A BILL TO BE ENTITLED 1 AN ACT 2 relating to the performance and appeal of utilization review by and under the direction of physicians. 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 5 SECTION 1. Section 4201.152, Insurance Code, is amended to read as follows: 6 Sec. 4201.152. UTILIZATION REVIEW UNDER DIRECTION 7 OF PHYSICIAN. A utilization review agent shall conduct utilization 8 9 review under the direction of a physician licensed to practice medicine in this [by a] state [licensing agency in the United 10 11 States]. 12 SECTION 2. Subchapter D, Chapter 4201, Insurance Code, is amended by adding Section 4201.1525 to read as follows: 13 14 Sec. 4201.1525. UTILIZATION REVIEW BY PHYSICIANS. (a) A utilization review agent that uses a physician to conduct 15 16 utilization review may only use a physician licensed to practice medicine in this state. 17 (b) A payor that conducts utilization review on the payor's 18 own behalf is subject to Subsection (a) as if the payor were a 19 20 utilization review agent. 21 SECTION 3. Section 4201.356, Insurance Code, is amended to read as follows: 22 23 Sec. 4201.356. DECISION BY PHYSICIAN REQUIRED; SPECIALTY REVIEW. (a) The procedures for appealing an adverse determination 24

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1 must provide that a physician <u>licensed to practice medicine in this</u>
2 <u>state</u> makes the decision on the appeal, except as provided by
3 Subsection (b).

(b) If not later than the 10th working day after the date an 4 appeal is denied the enrollee's health care provider states in 5 writing good cause for having a particular type of specialty 6 provider review the case, a health care provider licensed in this 7 8 state who is of the same or a similar specialty as the health care provider who would typically manage the medical or 9 dental 10 condition, procedure, or treatment under consideration for review 11 shall review the decision denying the appeal. The specialty review 12 must be completed within 15 working days of the date the health care 13 provider's request for specialty review is received.

SECTION 4. Section 4201.357(a), Insurance Code, is amended to read as follows:

16 (a) The procedures for appealing an adverse determination 17 must include, in addition to the written appeal, a procedure for an 18 expedited appeal of a denial of emergency care or a denial of 19 continued hospitalization. That procedure must include a review 20 by a health care provider who:

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(1) has not previously reviewed the case; [and]

(2) is of the same or a similar specialty as the health
care provider who would typically manage the medical or dental
condition, procedure, or treatment under review in the appeal; and

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(3) is licensed in this state.

26 SECTION 5. Section 4201.454, Insurance Code, is amended to 27 read as follows:

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1 Sec. 4201.454. UTILIZATION REVIEW UNDER DIRECTION OF PROVIDER OF SAME SPECIALTY. A specialty utilization review agent 2 3 shall conduct utilization review under the direction of a health care provider who is of the same specialty as the agent and who is 4 5 licensed or otherwise authorized to provide the specialty health care service in this [by a] state [licensing agency in the United 6 States]. 7

8 SECTION 6. Section 1305.351(d), Insurance Code, is amended 9 to read as follows:

10 (d) <u>A</u> [Notwithstanding Section 4201.152, a] utilization 11 review agent or an insurance carrier that uses doctors to perform 12 reviews of health care services provided under this chapter, 13 including utilization review, or peer reviews under Section 14 408.0231(g), Labor Code, may only use doctors licensed to practice 15 in this state.

16 SECTION 7. Section 408.023(h), Labor Code, is amended to 17 read as follows:

(h) <u>A</u> [Notwithstanding Section 4201.152, Insurance Code, a]
utilization review agent or an insurance carrier that uses doctors
to perform reviews of health care services provided under this
subtitle, including utilization review, may only use doctors
licensed to practice in this state.

SECTION 8. The change in law made by this Act applies only to utilization review that was requested on or after the effective date of this Act. Utilization review that was requested before the effective date of this Act is governed by the law as it existed immediately before the effective date of this Act, and that law is

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1 continued in effect for that purpose.

2 SECTION 9. This Act takes effect September 1, 2017.