

By: Turner

H.B. No. 2926

Substitute the following for H.B. No. 2926:

By: Hinojosa

C.S.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. Section 409.0092, Labor Code, is amended to read  
16 as follows:

17        Sec. 409.0092. HEALTH CARE REIMBURSEMENT PROCEDURES FOR  
18 CERTAIN INJURED EMPLOYEES AND BENEFICIARIES. (a) An injured  
19 employee, or the employee's beneficiary, who is subject to  
20 Subchapter B, Chapter 607 [~~Section 607.0545~~], Government Code, and  
21 whose claim for benefits is determined to be compensable by an  
22 insurance carrier or the division, may request reimbursement for  
23 health care paid by the employee or the employee's beneficiary,  
24 including copayments and partial payments, by submitting to the  
25 carrier a legible written request and documentation showing the  
26 amounts paid to the health care provider.

27        (b) Not later than the 45th day after the date an injured

1 employee or the employee's beneficiary submits a request for  
2 reimbursement for health care to an insurance carrier under  
3 Subsection (a), the carrier shall provide reimbursement or deny the  
4 request.

5 (c) If an insurance carrier denies a [an injured employee's]  
6 request for reimbursement for health care, the employee or the  
7 employee's beneficiary may seek medical dispute resolution as  
8 provided by Chapter 413 and division rules. Notwithstanding any  
9 other law, a [an employee's] request for medical dispute resolution  
10 is considered timely if the employee or the employee's beneficiary  
11 submits the request not later than the 120th day after the date the  
12 carrier denies the [employee's] request for reimbursement.

13 [~~(d) This section expires September 1, 2023.~~]

14 SECTION 4. Section 415.002(a), Labor Code, is amended to  
15 read as follows:

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

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

21 (2) terminates or reduces benefits without  
22 substantiating evidence that the action is reasonable and  
23 authorized by law;

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

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

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

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

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

11           (8) fails, without good cause, to attend a dispute  
12 resolution proceeding within the division;

13           (9) attends a dispute resolution proceeding within the  
14 division without complete authority or fails to exercise authority  
15 to effectuate agreement or settlement;

16           (10) adjusts a workers' compensation claim in a manner  
17 contrary to license requirements for an insurance adjuster,  
18 including the requirements of Chapter 4101, Insurance Code, or the  
19 rules of the commissioner of insurance;

20           (11) fails to process claims promptly in a reasonable  
21 and prudent manner;

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

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

27           (14) dates documents to misrepresent the actual date

1 of the initiation of benefits;

2 (15) makes a notation on a draft or other instrument  
3 indicating that the draft or instrument represents a final  
4 settlement of a claim if the claim is still open and pending before  
5 the division;

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

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

9 (18) controverts a claim if the evidence clearly  
10 indicates liability;

11 (19) unreasonably disputes the reasonableness and  
12 necessity of health care;

13 (20) violates a commissioner rule;

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

16 (22) fails to apply a statutory presumption to a claim  
17 that qualifies for a presumption under Subchapter B, Chapter 607,  
18 Government Code;

19 (23) denies a claim subject to a statutory presumption  
20 under Subchapter B, Chapter 607, Government Code, without obtaining  
21 an opinion from a medical expert; or

22 (24) fails to comply with a provision of this  
23 subtitle.

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.