

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 1742
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Business & Commerce
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Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Physicians often have to refer patients to a facility setting to seek further care of health conditions that need surgical care or laboratory analysis. In an effort to stay in-network and prevent the occurrence of a surprise bill, patients and referring physicians often review plan directories that show the network status of facility-based physicians at in-network facilities. Unfortunately, current health plan provider directories do not typically display this information in a uniform or user-friendly manner.

This legislation would require a health plan's network directory to clearly identify which radiologists, anesthesiologists, pathologists, emergency physicians, neonatologists, and assistant surgeons are in-network at network facilities. "Facility" includes: ambulatory surgery center, birthing center, hospital, and freestanding emergency center. (Original Author's/Sponsor's Statement of Intent)

C.S.S.B. 1742 amends current law relating to physician and health care provider directories for certain health benefit plans.

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 1451.501, Insurance Code, by amending Subdivision (1) and adding Subdivisions (1-a) and (1-b), as follows:

(1) Defines "facility."

(1-a) Defines "facility-based physician."

(1-b) Redesignates existing Subdivision (1), defining, "health care provider," as Subdivision (1-b).

SECTION 2. Amends Section 1451.504, Insurance Code, by amending Subsection (b) and adding Subsection (c), as follows:

(b) Requires the physician and health care provider directory to include the name, street address, specialty, if any, and telephone number of each physician and health care provider described by Subsection (a) (relating to requiring health benefit plan issuers to develop and maintain a physician and health care provider directory) and indicate whether the physician or provider is accepting new patients.

(c) Requires the directory, for each health care provider that is a facility included in the directory under this section (Physician and Health Care Provider Directories), to include certain information in a certain format.

(d) Requires the directory to list a facility-based physician individually and, if the physician belongs to a physician group, as part of the physician group.

SECTION 3. Amends Section 1451.505(c), Insurance Code, as follows:

(c) Requires the directory to be:

(1) electronically searchable by physician or health care provider name, specialty, if any, and location, rather than electronically searchable by physician or health care provider name and location; and

(2) makes no changes to this subdivision.

SECTION 4. Requires a health benefit plan issuer to update the issuer's website to conform with Subchapter K (Physician and Health Care Provider Directories), Chapter 1451, Insurance Code, as amended by this Act, not later than January 1, 2020.

SECTION 5. Effective date: September 1, 2019.