A BILL TO BE ENTITLED

1              AN ACT

2 relating to the use of clinical decision support software and

3 laboratory benefits management programs by physicians and health

4 care providers in connection with provision of clinical laboratory

5 services to health benefit plan enrollees.

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

7        SECTION 1.  Chapter 1451, Insurance Code, is amended by

8 adding Subchapter M to read as follows:

9              SUBCHAPTER M.  CLINICAL LABORATORIES

10        Sec. 1451.601.  DEFINITIONS.  In this subchapter:

11             (1)  "Clinical decision support software" means

12 computer software that compares patient characteristics to a

13 database of clinical knowledge to produce patient-specific

14 assessments or recommendations to assist a physician or health care

15 provider in making clinical decisions.

16             (2)  "Clinical laboratory service" means the

17 examination of a sample of biological material taken from a human

18 body ordered by a physician or health care provider for use in the

19 diagnosis, prevention, or treatment of a disease or the

20 identification or assessment of a medical or physical condition.

21             (3)  "Enrollee" means an individual enrolled in a

22 health benefit plan.

23             (4)  "Health benefit plan issuer" means an entity

24 authorized under this code or another insurance law of this state to

1 provide health insurance or another form of health benefit plan in

2 this state, including:

3                                     (A)   an insurance company;

4                                     (B)   a   group   hospital   service   corporation

5 operating under Chapter 842;

6                                     (C)   a health maintenance organization operating

7 under Chapter 843;

8                                     (D)   an   approved   nonprofit   health   corporation

9 that holds a certificate of authority under Chapter 844;

10                                     (E)   a multiple employer welfare arrangement that

11 holds a certificate of authority under Chapter 846;

12                                     (F)   a stipulated premium company operating under

13 Chapter 884;

14                                     (G)   a fraternal benefit society operating under

15 Chapter 885;

16                                     (H)   a Lloyd's plan operating under Chapter 941;

17 or

18                                     (I)   an exchange operating under Chapter 942.

19                     (5)   "Laboratory benefits management program" means a

20 health benefit plan issuer protocol or program administered by the

21 health benefit plan issuer or an entity under contract with the

22 health benefit plan issuer that dictates or limits decision making

23 by a physician or health care provider relating to the use of

24 clinical laboratory services.

25           Sec. 1451.602.   CERTAIN   REQUIREMENTS   FOR   USE   OF   CLINICAL

26 LABORATORIES AND LABORATORY SERVICES PROHIBITED.   (a)   A health

27 benefit plan issuer may not require the use of clinical decision

1 support software or a laboratory benefits management program by an

2 enrollee's physician or health care provider before the physician

3 or health care provider orders a clinical laboratory service for

4 the enrollee.

5 (b) A health benefit plan issuer may not direct or limit the

6 decision making of an enrollee's physician or health care provider

7 relating to the use of a clinical laboratory service or referral of

8 a patient specimen to a laboratory in the health benefit plan

9 network or otherwise designated by the health benefit plan issuer.

10 (c) A health benefit plan issuer may not limit or deny

11 payment for a clinical laboratory service based on whether the

12 ordering physician or health care provider uses clinical decision

13 support software or a laboratory benefits management program.

14 SECTION 2. Subchapter M, Chapter 1451, Insurance Code, as

15 added by this Act, applies to a contract that is entered into or

16 renewed on or after the effective date of this Act. A contract

17 entered into or renewed before the effective date of this Act is

18 governed by the law as it existed immediately before the effective

19 date of this Act, and that law is continued in effect for that

20 purpose.

21 SECTION 3. This Act takes effect September 1, 2017.