By: Schwertner

S.B. No. 1549

	A BILL TO BE ENTITLED									
1	AN ACT									
2	relating to the regulation of certain emergency care facilities.									
3	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:									
4	SECTION 1. Subchapter E, Chapter 17, Business & Commerce									
5	Code, is amended by adding Section 17.464 to read as follows:									
6	Sec. 17.464. UNCONSCIONABLE PRICE FOR CARE AT EMERGENCY									
7	CARE FACILITY. (a) In this section:									
8	(1) "Emergency care" means health care services									
9	provided in an emergency care facility to evaluate and stabilize									
10	medical conditions of a recent onset and severity, including severe									
11	pain, that would lead a prudent layperson possessing an average									
12	knowledge of medicine and health to believe that the individual's									
13	condition, sickness, or injury is of such severity that failure to									
14	get immediate medical care could:									
15	(A) place the individual's health in serious									
16	jeopardy;									
17	(B) result in serious impairment to bodily									
18	functions;									
19	(C) result in serious dysfunction of a bodily									
20	organ or part;									
21	(D) result in serious disfigurement; or									
22	(E) for a pregnant woman, result in serious									
23	jeopardy to the health of the fetus.									
24	(2) "Emergency care facility" means a hospital									

1	emergency room, freestanding emergency medical care facility, or
2	comparable facility providing emergency care.
3	(3) "Freestanding emergency medical care facility"
4	has the meaning assigned by Section 254.001, Health and Safety
5	<u>Code.</u>
6	(b) For purposes of Section 17.46(a), the term "false,
7	misleading, or deceptive acts or practices" includes an emergency
8	care facility taking advantage of an individual's medical condition
9	by:
10	(1) providing emergency care at an unconscionable
11	price; or
12	(2) demanding or charging an unconscionable price for
13	or in connection with emergency care or other care at the facility.
14	(c) The consumer protection division may not bring an action
15	under Section 17.47 for an act or practice described by Subsection
16	(b) if the price alleged to be unconscionable is less than 150
17	percent of the average charge for the same or substantially similar
18	care provided to other individuals by a hospital emergency room
19	according to data collected under Chapter 108, Health and Safety
20	Code, and made available to the division, except as provided by
21	Subsection (d).
22	(d) If the attorney general determines that the consumer
23	protection division is unable to obtain the charge data described
24	by Subsection (c), the attorney general may adopt rules designating
25	another source of hospital charge data for use by the division in
26	establishing the average charge for emergency or other care
27	provided by hospital emergency rooms for purposes of Subsection

1 (c). 2 (e) In an action brought under Section 17.47 to enforce this section, the consumer protection division may request, and the 3 trier of fact may award the recovery of: 4 5 (1) reasonable attorney's fees and court costs; and 6 (2) the reasonable expenses incurred by the division in obtaining any remedy available under Section 17.47, including 7 the cost of investigation, witness fees, and deposition expenses. 8 9 (f) This section does not create a private cause of action for a false, misleading, or deceptive act or practice described by 10 Subsection (b). 11 SECTION 2. Sections 241.252(b), (c), and (e), Health and 12 Safety Code, are amended to read as follows: 13 14 (b) A facility described by Section 241.251 shall post 15 notice that: (1)states: 16 17 (A) the facility is a freestanding emergency medical care facility; 18 (B) the facility charges rates comparable to a 19 hospital emergency room [and may charge a facility fee]; 20 21 (C) a facility or a physician providing medical facility may [not] be an out-of-network 2.2 care at the [<del>a</del> participating] provider for [in] the patient's health benefit plan 23 24 provider network; and 25 (D) a physician providing medical care at the 26 facility may bill separately from the facility for the medical care provided to a patient; and 27

(2) 1 either: lists the health benefit plans in which the 2 (A) 3 facility is a network [participating] provider in the health benefit plan's provider network; or 4 5 (B) states the facility is an out-of-network [not a participating] provider for [in] any health benefit plan provider 6 network. 7 8 (c) The notice required by this section must be posted prominently and conspicuously: 9 at the primary entrance to the facility; 10 (1)in each patient treatment room; 11 (2) at each location within the facility at which a 12 (3) person pays for health care services; and 13 14 (4) on the home page of the facility's Internet website 15 in a font that is larger than and contrasts with the font on the 16 remainder of the page. 17 (e) Notwithstanding Subsection (c), a facility that is a network [participating] provider in one or more health benefit plan 18 provider networks complies with Subsection (b)(2) if the facility: 19 (1) provides notice on the home page of the facility's 20 21 Internet website listing the health benefit plans in which the facility is a network [participating] provider in the health 22 23 benefit plan's provider network; and 24 (2) provides to a patient written confirmation of whether the facility is a network [participating] provider in the 25 patient's health benefit plan's provider network. 26 SECTION 3. Sections 254.155(a), (b), and (d), Health and 27

