

BILL ANALYSIS

C.S.H.B. 3276
By: Oliverson
Insurance
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties note that the current requirements for certain freestanding emergency medical care facilities to post notice of certain information regarding the facilities do not require a facility to give notice of the health benefit plans in which the facility is a participating provider. C.S.H.B. 3276 seeks to reduce confusion and help patients avoid unexpected balance bills by requiring such a facility's posted notice to list that health benefit plan information or state that the facility is not a participating provider for any health benefit plan provider network.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 3276 amends the Health and Safety Code to require the notice of facility fees posted by certain freestanding emergency medical care facilities to either list the health benefit plans in which the facility is a participating provider in the plan's provider network or state the facility is not a participating provider in any health benefit plan provider network. The bill establishes that a facility that is a participating provider in one or more health benefit plan provider networks complies with that requirement if the facility provides notice on the facility's website listing the health benefit plans in which the facility is a participating provider in the plan's provider network and provides to a patient written confirmation of whether the facility is a participating provider in the patient's health benefit plan's provider network.

EFFECTIVE DATE

September 1, 2017.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 3276 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

SECTION 1. Section 241.252(b), Health and Safety Code, is amended to read as follows:

(b) A facility described by Section 241.251 shall post notice that:

(1) states:

(A) ~~[(1)—that]~~ the facility is a freestanding emergency medical care facility;

(B) ~~[(2)—that]~~ the facility charges rates comparable to a hospital emergency room and may charge a facility fee;

(C) ~~[(3)—that]~~ a facility or a physician providing medical care at the facility may not be a participating provider in the patient's health benefit plan provider network; and

(D) ~~[(4)—that]~~ a physician providing medical care at the facility may bill separately from the facility for the medical care provided to a patient; and

(2) either:

(A) lists the health benefit plans in which the facility is a participating provider in the health benefit plan's provider network; or

(B) states the facility is not a participating provider in any health benefit plan provider network.

No equivalent provision.

SECTION 2. Section 254.155(a), Health and Safety Code, is amended to read as follows:

(a) A facility shall post notice that:

(1) states:

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Section 241.252, Health and Safety Code, is amended by amending Subsection (b) and adding Subsection (e) to read as follows:

(b) Same as introduced version.

(e) Notwithstanding Subsection (c), a facility that is a participating provider in one or more health benefit plan provider networks complies with Subsection (b)(2) if the facility:

(1) provides notice on the facility's Internet website listing the health benefit plans in which the facility is a participating provider in the health benefit plan's provider network; and

(2) provides to a patient written confirmation of whether the facility is a participating provider in the patient's health benefit plan's provider network.

SECTION 2. Section 254.155, Health and Safety Code, is amended by amending Subsection (a) and adding Subsection (d) to read as follows:

(a) Same as introduced version.

(A) [(1)—that] the facility is a freestanding emergency medical care facility;

(B) [(2)—that] the facility charges rates comparable to a hospital emergency room and may charge a facility fee;

(C) [(3)—that] a facility or a physician providing medical care at the facility may not be a participating provider in the patient's health benefit plan provider network; and

(D) [(4)—that] a physician providing medical care at the facility may bill separately from the facility for the medical care provided to a patient; and

(2) either:

(A) lists the health benefit plans in which the facility is a participating provider in the health benefit plan's provider network; or

(B) states the facility is not a participating provider in any health benefit plan provider network.

No equivalent provision.

(d) Notwithstanding Subsection (b), a facility that is a participating provider in one or more health benefit plan provider networks complies with Subsection (a)(2) if the facility:

(1) provides notice on the facility's Internet website listing the health benefit plans in which the facility is a participating provider in the health benefit plan's provider network; and

(2) provides to a patient written confirmation of whether the facility is a participating provider in the patient's health benefit plan's provider network.

SECTION 3. This Act takes effect September 1, 2017.

SECTION 3. Same as introduced version.