By: Gooden

H.B. No. 3124

	A BILL TO BE ENTITLED
1	AN ACT
2	relating to the release of certain physician-specific comparison
3	data to physicians participating in health benefit plan networks.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 1460.001, Insurance Code, is amended by
6	adding Subdivision (1-a) to read as follows:
7	(1-a) "Participating physician" means a physician who
8	contracts with a health benefit plan issuer to provide medical care
9	or health care to enrollees in a health benefit plan.
10	SECTION 2. Section 1460.003, Insurance Code, is amended by
11	adding Subsections (c) and (d) to read as follows:
12	(c) Subsection (a) does not apply to physician-specific
13	cost comparison information released by a health benefit plan
14	issuer to a participating physician whose payment by the health
15	benefit plan issuer is based partly on costs of other providers that
16	are attributed by the health benefit plan issuer to the
17	participating physician if:
18	(1) the measures and methodology used in developing
19	the cost comparison information are transparent and valid; and
20	(2) the health benefit plan issuer provides a
21	participating physician at the request of the participating
22	physician:
23	(A) the cost comparison information for the
24	participating physician; and

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1	(B) a fair opportunity, at least twice per
2	calendar year, to dispute the cost comparison information
3	associated with the participating physician.
4	(d) A participating physician who receives cost comparison
5	information described by Subsection (c) associated with another
6	physician may not disclose the information to any other person,
7	except for the purpose of:
8	(1) managing the participating physician's business,
9	patient population, or referral decisions; or
10	(2) obtaining legal advice regarding a dispute by the
11	participating physician under this section.
12	SECTION 3. The change in law made by this Act applies only
13	to a contract between a physician and a health benefit plan issuer
14	entered into or renewed on or after January 1, 2018. A contract
15	between a physician and health benefit plan issuer entered into or
16	renewed before January 1, 2018, is governed by the law as it existed
17	immediately before that date, and that law is continued in effect
18	for that purpose.

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

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