

Suspending limitations on conference committee jurisdiction, H.B. No. 2658 (Frank/Kolkhorst)

By: Frank

H.R. No. 1994

R E S O L U T I O N

1 BE IT RESOLVED by the House of Representatives of the State of
2 Texas, 87th Legislature, Regular Session, 2021, That House Rule 13,
3 Section 9(a), be suspended in part as provided by House Rule 13,
4 Section 9(f), to enable the conference committee appointed to
5 resolve the differences on House Bill 2658 (the Medicaid program,
6 including the administration and operation of the Medicaid managed
7 care program) to consider and take action on the following matter:

8 House Rule 13, Section 9(a)(4), is suspended to permit the
9 committee to add text on a matter not included in either the house
10 or senate version of the bill by adding the following new SECTION to
11 the bill:

12 SECTION 8. Section [32.0261](#), Human Resources Code, is
13 amended to read as follows:

14 Sec. 32.0261. CONTINUOUS ELIGIBILITY. (a) This section
15 applies only to a child younger than 19 years of age who is
16 determined eligible for medical assistance under this chapter.

17 (b) The executive commissioner shall adopt rules in
18 accordance with 42 U.S.C. Section 1396a(e)(12), as amended, to
19 provide for two consecutive periods of [a period of continuous]
20 eligibility for a child between each certification and
21 recertification of the child's eligibility, subject to Subsections
22 (f) and (h) [under 19 years of age who is determined to be eligible
23 for medical assistance under this chapter].

24 (c) The first of the two consecutive periods of eligibility

1 described by Subsection (b) must be continuous in accordance with
2 Subsection (d). The second of the two consecutive periods of
3 eligibility is not continuous and may be affected by changes in a
4 child's household income, regardless of whether those changes
5 occurred or whether the commission became aware of the changes
6 during the first or second of the two consecutive periods of
7 eligibility.

8 (d) A [~~The rules shall provide that the~~] child remains
9 eligible for medical assistance during the first of the two
10 consecutive periods of eligibility, without additional review by
11 the commission and regardless of changes in the child's household
12 [~~resources or~~] income, until [~~the earlier of:~~

13 [~~(1)~~] the end of the six-month period following the
14 date on which the child's eligibility was determined, except as
15 provided by Subsections (f)(1) and (h) [~~, or~~

16 [~~(2) the child's 19th birthday~~].

17 (e) During the sixth month following the date on which a
18 child's eligibility for medical assistance is certified or
19 recertified, the commission shall, in a manner that complies with
20 federal law, including verification plan requirements under 42
21 C.F.R. Section 435.945(j), review the child's household income
22 using electronic income data available to the commission. The
23 commission may conduct this review only once during the child's two
24 consecutive periods of eligibility. Based on the review:

25 (1) the commission shall, if the review indicates that
26 the child's household income does not exceed the maximum income for
27 eligibility for the medical assistance program, provide for a

1 second consecutive period of eligibility for the child until the
2 child's required annual recertification, except as provided by
3 Subsection (h) and subject to Subsection (c); or

4 (2) the commission may, if the review indicates that
5 the child's household income exceeds the maximum income for
6 eligibility for the medical assistance program, request additional
7 documentation to verify the child's household income in a manner
8 that complies with federal law.

9 (f) If, after reviewing a child's household income under
10 Subsection (e), the commission determines that the household income
11 exceeds the maximum income for eligibility for the medical
12 assistance program, the commission shall continue to provide
13 medical assistance to the child until:

14 (1) the commission provides the child's parent or
15 guardian with a period of not less than 30 days to provide
16 documentation demonstrating that the child's household income does
17 not exceed the maximum income for eligibility; and

18 (2) the child's parent or guardian fails to provide the
19 documentation during the period described by Subdivision (1).

20 (g) If a child's parent or guardian provides to the
21 commission within the period described by Subsection (f)
22 documentation demonstrating that the child's household income does
23 not exceed the maximum income for eligibility for the medical
24 assistance program, the commission shall provide for a second
25 consecutive period of eligibility for the child until the child's
26 required annual recertification, except as provided by Subsection
27 (h) and subject to Subsection (c).

1 (h) Notwithstanding any other period prescribed by this
2 section, a child's eligibility for medical assistance ends on the
3 child's 19th birthday.

4 (i) The commission may not recertify a child's eligibility
5 for medical assistance more frequently than every 12 months as
6 required by federal law.

7 (j) If a child's parent or guardian fails to provide to the
8 commission within the period described by Subsection (f)
9 documentation demonstrating that the child's household income does
10 not exceed the maximum income for eligibility for the medical
11 assistance program, the commission shall provide the child's parent
12 or guardian with written notice of termination following that
13 period. The notice must include a statement that the child may be
14 eligible for enrollment in the child health plan under Chapter 62,
15 Health and Safety Code.

16 (k) In developing the notice, the commission shall consult
17 with health care providers, children's health care advocates,
18 family members of children enrolled in the medical assistance
19 program, and other stakeholders to determine the most user-friendly
20 method to provide the notice to a child's parent or guardian.

21 (l) The executive commissioner may adopt rules as necessary
22 to implement this section.

23 Explanation: This addition is necessary to provide for
24 continuous eligibility and a periodic eligibility review for a
25 child for Medicaid.