

Texas Gold Card FAQs

What is the TX Gold Card law?

In 2021, Texas passed a law that requires all health plans to review past prior authorization (PA) requests from providers to determine if they qualify for “Gold Card status.” Gold Card status means a provider must have 5 or more requests for a specific service (like those with specified CPT codes) within a six-month evaluation period, and 90% or more of those requests need to be approved. If a provider meets the select criteria, they no longer need to submit PA requests for that service. PA requests must still be submitted for all other services not meeting the select criteria.

How can a provider get a Gold Card through Bright HealthCare?

There’s nothing providers need to do at this time. Bright HealthCare will review all PAs from January 1, 2022, through June 30, 2022, for all providers. Bright HealthCare will notify all providers who meet the Gold Card criteria between September 15, 2022, and October 1, 2022, by mail and/or fax.

What services are eligible for the Gold Card?

All services that are listed on the Bright HealthCare website as requiring a PA are potentially eligible for a Gold Card designation. You can review the list of Texas Individual and Family Plan (IFP) and Small Group (SG) required services needing a PA here: mybrighthealth.com/IFP-Small-Group-PA-Service-Code-List

What does getting a Gold Card mean?

A provider who has been granted a Gold Card for one or more services will not need to submit a PA request for the Gold Card–designated services.

How will Gold Card status be communicated?

Between September 15, 2022, and October 1, 2022, Bright HealthCare will notify all providers who meet the Gold Card criteria by mail and/or fax.



What if a PA request is submitted for a service for which the provider has a Gold Card?

If a provider is approved for a Gold Card for a service and still submits a PA request for that service, Bright HealthCare will promptly give notice to the provider that includes:

1. a statement that the provider qualifies for an exemption,
2. a list of the health care services and health benefit plans to which the exemption applies,
3. a statement of the duration of the exemption, and
4. a notification of “payment requirements.”

How often does status change?

There is an exemption for 2022 to allow all health plans in Texas to notify providers of their status no later than October 1, 2022. Bright HealthCare will analyze all PAs in six-month intervals of January 1 to June 30 and July 1 to December 31 every year to issue or change the Gold Card status of Texas providers. Notification of status will occur twice a year, no later than August 31 or February 28 for each of the six-month review periods.

When does Gold Card designation expire?

The Gold Card exemption does not have a set expiration date. Bright HealthCare will periodically analyze information to determine if the provider still meets Gold Card criteria.

What if a Gold Card status is incorrect?

Please contact Bright HealthCare’s Provider Services team at 844-926-4525.

How do providers update their contact information?

To learn how to update their contact information, providers may call Bright HealthCare’s Provider Services team at 844-926-4525.

Who should providers contact with questions?

Providers may call Bright HealthCare’s Provider Services team at 844-926-4525, or contact the Provider Relations email box at providerrelationstexas@brighthouseplan.com and include “Texas Gold Card” in the subject line.