BILL ANALYSIS

Senate Research Center

H.B. 1090 By: Miller (Averitt) Health & Human Services 5/23/2003 Engrossed

This analysis utilizes the House Committee Report, which is the most recent version available to the Research Center.

BACKGROUND AND PURPOSE

Senior citizens rely heavily on prescription drugs, but more than a third of them have no prescription drug insurance coverage. In Texas, an estimated 748,000 Medicare recipients, most over the age of 65, lack prescription drug coverage. C.S.H.B. 1090 would establish the Texas Cares program through the Texas Department on Aging to provide information regarding prescription drug discount programs and to enroll eligible seniors in the appropriate programs.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas Department on Aging in SECTION 1 (Section 101.034, Human Resources Code) of this bill.

ANALYSIS

C.S.H.B. 1090 establishes the Texas Cares program through the Texas Department on Aging to provide information and assistance to persons eligible for discount prescription drug programs offered by pharmaceutical companies. The bill directs the department to provide information regarding the programs and to assist in enrolling eligible individuals when appropriate.

The bill allows the Texas Cares program to solicit and accept grants, gifts, and donations to fund the program. It also directs the Texas Cares program to maintain an Internet web site, a toll-free telephone number, and written materials with information regarding the program.

The bill allows the program to conduct community outreach and coordinate operation of the program with area agencies on aging.

EFFECTIVE DATE

This Act takes effect immediately if it receives a vote of two-thirds of all the members of each house, as provided by Section 39, Article III, Texas Constitution. If the Act does not receive the necessary vote for immediate effect, this Act takes effect September 1, 2003.

COMPARISON OF ORIGINAL TO SUBSTITUTE

C.S.H.B. 1090 directs the Department on Aging to utilize private discount programs for prescription drugs to create the Texas Cares program. Texas Cares would not place limits on rates that could be charged for drugs, but instead would work with pharmaceutical companies to increase enrollment on existing pharmaceutical company discount programs.

HB 1090 as filed would not have utilized existing private discount programs, and would have instead limited what pharmacists could charge Medicare recipients for prescription drugs to what the state pays for those same drugs under the Vendor Drug Program.