

BILL ANALYSIS

Senate Research Center
78R9527 PB-F

H.B. 3022
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State Affairs
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Engrossed

DIGEST AND PURPOSE

Under current state law, insurers offering preferred provider benefit plans must ensure that both preferred provider benefits and basic level benefits are reasonably available to all insureds within a designated service area. H.B. 3022 specifies that the requirements for those insurers to make those plans available cannot be construed to limit the level of reimbursement or level of coverage. It also deletes the requirement that the commissioner of insurance adopt rules to ensure reasonable access to basic-level benefits.

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 8(a), Article 3.70-3C, Insurance Code, as added by Chapter 1024, Acts of the 75th Legislature, Regular Session, 1997, to provide that this subsection may not be construed to limit the level of reimbursement or the level of coverage, including deductibles, copayments, coinsurance, or other cost-sharing provisions, that are applicable to preferred providers or nonpreferred providers.

SECTION 2. Amends Section 9, Article 3.70-3C, Insurance Code, as added by Chapter 1024, Acts of the 75th Legislature, Regular Session, 1997, to require the commissioner of insurance to adopt rules as necessary to implement the provisions of this article and to ensure reasonable accessibility and availability of preferred provider services, rather than preferred provider and basic level benefits, to Texas citizens.

SECTION 3. Makes application of this Act prospective to January 1, 2004.

SECTION 4. Effective date: September 1, 2003.