BILL ANALYSIS

Senate Research Center 81R14040 PB-D H.B. 3625 By: Elkins (Van de Putte) State Affairs 5/19/2009 Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Both medical providers and utilization review agents may address treatment associated with an injured worker whose injuries are handled inside a worker's compensation healthcare network (in-network) and whose injuries are handled outside a workers' compensation healthcare network (non-network). Currently, in-network responsiveness is measured in calendar days rather than working days, so there are different regulatory response times for utilization review agents and medical providers. This inconsistency is a source of confusion and conflict. In addition, the use of calendar days can create difficulty in obtaining additional information or facilitating peer-to-peer discussions when a request is received at the end of a business week.

H.B. 3625 conforms in-network language to non-network language by requiring a utilization review agent to issue and transmit a determination regarding the preauthorization of proposed health care services under a workers' compensation claim by not later than the third working day, rather than calendar day, after the date a preauthorization request is received from a provider.

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 1305.353(d), Insurance Code, to require that the determination under Subsection (c) (relating to requiring the utilization review agent to take certain actions on receipt of a preauthorization request from a provider), for services not described under Subsection (e) (relating to requiring the utilization review agent to transmit a determination within 24 hours of receipt if the proposed services are for concurrent hospitalization care) or (f) (relating to requiring the utilization review agent to transmit a determination care) or (f) (relating to requiring the utilization review agent to transmit a determination to the provider if the proposed health care services involve poststablization treatment or a life-threatening condition), be issued and transmitted not later than the third working, rather than calendar, day after the date the request is received. Defines "working day."

SECTION 2. Makes application of this Act prospective.

SECTION 3. Effective date: September 1, 2009.