By: Muñoz, Jr.

H.B. No. 1649

	A BILL TO BE ENTITLED
1	AN ACT
2	relating to the use of extrapolation by a health maintenance
3	organization or an insurer to audit claims.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 843.340, Insurance Code, is amended by
6	adding Subsections (f) and (g) to read as follows:
7	(f) A health maintenance organization may not use
8	extrapolation to complete an audit of a participating physician or
9	provider. Any additional payment due a participating physician or
10	provider or any refund due the health maintenance organization must
11	be based on the actual overpayment or underpayment and may not be
12	based on an extrapolation.
13	(g) In this section, "extrapolation" means a mathematical
14	process or technique used by a health maintenance organization in
15	the audit of a participating physician or provider to estimate
16	audit results or findings for a larger batch or group of claims not
17	reviewed by the health maintenance organization.
18	SECTION 2. Section 1301.105, Insurance Code, is amended by
19	adding Subsections (e) and (f) to read as follows:
20	(e) An insurer may not use extrapolation to complete an
21	audit of a preferred provider. Any additional payment due a
22	preferred provider or any refund due the insurer must be based on
23	the actual overpayment or underpayment and may not be based on an
24	extrapolation.

85R3340 MEW-D

1

H.B. No. 1649

(f) In this section, "extrapolation" means a mathematical
process or technique used by an insurer in the audit of a preferred
provider to estimate audit results or findings for a larger batch or
group of claims not reviewed by the insurer.
SECTION 3. The change in law made by this Act applies only

6 to the audit of a physician or provider under a contract with an 7 insurer or health maintenance organization entered into or renewed 8 on or after the effective date of this Act.

9

SECTION 4. This Act takes effect September 1, 2017.