By: Seliger S.B. No. 1229

## A BILL TO BE ENTITLED

		AN ACT
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- 2 relating to restrictions on the use of credit card payments to
- 3 settle claims for health care services.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 5 SECTION 1. (a) The legislature finds and declares that
- 6 this Act is necessary to:
- 7 (1) remove barriers that hinder physicians and other
- 8 health care providers from exercising their right to receive
- 9 payments, upon request, from health plans through Health Insurance
- 10 Portability and Accountability Act-standard automated
- 11 clearinghouse electronic fund transfers;
- 12 (2) eliminate unnecessary and excessive fees imposed
- 13 on physicians and other health care providers by certain licensees
- 14 and their contracted vendors who use credit card payments, rather
- 15 than automated clearinghouse electronic fund transfer payments, to
- 16 settle claims for health care services; and
- 17 (3) eliminate the unnecessary administrative hassle
- 18 that licensee use of credit card payments in the settlement of
- 19 claims for health care services imposes on physicians and other
- 20 health care providers.
- 21 (b) The legislature finds and declares that:
- (1) despite the potential benefits associated with
- 23 electronic funds transfer payments, many physicians and other
- 24 health care providers are being subjected to fees associated with

- 1 credit card payments that essentially:
- 2 (A) reduce the contracted fee amounts of
- 3 physicians and other health care providers; and
- 4 (B) shift the costs of transferring money
- 5 electronically from the licensee to the physician or other health
- 6 care provider;
- 7 (2) physicians and other health care providers are
- 8 often unaware of these high fees when accepting credit card
- 9 payments from licensees and their contracted vendors;
- 10 (3) physicians and other health care providers also
- 11 are often unaware:
- 12 (A) of their right to receive, upon request,
- 13 Health Insurance Portability and Accountability Act-standard
- 14 automated clearinghouse electronic fund transfer payments from
- 15 health plans; and
- 16 (B) that the only fee that should be assessed in
- 17 association with an automated clearinghouse electronic fund
- 18 transfer payment is a nominal banking fee;
- 19 (4) licensees often receive cash-back incentives from
- 20 credit card companies for credit card payment transactions;
- 21 (5) the use of virtual credit cards for payment is an
- 22 administrative hassle in that it requires the staff of physicians
- 23 and other health care providers to manually enter payments into
- 24 their own credit card processing system or devote staff time to
- 25 write or call the licensee to assert the right to be paid by
- 26 automated clearinghouse electronic fund transfer; and
- 27 (6) unlike payments made by patients using credit

- 1 cards, credit card payments made by licensees or their contracted
- 2 vendors do not offer significant risk reduction for physicians and
- 3 other health care providers, but nonetheless carry increased
- 4 processing charges.
- 5 SECTION 2. Subtitle C, Title 5, Insurance Code, is amended
- 6 by adding Chapter 564 to read as follows:
- 7 CHAPTER 564. PROHIBITED PRACTICES RELATED TO PAYMENT FOR
- 8 <u>HEALTH CARE SERVICES</u>
- 9 <u>Sec. 564.001. CERTAIN CREDIT CARD PAYMENTS PROHIBITED.</u>
- 10 (a) In this section:
- 11 (1) "Administrator" has the meaning assigned by
- 12 Section 4151.001. Notwithstanding that section or any other law,
- 13 the term includes:
- 14 (A) a joint fund, risk management pool, or
- 15 self-insurance pool composed of political subdivisions of this
- 16 state that participate in a fund or pool through interlocal
- 17 agreements, any nonprofit administrative agency or governing body
- 18 or other nonprofit entity that acts solely on behalf of a fund,
- 19 pool, agency, or body, or any other fund, pool, agency, or body
- 20 established under or for the purpose of implementing an interlocal
- 21 governmental agreement; and
- 22 (B) a self-insured political subdivision.
- 23 (2) "Credit card payment" means a type of electronic
- 24 funds transfer by which a licensee or a contracted vendor of a
- 25 licensee sends credit card payment information and instructions
- 26 through or on any medium to the health care provider, who then
- 27 processes the payments using standard credit card technology. The

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   term includes a virtual credit card payment.
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               (3) "Health care provider" means any person,
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   partnership, professional association, corporation, facility, or
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   institution duly licensed, certified, registered, or chartered by
   this state to provide health care services, including:
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6
                    (A) a physician;
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                    (B) an officer, director, shareholder, member,
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   partner, manager, owner, or affiliate of a physician or other
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   health care provider; and
                    (C) an employee, independent contractor, or
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   agent of a physician or other health care provider acting in the
   course and scope of the employment or contractual relationship.
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               (4) "Health care services" means services provided to
   an individual to prevent, alleviate, cure, or heal human illness or
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   injury, including:
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16
                    (A) pharmaceutical services;
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                    (B) medical, chiropractic, or dental care
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   services;
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                    (C) hospitalization; and
20
                    (D) care or services incidental to the health
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   care services described by Paragraphs (A)-(C).
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               (5) "Licensee" means:
23
                    (A) an insurer as defined by Section 1301.001;
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                    (B) a health maintenance organization as defined
25
   by Section 843.002;
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                    (C) a person required to register under Section
27
   1458.051;
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1	(D) an administrator;				
2	(E) an officer, director, shareholder, member,				
3	partner, manager, owner, or affiliate of a licensee described by				
4	Paragraphs (A)-(D); and				
5	(F) an employee, independent contractor, or				
6	agent of a licensee described by Paragraphs (A)-(D) acting in the				
7	course and scope of the employment or contractual relationship.				
8	(6) "Physician" means:				
9	(A) an individual licensed to practice medicine				
10	in this state;				
11	(B) a professional association organized by an				
12	individual physician or group of physicians;				
13	(C) a partnership or limited liability				
14	partnership formed by a group of physicians;				
15	(D) a nonprofit health corporation certified by				
16	the Texas Medical Board under Chapter 162, Occupations Code;				
17	(E) a limited liability company formed by a group				
18	of physicians; or				
19	(F) a single legal entity authorized to practice				
20	medicine owned by a group of physicians.				
21	(7) "Virtual credit card payment" means a credit card				
22	payment for which no physical credit card is presented to the health				
23	care provider and the single-use credit card expires upon payment				
24	processing.				
25	(b) A licensee or contracted vendor of a licensee may not				
26	use a credit card payment to settle a claim for health care services				
27	with a health care provider.				

- 1 <u>(c) The provisions in this section may not be waived,</u>
- 2 voided, nullified, or modified by contract.
- 3 (d) Nothing in this section may be construed to prohibit:
- 4 (1) the use of an automated clearinghouse electronic
- 5 funds transfer to settle a claim for health care services with a
- 6 health care provider;
- 7 (2) the use of a credit card to settle a claim for
- 8 health care services with a health care provider, if the payment
- 9 using a credit card is made:
- 10 (A) directly by the patient; or
- 11 (B) by an individual on behalf of the patient for
- 12 the purpose of paying the patient's out-of-pocket
- 13 responsibilities; or
- 14 (3) the use of a flexible spending account or health
- 15 savings account, without regard to whether a credit card is issued
- 16 to the patient under the account.
- 17 SECTION 3. The change in law made by this Act applies only
- 18 to charges for health care services provided on or after the
- 19 effective date of this Act. Charges for health care services
- 20 provided before the effective date of this Act are governed by the
- 21 law in effect immediately before that date, and that law is
- 22 continued in effect for that purpose.
- 23 SECTION 4. This Act takes effect September 1, 2015.