

A BILL TO BE ENTITLED

AN ACT

relating to a pilot project to provide medical nutrition assistance to certain Medicaid recipients in this state.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter B, Chapter 32, Human Resources Code, is amended by adding Section 32.077 to read as follows:

Sec. 32.077. HEALTHY FOOD IS GOOD MEDICINE PILOT PROJECT.

(a) In this section:

(1) "Community-based organization" means an organization that:

(A) is exempt from the payment of federal income taxes under Section 501(a), Internal Revenue Code of 1986, by being listed as an exempt entity under Section 501(c)(3) of that code;

(B) provides medical nutrition assistance;

(C) has an established agreement with a medical provider to implement medical nutrition assistance under this section; and

(D) employs:

(i) at least one registered dietitian nutritionist;

(ii) culinary personnel; and

(iii) support personnel capable of providing patient referrals to a medical provider, sourcing ingredients, and packaging and delivering meals to medical

1 nutrition assistance recipients.

2 (2) "Medical nutrition assistance" means:

3 (A) provision of medically tailored meals to
4 individuals who have a chronic disease, including diabetes,
5 congestive heart failure, chronic pulmonary disease, kidney
6 disease, or other chronic disease, that is impacted by the
7 individual's diet and limits at least one activity of the
8 individual's daily living to support treatment and management of
9 the disease; and

10 (B) provision of medically tailored meals to
11 individuals who experience food insecurity and have at least one
12 chronic health condition directly impacted by the nutritional
13 quality of food to support treatment and management of the
14 condition.

15 (3) "Medical provider" means:

16 (A) a federally qualified health center as
17 defined by 42 U.S.C. Section 1396d(1)(2)(B); or

18 (B) a participating provider, as defined by
19 Section 32.101.

20 (4) "Medically tailored meal" means food prepared as
21 prescribed by a dietician or other qualified health care
22 professional to address an individual's chronic disease or health
23 condition and any associated symptoms.

24 (b) The executive commissioner shall seek a waiver under
25 Section 1115 of the federal Social Security Act (42 U.S.C. 1315) to
26 the state Medicaid plan to develop and implement a five-year pilot
27 project to demonstrate the cost effectiveness and improved health

1 care outcomes of Medicaid recipients in this state who are provided
2 medical nutrition assistance through medical providers and
3 community-based organizations in not more than six service delivery
4 areas.

5 (c) The pilot project must be established in service
6 delivery areas located in:

7 (1) a municipality with a population greater than
8 670,000; or

9 (2) a county:

10 (A) with a population greater than 65,000;

11 (B) that is located on an international border;

12 and

13 (C) in which at least one World Birding Center
14 site is located.

15 (d) The commission may collaborate and contract with
16 managed care organizations, the state Medicaid managed care
17 advisory committee, community-based organizations, and medical
18 providers in administering the pilot project.

19 (e) In implementing the pilot project, the executive
20 commissioner by rule shall establish eligibility criteria for
21 Medicaid recipients to participate in the pilot project.

22 (f) The commission shall, to the extent allowed by a waiver
23 obtained under Subsection (b), establish reimbursement rates for:

24 (1) a medical provider who through medical personnel,
25 including dietitians, nutritionists, social workers, and community
26 health workers, provides the following services:

27 (A) assessments and screening of recipients to

1 determine eligibility for participation in the pilot project; and

2 (B) development of individual care plans and
3 health outcome tracking for pilot project participants; and

4 (2) community-based organizations that provide the
5 following services:

6 (A) referral of recipients to a medical provider
7 for assessment and screening for eligibility for participation in
8 the pilot project;

9 (B) ingredient sourcing and meal preparation for
10 pilot project participants;

11 (C) meal delivery to pilot project participants;
12 and

13 (D) community outreach, including education on
14 disease management, nutrition and health, and access to community
15 nutrition services.

16 (g) The commission shall submit reports to the legislature
17 on the results of a pilot project implemented under this section as
18 follows:

19 (1) an initial report to be submitted not later than
20 the first anniversary of the date the pilot project is implemented
21 under this section;

22 (2) a second report to be submitted not later than 30
23 months following the date the pilot project is implemented; and

24 (3) a final report to be submitted not later than three
25 months after the pilot project concludes.

26 (h) A report submitted to the legislature under Subsection
27 (g) must include:

1 (1) the number of participants in the pilot project;

2 (2) any relevant medical outcomes for the
3 participants, including:

4 (A) insulin medication amounts required by
5 participants with diabetes;

6 (B) cardiac markers, sodium and potassium
7 levels, and biometric parameters;

8 (C) body mass index measurements;

9 (D) blood pressure;

10 (E) glomerular filtration rates and albumin
11 levels; and

12 (F) hospital admissions and emergency room
13 visits;

14 (3) any cost savings or increased expenditures
15 incurred as a result of the pilot project; and

16 (4) a commission recommendation on whether to
17 terminate, continue, or expand the pilot project.

18 (i) This section expires September 1, 2029.

19 SECTION 2. As soon as practicable after the effective date
20 of this Act, the executive commissioner of the Health and Human
21 Services Commission shall apply for and actively pursue a waiver
22 under Section 1115 of the federal Social Security Act (42 U.S.C.
23 Section 1315) to the state Medicaid plan from the federal Centers
24 for Medicare and Medicaid Services or any other federal agency to
25 implement Section 32.077, Human Resources Code, as added by this
26 Act. The commission may delay implementing Section 32.077, Human
27 Resources Code, as added by this Act, until the waiver applied for

1 under this section is granted.

2 SECTION 3. This Act takes effect September 1, 2023.