BILL ANALYSIS

Senate Research Center

H.B. 1252 By: Guillen (Zaffirini) Health & Human Services 5/18/2005 Engrossed

AUTHOR'S/SPONSOR'S STATEMENT OF INTENT

Chronic renal failure affects more than two out of 1,000 people in the United States and an estimated 44,200 Texans. Diabetes and Hypertension are the two of the most common causes and account for approximately two-thirds of the cases of chronic kidney failure.

H.B. 1252 requires the early screening, diagnosis, and treatment of chronic kidney disease if the Health and Human Services Commission (HHSC) finds it cost effective. It will require medical diagnostic labs, which already analyze these tests, to perform a basic calculation using data already in the test to determine if individuals are in danger of developing acute kidney disease.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 533.009(a), Go vernment Code, to require the Health and Human Services Commission (commission) to ensure that managed care organizations under contract with the commission to provide health care services to recipients, develop and implement special disease management programs to manage a disease or other chronic health conditions, such as chronic kidney disease and its medical complications, and with respect to which the commission identifies populations for which disease management would be cost-effective.

SECTION 2. Amends Section 32.059(a), Human Resources Code, as added by Chapter 208, Acts of the 78th Legislature, Regular Session, 2003, to require the commission to request contract proposals from providers of disease management programs to provide program services to recipients of medical assistance who have chronic kidney disease and its medical complications.

SECTION 3. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.069, as follows:

Sec. 32.069. CHRONIC KIDNEY DISEASE MANAGEMENT INITIATIVE. (a) Requires a provider of disease management programs under Section 32.059, as added by Chapter 208, Acts of the 78th Legislature, Regular Session, 2003, to develop a program to provide screening for and diagnosis and treatment of chronic kidney disease and its medical complications under the medical assistance program. Requires the program to use generally recognized clinical practice guidelines and laboratory assessments that identify chronic kidney disease on the basis of impaired kidney function or the presence of kidney damage.

- (b) Authorizes a licensed dietitian acting within the scope of the person's license in a licensed facility that provides screening, diagnosis, or treatment services to a patient as described by Subsection (a), to perform specific functions consistent with a medical direction or authorization as provided by Subsection (c).
- (c) Requires a medical direction or authorization required by Subsection (b) to be provided through a physician's order, standing medical order, standing delegation order, or medical protocol issued in accordance with Subchapter A, Chapter 157

(Authority of Physician to Delegate Certain Medical Acts), Occupations Code, and rules adopted by the Texas State Board of Medical Examiners under that subchapter.

SECTION 4. Authorizes the commission to modify an existing contract between the commission and a provider of a disease management program under the medical assistance program in order to provide program services to persons with chronic kidney disease under the medical assistance program.

SECTION 5. Requires the agency affected by the provision to request any necessary waiver or authorization and authorizes it to delay implementing that provision until the waiver or authorization is granted.

SECTION 6. Effective date: September 1, 2005.