

By: Sherman, Sr.

H.B. No. 3828

A BILL TO BE ENTITLED

AN ACT

relating to the disclosure of health benefit plan network status of certain physicians and health care practitioners.

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

SECTION 1. Section 843.348, Insurance Code, is amended by adding Subsection (e-1) to read as follows:

(e-1) If the health maintenance organization considers proposed medical care or health care services elective and requires preauthorization as a condition of payment under the health benefit plan, the health maintenance organization shall, at the time the health maintenance organization issues a determination preauthorizing the services, provide to the enrollee a statement of the network status of any facility-based physician or health care provider that the health maintenance organization reasonably expects will provide and bill for any of the authorized services.

SECTION 2. Section 1301.135, Insurance Code, is amended by adding Subsection (d-1) to read as follows:

(d-1) If an insurer considers proposed medical care or health care services elective and requires preauthorization as a condition of payment under the policy, the insurer shall, at the time the insurer issues a determination preauthorizing the services, provide to the insured a statement of the network status of any facility-based physician or health care provider that the insurer reasonably expects will provide and bill for any of the

1 authorized services.

2 SECTION 3. Chapter 159, Occupations Code, is amended by
3 adding Section 159.012 to read as follows:

4 Sec. 159.012. DISCLOSURE OF OTHER PHYSICIAN OR HEALTH CARE
5 PRACTITIONER. If, for a nonemergency service, a physician
6 schedules another physician or health care practitioner to
7 otherwise treat the patient or prospective patient, the physician
8 shall provide to the patient a written disclosure form prescribed
9 by the board that includes:

10 (1) a statement that the physician is scheduling
11 another physician or health care practitioner to provide services
12 and that the other physician or practitioner may not be in the
13 patient's provider network; and

14 (2) the other physician's or health care
15 practitioner's name, medical or health care practice name, practice
16 specialty, address, and telephone number.

17 SECTION 4. (a) Sections 843.348 and 1301.135, Insurance
18 Code, as amended by this Act, apply only to a health benefit plan
19 that is delivered, issued for delivery, or renewed on or after
20 January 1, 2020. A health benefit plan delivered, issued for
21 delivery, or renewed before January 1, 2020, is governed by the law
22 as it existed immediately before the effective date of this Act, and
23 that law is continued in effect for that purpose.

24 (b) Section 159.012, Occupations Code, as added by this Act,
25 applies only to a health care service scheduled on or after the
26 effective date of this Act.

27 SECTION 5. This Act takes effect September 1, 2019.