

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION**

**May 25, 2017**

**TO:** Honorable Joe Straus, Speaker of the House, House of Representatives

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB3124** by Gooden (Relating to certain physician-specific comparison data compiled by a health benefit plan issuer, including the release of that data to physicians participating in certain physician-led organizations.), **As Passed 2nd House**

No significant fiscal implication to the State is anticipated from the provisions of the bill related to the requirements for health benefit plan issuers. The fiscal implications of the bill on the Texas Medical Board cannot be determined at this time due to the unavailability of the estimates on the number of complaints, actions, and administrative penalties that would be subject to physicians under the provisions of the bill.

The bill would amend the Insurance Code relating to certain physician-specific comparison data compiled by a health benefit plan issuer, including the release of that data to physicians participating in certain physician-led organizations. The bill would require a health benefit plan issuer to disclose certain cost comparison data to a physician upon request. Under the provisions of the bill, the physicians could dispute the cost comparison. The Commissioner of the Texas Department of Insurance would be required to adopt rules to implement the chapter. A health benefit plan issuer that violates the provisions of the bill would be subject to disciplinary actions and sanctions. Under the provisions of the bill, a violation of the subchapter by a physician would be subject to disciplinary action by the Texas Medical Board.

The bill would require the Department of State Health Services to conduct a study on the feasibility of creating a database accessible through the Texas Health Care Information Collection website.

The bill would amend various statutory provisions relating to health plan and health benefit plan coverage for abortions, including qualified health plans offered through a health benefit exchange. The bill would go into effect on September 1, 2017 and would apply to health insurance plans issued on or after January 1, 2018.

Based on information provided by the Texas Department of Insurance (TDI), Texas A&M University System Administration, The University of Texas System Administration, Employees Retirement System, Department of State Health Services and Teacher Retirement System it is assumed that any costs associated with the implementation of the bill would be absorbed within existing agency resources. Based on information provided by TDI, the bill could result in a slight increase of form filing revenues deposited to the General Revenue-Dedicated Texas Department of Insurance Fund 36 (GR-D Fund 36). Since GR-D Fund 36 is a self-leveling account, this analysis also assumes that any additional revenue resulting from the implementation of the bill would accumulate in account fund balances and that TDI would adjust the assessment of the

maintenance tax or other fees accordingly in the following years.

The Texas Medical Board anticipates an increase in complaints reported to the agency which would result in increased workload for the agency; however, the number of complaints and impact on workload cannot be estimated due to a lack of available data.

**Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 454 Department of Insurance, 503 Texas Medical Board, 710 Texas A&M University System Administrative and General Offices, 720 The University of Texas System Administration

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