S.B. No. 1549 1 Safety Code, are amended to read as follows: (a) A facility shall post notice that: 2 3 (1)states: 4 (A) the facility is a freestanding emergency 5 medical care facility; 6 (B) the facility charges rates comparable to a 7 hospital emergency room [and may charge a facility fee]; 8 (C) a facility or a physician providing medical care at the facility may [not] be an out-of-network 9 [<del>a</del> participating] provider for [in] the patient's health benefit plan 10 provider network; and 11 a physician providing medical care at the 12 (D) facility may bill separately from the facility for the medical care 13 14 provided to a patient; and 15 (2) either: 16 (A) lists the health benefit plans in which the facility is a <u>network</u> [participating] provider in the health 17 benefit plan's provider network; or 18 states the facility is <u>an out-of-network</u> [not 19 (B) a participating] provider for [in] any health benefit plan provider 20 21 network. The notice required by this section must be posted 22 (b) prominently and conspicuously: 23 24 (1)at the primary entrance to the facility; 25 (2) in each patient treatment room; at each location within the facility at which a 26 (3) person pays for health care services; and 27

(4) on the <u>home page of the</u> facility's Internet website
 <u>in a font that is larger than and contrasts with the font on the</u>
 <u>remainder of the page</u>.

4 (d) Notwithstanding Subsection (b), a facility that is a
5 <u>network</u> [participating] provider in one or more health benefit plan
6 provider networks complies with Subsection (a)(2) if the facility:

7 (1) provides notice on the <u>home page of the</u> facility's 8 Internet website listing the health benefit plans in which the 9 facility is a <u>network</u> [<del>participating</del>] provider in the health 10 benefit plan's provider network; and

(2) provides to a patient written confirmation of whether the facility is a <u>network</u> [participating] provider in the patient's health benefit plan's provider network.

SECTION 4. Subchapter D, Chapter 254, Health and Safety Code, is amended by adding Section 254.156 to read as follows:

16 <u>Sec. 254.156. REQUIREMENTS AND RESTRICTIONS ON</u> 17 <u>OUT-OF-NETWORK FACILITIES. (a) A facility may not post the name or</u> 18 <u>logo of a health benefit plan issuer on the facility's Internet</u> 19 <u>website if the facility is an out-of-network provider for any of the</u> 20 <u>issuer's health benefit plans.</u>

21 (b) If a facility is an out-of-network provider for a 22 patient's health benefit plan provider network, the facility on the 23 patient's arrival at the facility shall:

24 (1) provide to the patient or the patient's legally 25 <u>authorized representative a written disclosure statement that</u> 26 <u>outlines the range of fees, including facility and observation</u> 27 fees, that may result from the patient's visit; and

S.B. No. 1549 (2) obtain the signature of the patient or the 1 patient's legally authorized representative on the disclosure 2 statement described by Subdivision (1) before providing health care 3 services to the patient unless the patient's medical condition 4 5 requires immediate medical intervention. 6 SECTION 5. Section 254.205(c), Health and Safety Code, is 7 amended to read as follows: 8 (c) Each [The amount of the penalty may not exceed \$1,000 9 for each violation, and each] day a violation continues or occurs is 10 a separate violation for purposes of imposing a penalty. The total amount of the penalty assessed for a violation continuing or 11 12 occurring on separate days under this subsection may not exceed \$25,000 [<del>\$5,000</del>]. 13 SECTION 6. Subtitle B, Title 4, Health and Safety Code, is 14 15 amended by adding Chapter 260B to read as follows: 16 CHAPTER 260B. EMERGENCY CARE FACILITIES 17 Sec. 260B.0001. DEFINITIONS. In this chapter: (1) "Emergency care" has the meaning assigned by 18 Section 17.464, Business & Commerce Code. 19 (2) "Emergency care facility" means a hospital 20 21 emergency room, freestanding emergency medical care facility, or comparable facility providing emergency care. 22 (3) "Freestanding emergency medical care facility" 23 24 has the meaning assigned by Section 254.001. Sec. 260B.0002. FACILITY FEE PROHIBITED. An emergency care 25 26 facility may not charge a patient who receives nonemergency health care services a facility fee. 27

1	Sec.	260B	.0003.	DIS	SEMINATIC	N	OF	CEI	RTAIN	FALS	E	OR
2	MISLEADING	INFO	RMATION	PROI	HIBITED.	An	emero	gency	care	facili	ty	may
3	not post or	n the	facili	ty's	Internet	we	bsite	or	dissem	ninate	by	any

4 method false or misleading information on whether the facility is a

5 <u>network provider in a health benefit plan provider network.</u>

6 SECTION 7. This Act takes effect September 1, 2019.