

By: Gates

H.B. No. 571

A BILL TO BE ENTITLED

1 AN ACT

2 relating to the establishment of a bundled-pricing program to
3 reduce certain health care costs in the state employees group
4 benefits program.

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

6 SECTION 1. Chapter 1551, Insurance Code, is amended by
7 adding Subchapter K to read as follows:

8 SUBCHAPTER K. BUNDLED-PRICING PROGRAM

9 Sec. 1551.501. BUNDLED-PRICING PROGRAM. (a) The board of
10 trustees shall develop a cost-positive bundled-pricing program for
11 health benefit plans provided under the group benefits program.

12 (b) The bundled-pricing program must be designed to reduce
13 health care costs in the group benefits program by contracting with
14 a health care facility, physician, or health care provider at a
15 consolidated rate for an inpatient or outpatient surgery procedure
16 that is a covered health care or medical service under a health
17 benefit plan provided under the group benefits program.

18 (c) A consolidated rate described by Subsection (b) must
19 include all fees related to the covered surgery procedure,
20 including fees for a facility, physician, health care provider,
21 laboratory, prescription drug, or pharmacy service.

22 Sec. 1551.502. PARTICIPATION; COST-SHARING OBLIGATION.

23 (a) A participant may have an inpatient or outpatient surgery
24 procedure under the bundled-pricing program.

1 (b) Except as provided by Subsection (c), the board of
2 trustees or a health care facility, physician, or health care
3 provider may not require a participant to pay a deductible,
4 copayment, coinsurance, or other cost-sharing obligation for a
5 covered surgery procedure provided under the bundled-pricing
6 program.

7 (c) The board of trustees may require a participant in the
8 state consumer-directed health plan established under Section
9 1551.452 to meet the participant's deductible before the plan pays
10 for a covered surgery procedure provided under the bundled-pricing
11 program.

12 Sec. 1551.503. PROVIDER PARTICIPATION. (a) A health care
13 facility, physician, or health care provider is not required to
14 participate in the bundled-pricing program.

15 (b) A health care facility may not coerce a facility-based
16 provider, as defined by Section 1551.229, to participate in the
17 bundled-pricing program or accept a lower rate for an inpatient or
18 outpatient surgery procedure.

19 Sec. 1551.504. PROMPT PAYMENT. The board of trustees shall
20 ensure that a health care facility, physician, or health care
21 provider that participates in the bundled-pricing program receives
22 payment for a covered surgery procedure not later than the 30th day
23 after the date the administrator receives a claim for the procedure
24 that includes all information necessary for the administrator to
25 pay the claim.

26 Sec. 1551.505. BUNDLED-PRICING DISCLOSURE. A health care
27 facility, physician, or health care provider that participates in

1 the bundled-pricing program may disclose a consolidated rate for an
2 inpatient or outpatient surgery procedure on the facility's,
3 physician's, or provider's Internet website and marketing
4 materials.

5 Sec. 1551.506. PUBLICATION OF INFORMATION. The board of
6 trustees shall publish information on the bundled-pricing program,
7 including a list of participating health care facilities,
8 physicians, and health care providers, on the Employees Retirement
9 System of Texas website.

10 Sec. 1551.507. RULEMAKING. The board of trustees may adopt
11 rules as necessary to implement this subchapter.

12 SECTION 2. This Act takes effect September 1, 2021.