

HHSC Uniform Managed Care Manual

CHAPTER **8.2**

PAGE

1 OF 2

EFFECTIVE DATE

November 15, 2015

Version 2.1

Rules

DOCUMENT HISTORY LOG

Medicaid and CHIP Out-Of-Network

STATUS ¹	DOCUMENT REVISION ²	EFFECTIVE DATE	DESCRIPTION ³
Baseline	1.0	November 15, 2005	Initial version Uniform Managed Care Manual Chapter 8.2, Out-of-Network Rules.
Revision	1.1	September 1, 2006	Chapter 8.2 is updated to add the URLs for Medicaid and CHIP Out-of-Network Rules.
Revision	2.0	May 1, 2012	Chapter 8.2 is modified to update the references to HHSC's administrative rules and the URLs.
Revision	2.1	November 15, 2015	Revision 2.1 applies to contracts issued as a result of HHSC RFP numbers 529-08-0001, 529-10-0020, 529-12-0002, 529-12-0003, 529-13-0042, 529-13-0071, and 529-15-0001.

Status should be represented as "Baseline" for initial issuances, "Revision" for changes to the Baseline version, and "Cancellation" for withdrawn versions

² Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., "1.2" refers to the first version of the document and the second revision.

³ Brief description of the changes to the document made in the revision.



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PAGE

2 OF 2

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Medicaid and CHIP Out-Of-Network Rules

Medicaid Out-of-Network Rules

The rules on Medicaid out-of-network providers are published in the Texas Administrative Code, Title 1, Part 15, Chapter 353, Subchapter A, Rules 353.4, "Managed Care Organization Requirements Concerning Out-of-Network Providers" and 353.913, "Managed Care Organization Requirements Concerning Out-of-network Outpatient Pharmacy Services."

http://info.sos.state.tx.us/pls/pub/readtac\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=1&pt=15&ch=353&rl=4

http://info.sos.state.tx.us/pls/pub/readtac\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&p_tac=&ti=1&pt=15&ch=353&rl=913

CHIP Out-of-Network Rules

The CHIP out-of-network requirements are contained in the state insurance statutes and rules. The statutes include:

- Insurance Code, Subtitle C. Managed Care, Chapter 1271 Benefits Provided by Health Maintenance Organizations, Section 1271.055 Out-of-Network Services; and
- Insurance Code, Subtitle C. Managed Care, Chapter 1453 Disclosure of Reimbursement Guidelines Under Managed Care Plan, Section 1453.002 Provision of Information Regarding Reimbursement Guidelines.

http://www.statutes.legis.state.tx.us/?link=IN