By: Blanco

S.B. No. 1694

	A BILL TO BE ENTITLED
1	AN ACT
2	relating to the reimbursement rate for the provision of vagus nerve
3	stimulation therapy system devices by certain health care providers
4	under Medicaid.
5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
6	SECTION 1. Subchapter B, Chapter 32, Human Resources Code,
7	is amended by adding Section 32.03145 to read as follows:
8	Sec. 32.03145. REIMBURSEMENT FOR VAGUS NERVE STIMULATION
9	THERAPY SYSTEM DEVICE PROVIDED BY CERTAIN PROVIDERS. (a) This
10	section applies only to the following providers under the medical
11	assistance program:
12	(1) a hospital licensed under Chapter 241, Health and
13	Safety Code, that provides acute care services; or
14	(2) an ambulatory surgical center licensed under
15	Chapter 243, Health and Safety Code.
16	(b) The executive commissioner shall ensure that the rules
17	governing the determination of reimbursement rates paid to a
18	provider subject to this section for the provision of a vagus nerve
19	stimulation therapy system device to a medical assistance recipient
20	is:
21	(1) at least equal to 82 percent of the device's
22	acquisition cost; and
23	(2) in addition to any other surgery fee charged by the
24	provider.

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SECTION 2. Section 533.005, Government Code, is amended by adding Subsection (i) to read as follows:

3 <u>(i) In addition to the requirements specified by Subsection</u> 4 <u>(a), a contract described by that subsection must contain a</u> 5 <u>requirement that a managed care organization comply with Section</u> 6 <u>32.03145, Human Resources Code.</u>

7 SECTION 3. (a) The Health and Human Services Commission 8 shall, in a contract between the commission and a managed care 9 organization under Chapter 533, Government Code, that is entered 10 into or renewed on or after the effective date of this Act, require 11 that the managed care organization comply with Section 533.005(i), 12 Government Code, as added by this Act.

The Health and Human Services Commission shall seek to 13 (b) 14 amend contracts entered into with managed care organizations under 15 Chapter 533, Government Code, before the effective date of this Act to require those managed care organizations to comply with Section 16 17 533.005(i), Government Code, as added by this Act. To the extent of a conflict between Section 533.005(i), Government Code, as added by 18 19 this Act, and a provision of a contract with a managed care organization entered into before the effective date of this Act, 20 the contract provision prevails. 21

SECTION 4. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

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1 SECTION 5. This Act takes effect September 1, 2023.