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H.B. No. 2926

A BILL TO BE ENTITLED

1 AN ACT

2 relating to certain claims for benefits or compensation by certain
3 public safety employees and survivors of certain public safety
4 employees.

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

6 SECTION 1. Section 607.0545(e), Government Code, is amended
7 to read as follows:

8 (e) This section expires September 1, 2025 [~~2023~~].

9 SECTION 2. Subchapter B, Chapter 607, Government Code, is
10 amended by adding Section 607.05451 to read as follows:

11 Sec. 607.05451. REPROCESSING DENIED CLAIMS REQUIRED. (a)
12 In this section, "insurance carrier" has the meaning assigned by
13 Section 401.011, Labor Code.

14 (b) Notwithstanding any other law, an insurance carrier
15 who, before June 14, 2021, denied a claim for benefits related to
16 severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) or
17 coronavirus disease 2019 (COVID-19) for a person subject to Section
18 607.0545 or the person's beneficiary shall reprocess the denied
19 claim without a written request and apply the provisions of Section
20 607.0545 when reprocessing the claim.

21 (c) Notwithstanding Subsection (b), an insurance carrier is
22 not required to reprocess a claim the insurance carrier has
23 previously reprocessed in accordance with Chapter 505 (S.B. 22),
24 Acts of the 87th Legislature, Regular Session, 2021.

1 (d) Not later than October 31, 2023, an insurance carrier
2 shall:

3 (1) reprocess each denied claim as required by
4 Subsection (b); and

5 (2) notify the person in writing whether the insurance
6 carrier accepted or denied the claim.

7 (e) If the insurance carrier denies a reprocessed claim, the
8 denial notice must include information on the process for disputing
9 the denial. The insurance carrier shall use the notice prescribed
10 by the division of workers' compensation of the Texas Department of
11 Insurance.

12 (f) The commissioner of workers' compensation shall adopt
13 any rules necessary to implement this section.

14 (g) This section expires December 31, 2023.

15 SECTION 3. Sections 409.0092(a) and (d), Labor Code, are
16 amended to read as follows:

17 (a) An injured employee who is subject to Subchapter B,
18 Chapter 607 [~~Section 607.0545~~], Government Code, and whose claim
19 for benefits is determined to be compensable by an insurance
20 carrier or the division, may request reimbursement for health care
21 paid by the employee, including copayments and partial payments, by
22 submitting to the carrier a legible written request and
23 documentation showing the amounts paid to the health care provider.

24 (d) A person who has legal authority to act on behalf of an
25 injured employee or that employee's estate may submit a request for
26 reimbursement for health care in accordance with Subsection (a) or
27 a request for medical dispute resolution in accordance with

1 Subsection (c) [~~This section expires September 1, 2023~~].

2 SECTION 4. Section 415.002, Labor Code, is amended by
3 amending Subsection (a) and adding Subsection (c) to read as
4 follows:

5 (a) An insurance carrier or its representative commits an
6 administrative violation if that person:

7 (1) misrepresents a provision of this subtitle or
8 Subchapter B, Chapter 607, Government Code, to an employee, an
9 employer, a health care provider, or a legal beneficiary;

10 (2) terminates or reduces benefits without
11 substantiating evidence that the action is reasonable and
12 authorized by law;

13 (3) instructs an employer not to file a document
14 required to be filed with the division;

15 (4) instructs or encourages an employer to violate a
16 claimant's right to medical benefits under this subtitle;

17 (5) fails to tender promptly full death benefits if a
18 legitimate dispute does not exist as to the liability of the
19 insurance carrier;

20 (6) allows an employer, other than a self-insured
21 employer, to dictate the methods by which and the terms on which a
22 claim is handled and settled;

23 (7) fails to confirm medical benefits coverage to a
24 person or facility providing medical treatment to a claimant if a
25 legitimate dispute does not exist as to the liability of the
26 insurance carrier;

27 (8) fails, without good cause, to attend a dispute

1 resolution proceeding within the division;

2 (9) attends a dispute resolution proceeding within the
3 division without complete authority or fails to exercise authority
4 to effectuate agreement or settlement;

5 (10) adjusts a workers' compensation claim in a manner
6 contrary to license requirements for an insurance adjuster,
7 including the requirements of Chapter 4101, Insurance Code, or the
8 rules of the commissioner of insurance;

9 (11) fails to process claims promptly in a reasonable
10 and prudent manner;

11 (12) fails to initiate or reinstate benefits when due
12 if a legitimate dispute does not exist as to the liability of the
13 insurance carrier;

14 (13) misrepresents the reason for not paying benefits
15 or terminating or reducing the payment of benefits;

16 (14) dates documents to misrepresent the actual date
17 of the initiation of benefits;

18 (15) makes a notation on a draft or other instrument
19 indicating that the draft or instrument represents a final
20 settlement of a claim if the claim is still open and pending before
21 the division;

22 (16) fails or refuses to pay benefits from week to week
23 as and when due directly to the person entitled to the benefits;

24 (17) fails to pay an order awarding benefits;

25 (18) controverts a claim if the evidence clearly
26 indicates liability;

27 (19) unreasonably disputes the reasonableness and

1 necessity of health care;

2 (20) violates a commissioner rule;

3 (21) makes a statement denying all future medical care
4 for a compensable injury; [~~or~~]

5 (22) fails to apply a statutory presumption to a claim
6 that qualifies for a presumption under Subchapter B, Chapter 607,
7 Government Code, without conducting a reasonable investigation of
8 the facts relevant to the applicability of the presumption to the
9 claim;

10 (23) denies a claim that is subject to a statutory
11 presumption under Subchapter B, Chapter 607, Government Code,
12 without conducting a reasonable investigation of facts relevant to
13 determining the validity of the claim; or

14 (24) fails to comply with a provision of this
15 subtitle.

16 (c) With respect to any medical facts on which the insurance
17 carrier or its representative relied in determining a presumption
18 under Subchapter B, Chapter 607, Government Code, is not applicable
19 or in denying a claim that is subject to a statutory presumption
20 under that subchapter, the reasonable investigation required by
21 Subsection (a)(22) or (23) must include an opinion from a qualified
22 medical expert using evidence-based medicine that supports the
23 decision of the insurance carrier or its representative.

24 SECTION 5. As soon as practicable after the effective date
25 of this Act, the division of workers' compensation of the Texas
26 Department of Insurance shall prescribe in English and Spanish the
27 notices to be used by an insurance carrier under Section 607.05451,

1 Government Code, as added by this Act, when:

2 (1) notifying the injured employee or the employee's
3 beneficiary that the insurance carrier will be reprocessing the
4 previously denied claim; and

5 (2) notifying the injured employee or the employee's
6 beneficiary of the insurance carrier's acceptance or denial of a
7 previously denied claim.

8 SECTION 6. Section [415.002](#), Labor Code, as amended by this
9 Act, applies only to an administrative violation committed on or
10 after the effective date of this Act. An administrative violation
11 committed before the effective date of this Act is governed by the
12 law in effect on the date the administrative violation was
13 committed, and the former law is continued in effect for that
14 purpose.

15 SECTION 7. This Act takes effect immediately if it receives
16 a vote of two-thirds of all the members elected to each house, as
17 provided by Section [39](#), Article III, Texas Constitution. If this
18 Act does not receive the vote necessary for immediate effect, this
19 Act takes effect September 1, 2023.