

**[Tex. Ins. Code § 1271.008.]**

§ 1271.008. Balance Billing Prohibition Notice: Benefits Provided by Health Maintenance Organizations, Evidence of Coverage, Charges

(a) A health maintenance organization shall provide written notice in accordance with this section in an explanation of benefits provided to the enrollee and the physician or provider in connection with a health care service or supply provided by a non-network physician or provider. The notice must include:

- (1) a statement of the billing prohibition under Section 1271.155, 1271.157, or 1271.158, as applicable;
- (2) the total amount the physician or provider may bill the enrollee under the enrollee's health benefit plan and an itemization of copayments, coinsurance, deductibles, and other amounts included in that total; and
- (3) for an explanation of benefits provided to the physician or provider, information required by commissioner rule advising the physician or provider of the availability of mediation or arbitration, as applicable, under Chapter 1467.

(b) A health maintenance organization shall provide the explanation of benefits with the notice required by this section to a physician or health care provider not later than the date the health maintenance organization makes a payment under Section 1271.155, 1271.157, or 1271.158, as applicable.