BILL ANALYSIS

Senate Research Center

S.B. 147 By: Shapiro Economic Development 3-3-97 As Filed

DIGEST

Currently, "emergency care" is defined as bona fide emergency services provided after the sudden onset of a severe medical condition such that the absence of medical attention could reasonably be expected to result in placing the patient's health in serious jeopardy, or serious impairment to bodily functions or organs. Problems have arisen because health maintenance organizations (HMOs) are able to retrospectively deny coverage for services rendered in an emergency department based on the final diagnosis, rather than the initial symptoms. In addition, the current definition makes no specific mention of medical conditions which place the health of pregnant women and their unborn children in jeopardy. This legislation broadens the meaning of "emergency care" to establish a more definable reasonable layperson standard, to include emergency care provided to a pregnant woman in labor or her unborn child, and to further clarify which medical conditions demand emergency attention, in order to reduce patients' fear that a legitimate visit to the emergency department will not be covered.

PURPOSE

As proposed, S.B. 147 redefines emergency care for health insurance policies and health benefit plans provided by health maintenance organizations.

RULEMAKING AUTHORITY

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

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 2(I), Article 3.70-2, Insurance Code, to redefine "emergency care" as health care services, rather than bona fide emergency services, provided after the recent, rather than sudden, onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, that would lead a prudent layperson to reasonably expect that the absence of immediate medical attention could place the patient's health, or if the patient is a pregnant woman, the unborn child's health, in serious jeopardy. Provides that "emergency care" includes emergency services provided under Chapter 311, Health and Safety Code, including services that must be provided immediately to sustain a person's life, prevent serious permanent injury to a body part or organ, or provide for the care of a woman in active labor; emergency medical services and care provided under Chapter 773, Health and Safety Code, meaning services provided in response to an individual's perceived need for immediate medical care and to prevent death or aggravation of physiological or psychological illness or injury; and health care services provided to a pregnant woman who is having contractions if there is inadequate time to transfer the woman to another medical facility safely before the delivery or if transfer to another medical facility could pose a threat to the health or safety of the patient or the unborn child. Makes conforming changes.

- SECTION 2. Amends Section 2(t), Article 20A.02, Insurance Code, to make conforming changes.
- SECTION 3. Amends Section 2(7), Article 21.58A, Insurance Code, to make conforming changes.
- SECTION 4. Effective date: September 1, 1997.

 Makes application of this Act prospective to January 1, 1998.

SECTION 5. Emergency clause.

SRC-CDH S.B. 147 75(R)