

1-1 By: Guillen, et al. (Senate Sponsor - Zaffirini) H.B. No. 1252
1-2 (In the Senate - Received from the House May 16, 2005;
1-3 May 17, 2005, read first time and referred to Committee on Health
1-4 and Human Services; May 20, 2005, reported favorably by the
1-5 following vote: Yeas 7, Nays 0; May 20, 2005, sent to printer.)

1-6 A BILL TO BE ENTITLED
1-7 AN ACT

1-8 relating to providing services for persons with chronic kidney
1-9 disease under the medical assistance program.

1-10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-11 SECTION 1. Section 533.009(a), Government Code, is amended
1-12 to read as follows:

1-13 (a) The commission shall ensure that managed care
1-14 organizations under contract with the commission to provide health
1-15 care services to recipients develop and implement special disease
1-16 management programs to manage a disease or other chronic health
1-17 conditions, such as heart disease, chronic kidney disease and its
1-18 medical complications, respiratory illness, including asthma,
1-19 diabetes, end-stage renal disease, HIV infection, or AIDS, and with
1-20 respect to which the commission identifies populations for which
1-21 disease management would be cost-effective.

1-22 SECTION 2. Section 32.059(a), Human Resources Code, as
1-23 added by Chapter 208, Acts of the 78th Legislature, Regular
1-24 Session, 2003, is amended to read as follows:

1-25 (a) The department shall request contract proposals from
1-26 providers of disease management programs to provide program
1-27 services to recipients of medical assistance who:

1-28 (1) have a disease or other chronic health condition,
1-29 such as heart disease, hemophilia, chronic kidney disease and its
1-30 medical complications, diabetes, respiratory illness, end-stage
1-31 renal disease, HIV infection, or AIDS, that the department
1-32 determines is a disease or condition that needs disease management;
1-33 and

1-34 (2) are not eligible to receive those services under a
1-35 Medicaid managed care plan.

1-36 SECTION 3. Subchapter B, Chapter 32, Human Resources Code,
1-37 is amended by adding Section 32.069 to read as follows:

1-38 Sec. 32.069. CHRONIC KIDNEY DISEASE MANAGEMENT INITIATIVE.

1-39 (a) A provider of disease management programs under Section
1-40 32.059, as added by Chapter 208, Acts of the 78th Legislature,
1-41 Regular Session, 2003, shall develop a program to provide screening
1-42 for and diagnosis and treatment of chronic kidney disease and its
1-43 medical complications under the medical assistance program. The
1-44 program must use generally recognized clinical practice guidelines
1-45 and laboratory assessments that identify chronic kidney disease on
1-46 the basis of impaired kidney function or the presence of kidney
1-47 damage.

1-48 (b) Consistent with a medical direction or authorization as
1-49 provided by Subsection (c), a licensed dietitian acting within the
1-50 scope of the person's license in a licensed facility that provides
1-51 screening, diagnosis, or treatment services to a patient as
1-52 described by Subsection (a), may:

1-53 (1) accept, transcribe into the patient's medical
1-54 record, or transmit verbal or electronically transmitted orders,
1-55 including medication orders, relating to the implementation or
1-56 provision of medical nutrition therapy and related medical
1-57 protocols for the patient or a group of patients from a physician to
1-58 another authorized health care professional; or

1-59 (2) order medical laboratory tests relating to the
1-60 implementation or provision of medical nutrition therapy and
1-61 related medical protocols for the patient or a group of patients.

1-62 (c) A medical direction or authorization required by
1-63 Subsection (b) must be provided through a physician's order,
1-64 standing medical order, standing delegation order, or medical

2-1 protocol issued in accordance with Subchapter A, Chapter 157,
2-2 Occupations Code, and rules adopted by the Texas State Board of
2-3 Medical Examiners under that subchapter.

2-4 SECTION 4. To provide program services to persons with
2-5 chronic kidney disease under the medical assistance program, the
2-6 Health and Human Services Commission may modify an existing
2-7 contract between the commission and a provider of a disease
2-8 management program under the medical assistance program.

2-9 SECTION 5. If before implementing any provision of this Act
2-10 a state agency determines that a waiver or authorization from a
2-11 federal agency is necessary for implementation of that provision,
2-12 the agency affected by the provision shall request the waiver or
2-13 authorization and may delay implementing that provision until the
2-14 waiver or authorization is granted.

2-15 SECTION 6. This Act takes effect September 1, 2005.

2-16

* * * * *