

By: Price

H.B. No. 2348

A BILL TO BE ENTITLED

AN ACT

relating to nondiscrimination against physicians in payment for telephone consultation services.

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

SECTION 1. Subtitle F, Title 8, Insurance Code, is amended by adding Chapter 1459 to read as follows:

CHAPTER 1459. FAIR ACCESS TO TELEPHONE CONSULTATIONS

Sec. 1459.001. DEFINITION. In this chapter, "physician" means:

(1) an individual licensed to practice medicine in this state under Subtitle B, Title 3, Occupations Code;

(2) a professional association composed solely of individuals licensed to practice medicine in this state;

(3) a single legal entity authorized to practice medicine in this state that is owned by a group of individuals licensed to practice medicine in this state;

(4) a nonprofit health corporation certified by the Texas Medical Board under Chapter 162, Occupations Code; or

(5) a partnership composed solely of individuals licensed to practice medicine in this state.

Sec. 1459.002. APPLICABILITY OF CHAPTER. (a) This chapter applies only to an employee benefit plan or a health benefit plan that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including:

1 (1) an individual, group, blanket, or franchise
2 insurance policy or insurance agreement, a group hospital service
3 contract, or a small or large employer group contract or similar
4 coverage document that is offered by:

5 (A) an insurance company;

6 (B) a group hospital service corporation
7 operating under Chapter 842;

8 (C) a fraternal benefit society operating under
9 Chapter 885;

10 (D) a stipulated premium company operating under
11 Chapter 884;

12 (E) a reciprocal exchange operating under
13 Chapter 942;

14 (F) a health maintenance organization operating
15 under Chapter 843; or

16 (G) an approved nonprofit health corporation
17 that holds a certificate of authority under Chapter 844; or

18 (2) a multiple employer welfare arrangement that holds
19 a certificate of authority under Chapter 846, or any other employee
20 benefit plan.

21 (b) This chapter applies to group health coverage made
22 available by a school district in accordance with Section [22.004](#),
23 Education Code.

24 (c) Notwithstanding Section [172.014](#), Local Government Code,
25 or any other law, this chapter applies to health and accident
26 coverage provided by a risk pool created under Chapter 172, Local
27 Government Code.

1 (d) Notwithstanding any provision in Chapter 1551, 1575,
2 1579, or 1601 or any other law, this chapter applies to:

- 3 (1) a basic coverage plan under Chapter 1551;
4 (2) a basic plan under Chapter 1575;
5 (3) a primary care coverage plan under Chapter 1579;
6 and
7 (4) basic coverage under Chapter 1601.

8 (e) Notwithstanding Section 1501.251 or any other law, this
9 chapter applies to a small employer health benefit plan subject to
10 Chapter 1501.

11 (f) Notwithstanding Sections 1507.004 and 1507.053, or any
12 other law, this chapter applies to a consumer choice of benefits
13 plan issued under Chapter 1507.

14 (g) Notwithstanding any other law, this chapter applies to:
15 (1) the state child health plan or the health benefits
16 plan for children under Chapter 62 or 63, Health and Safety Code;
17 (2) a Medicaid managed care program operated under
18 Chapter 533, Government Code; and
19 (3) a Medicaid program operated under Chapter 32,
20 Human Resources Code.

21 Sec. 1459.003. NONDISCRIMINATION IN TELEPHONE CONSULTATION
22 SERVICES. (a) An employee benefit plan or a health benefit plan
23 may not:

24 (1) prohibit a physician from charging for a telephone
25 consultation with a covered patient if that plan allows another
26 person to charge for a telephone consultation with a covered
27 patient;

1 (2) deny payment to a physician for a medically
2 necessary telephone consultation with a covered patient if that
3 plan pays another person for a telephone consultation with a
4 covered patient; or

5 (3) discriminate against a physician in determining a
6 payment amount for a medically necessary telephone consultation
7 provided to a covered patient if that plan pays another person for a
8 telephone consultation with a covered patient.

9 (b) Nothing in this section shall be construed as
10 prohibiting an employee benefit plan or a health benefit plan from
11 paying a physician for medically necessary telephone
12 consultations.

13 (c) Nothing in this section shall be construed as permitting
14 a physician to charge or requiring an employee benefit plan or a
15 health benefit plan to pay for telephonic:

16 (1) appointment scheduling;

17 (2) appointment reminders; or

18 (3) responses to billing or payment inquiries.

19 SECTION 2. The change in law made by this Act applies only
20 to an employee benefit plan or a health benefit plan that is
21 delivered, issued for delivery, or renewed on or after September 1,
22 2015. An employee benefit plan or a health benefit plan delivered,
23 issued for delivery, or renewed before September 1, 2015, is
24 governed by the law as it existed immediately before the effective
25 date of this Act, and that law is continued in effect for that
26 purpose.

27 SECTION 3. If before implementing any provision of this Act

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1 a state agency determines that a waiver or authorization from a
2 federal agency is necessary for implementation of that provision,
3 the agency affected by the provision shall request the waiver or
4 authorization and may delay implementing that provision until the
5 waiver or authorization is granted.

6 SECTION 4. This Act takes effect September 1, 2015.