

By: Zedler

H.B. No. 1273

A BILL TO BE ENTITLED

AN ACT

relating to denial of payment for preauthorized health care services.

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

SECTION 1. The heading to Chapter 1217, Insurance Code, is amended to read as follows:

CHAPTER 1217. [~~STANDARD REQUEST FORM FOR~~] PRIOR AUTHORIZATION OF HEALTH CARE SERVICES

SECTION 2. Chapter 1217, Insurance Code, is amended by adding Section 1217.008 to read as follows:

Sec. 1217.008. PROHIBITION OF DENIAL OF PAYMENT FOR PREAUTHORIZED HEALTH CARE SERVICES. If a health benefit plan issuer has given prior authorization for health care services to be performed by a physician or health care provider, the health benefit plan issuer may not deny or reduce payment to the physician or health care provider for those services based on medical necessity or appropriateness of care unless the physician or provider materially misrepresented the proposed health care services or substantially failed to perform the proposed health care services.

SECTION 3. This Act takes effect September 1, 2019.