86R9910 PMO-F

By:  Moody H.B. No. 1914

A BILL TO BE ENTITLED

AN ACT

relating to prompt payment of claims to certain physicians and health care providers.

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

SECTION 1.  Section 843.351, Insurance Code, is amended to read as follows:

Sec. 843.351.  SERVICES PROVIDED BY CERTAIN PHYSICIANS AND PROVIDERS. (a) The provisions of this subchapter relating to prompt payment by a health maintenance organization of a physician or provider, including Section 843.342, and to verification of health care services apply to a physician or provider who:

(1)  is not included in the health maintenance organization delivery network; and

(2)  provides to an enrollee:

(A)  care related to an emergency or its attendant episode of care as required by state or federal law; or

(B)  specialty or other health care services at the request of the health maintenance organization or a physician or provider who is included in the health maintenance organization delivery network because the services are not reasonably available within the network.

(b)  For purposes of calculating a penalty under Section 843.342 related to a claim by a physician or provider described by Subsection (a), the contracted rate for the health care service provided by the physician or provider is the usual and customary rate for the service in the geographic area in which the service is provided.

SECTION 2.  Section 1301.069, Insurance Code, is amended to read as follows:

Sec. 1301.069.  SERVICES PROVIDED BY CERTAIN PHYSICIANS AND HEALTH CARE PROVIDERS. (a) The provisions of this chapter relating to prompt payment by an insurer of a physician or health care provider, including Section 1301.137, and to verification of medical care or health care services apply to a physician or provider who:

(1)  is not a preferred provider included in the preferred provider network; and

(2)  provides to an insured:

(A)  care related to an emergency or its attendant episode of care as required by state or federal law; or

(B)  specialty or other medical care or health care services at the request of the insurer or a preferred provider because the services are not reasonably available from a preferred provider who is included in the preferred delivery network.

(b)  For purposes of calculating a penalty under Section 1301.137 related to a claim by a physician or health care provider described by Subsection (a) or Section 1301.0053, the contracted rate for the health care service provided by the physician or provider is the usual and customary rate for the service in the geographic area in which the service is provided.

SECTION 3.  Sections 843.351 and 1301.069, Insurance Code, as amended by this Act, apply only to a claim filed on or after the effective date of this Act.

SECTION 4.  This Act takes effect September 1, 2019.