

BILL ANALYSIS

Senate Research Center
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H.B. 1314
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Health & Human Services
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

H.B. 1314 addresses a critical barrier to healthcare access: the lack of transparency in medical pricing. Despite efforts by commercial insurers to offer price estimation tools, many Texans still face uncertainty regarding the actual costs of medical procedures. This bill seeks to improve clarity for consumers by amending Sections 324.001 and 324.101 of the Health and Safety Code to define "estimate" and establish clear requirements for communicating healthcare charges. Specifically, it requires healthcare facilities to provide patients with a written estimate of billed charges for elective procedures within five business days of a request. The estimate must be sent via email and include instructions for disputing final charges that exceed the estimate by \$400 or more, in accordance with the No Surprises Act (45 C.F.R. § 149.620). Facilities that fail to comply may not pursue debt collection or report the consumer to credit agencies and are subject to enforcement by the relevant licensing authority. This bill builds on previous efforts, including H.B. 3218 (88R), which aimed to address similar concerns but stalled in committee. By promoting accountability and transparency, H.B. 1314 empowers patients to make more informed healthcare decisions.

H.B. 1314 amends current law relating to price estimates and billing requirements for certain health care facilities.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 324.001, Health and Safety Code, by adding Subdivision (5-a) to define "estimate."

SECTION 2. Amends Section 324.101, Health and Safety Code, by amending Subsections (d) and (g) and adding Subsection (d-1), as follows:

(d) Provides that a consumer is entitled to receive and a facility is required to provide to a consumer an estimate of the facility's billed charges for any elective inpatient admission or nonemergency outpatient surgical procedure or other service on the consumer's request and before the scheduling of the admission, procedure, or service. Requires the facility, not later than five business days after receiving a request for an estimate under this section, to provide the estimate to the requesting consumer by e-mail, rather than requiring the estimate to be provided not later than the 10th business day after the date on which the estimate is requested. Requires that the facility advise the consumer about certain information, including that the request for an estimate of billed charges may result in a delay in the scheduling and provision of the inpatient admission, outpatient surgical procedure, or other service. Makes nonsubstantive changes

(d-1) Provides that a facility is required to include in the estimate provided under Subsection (a) (relating to requiring each facility to develop, implement, and enforce written policies for the billing of facility health care services and supplies) information regarding the manner in which an eligible consumer is authorized to dispute final billed

charges that exceed the amount specified in the estimate by \$400 or more, as provided by 45 C.F.R. Section 149.620.

(g) Provides that a facility that violates, rather than a facility in violation of, Section 324.101 (Facility Policies) is prohibited from taking or facilitating the taking of any third-party collection action against a consumer, reporting the consumer to a credit bureau, or pursuing an action against the consumer, and is subject to an enforcement action by the appropriate licensing agency. Makes nonsubstantive changes.

SECTION 3. Repealer: Subchapter B (Consumer Guide to Health Care), Chapter 324 (Consumer Access to Health Care Information), Health and Safety Code.

SECTION 4. Makes application of this Act prospective.

SECTION 5. Effective date: September 1, 2025.