

TAHP Opposes SB 1666 Erodes the Texas Patient Protection Act



SB 1666 does not have an impact on the state's Medicaid program.

Instead it creates a new mandate in private health insurance.

- Creates a new mandate in the private health insurance market that erodes a long-standing decades-old statute in the private health Insurance Code known as the Texas Patient Protection Act.
- SB 1666 would effectively lock private insurers into contracts with no ability to terminate or modify terms and instead creates an incentive for the provider to simply never contract with Medicaid.
- New mandate also attempts to make durable medical equipment (DME) companies a specialty provider in private health insurance. However, DME suppliers are not specialty providers, like cardiologists or OB/GYNs, and should not be considered as such.
- This bill is a misplaced attempt to the change longstanding meaning of "specialty providers" in private health insurance, as a way to create a legal precedent to change it in the Medicaid program.
- Private health insurance laws should not be used as a means to settle Medicaid debates or arguments.
- All Texas private health insurers are already required to provide continuity of care for patients.
- **While this bill doesn't apply to Medicaid**, the last two sessions, the Texas Legislature has already strengthened continuity of care in Medicaid managed care to ensure families can access the care their children need.

SB 1666 is a new health insurance mandate that disrupts the current continuity of care protections in private health insurance, potentially harming patients and increasing health care costs, while simultaneously creating legal confusion in Medicaid.