

Amend CSHB 574 (house committee report) by adding the following appropriately numbered SECTIONS to the bill and renumbering subsequent SECTIONS of the bill accordingly:

SECTION \_\_\_\_\_. Section 1301.069, Insurance Code, is amended to read as follows:

Sec. 1301.069. SERVICES PROVIDED BY CERTAIN PHYSICIANS AND HEALTH CARE PROVIDERS. The provisions of this chapter relating to prompt payment by an insurer of a physician or health care provider and to verification of medical care or health care services apply to a physician or provider who:

(1) is an out-of-network ~~[not a preferred]~~ provider ~~[included in the preferred provider network]~~; and

(2) provides to an insured:

(A) care related to an emergency or its attendant episode of care as required by state or federal law; or

(B) specialty or other medical care or health care services at the request of the insurer, or ~~[or]~~ a preferred provider, or an insured with out-of-network coverage ~~[because the services are not reasonably available from a preferred provider who is included in the preferred delivery network]~~.

SECTION \_\_\_\_\_. Section 1301.069, Insurance Code, as amended by this Act, applies only to payment of a claim submitted to an insurer for payment on or after January 1, 2016. A claim submitted before January 1, 2016, is governed by the law as it existed immediately before the effective date of this Act, and that law is continued in effect for that purpose.