any other manner, require a physician or health care provider to provide a notification form stating that the physician or health care provider is an out-of-network provider to a current, prospective, or former patient, or a person designated by the patient, if the form contains additional information that is intended, or is otherwise required to be presented in a manner that is intended, to intimidate the patient.