By: Zaffirini

(In the Senate - Filed February 21, 2005; March 1, 2005, read first time and referred to Committee on Health and Human Services; March 17, 2005, reported adversely, with favorable Committee Substitute by the following vote: Yeas 6, Nays 2; March 17, 2005, sent to printer) 1**-**2 1**-**3 1-4 1-5 1-6 March 17, 2005, sent to printer.) 1-7 COMMITTEE SUBSTITUTE FOR S.B. No. 627 By: Zaffirini 1-8 A BILL TO BE ENTITLED 1-9 AN ACT 1-10 relating to a pilot program for the transfer of money appropriated for certain institutional care for children to provide 1-11 community-based services to those children. 1-12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 1-13 1-14 1-15 SECTION 1. Subchapter D, Chapter 161, Human Resources Code, is amended by adding Section 161.075 to read as follows: 1-16 Sec. 161.075. PILOT PROGRAM FOR TRANSFER OF MONEY FOR COMMUNITY-BASED SERVICES FOR CERTAIN CHILDREN. 1-17 (a) In this 1-18 section: 1-19 1-20 "Child" has the meaning assigned by (1)Section 531.151, Government Code. 1-21 (2) "Health and human services agency" has the meaning assigned by Section 531.001, Government Code. 1-22 1-23 (3) "ICF-MR" has the meaning assigned by Section Health and Safety Code.

The department shall establish a pilot program under 1-24 1-25 (b) 1-26 which: <u>(1</u>) 1-27 the department: (A) quantifies the amount of money appropriated to the department by the legislature that would have been spent during the remainder of a state fiscal biennium to care for a child who lives in any ICF-MR facility but who is leaving that facility 1-28 1-29 1-30 1-31 1-32 before the end of the biennium to live in the community; and 1-33 (B) notifies the commission that the child will be leaving the facility to live in the community; and

(2) the commission, notwithstanding any other state law and to the maximum extent allowed by federal law, directs, as 1-34 1-35 1-36 1-37 appropriate: (A) the executive commissioner, at the time the child leaves the facility, to transfer the amount quantified under Subdivision (1)(A) among the health and human services agencies and 1-38 1-39 1-40 1-41 the commission as necessary to comply with this section, subject to 1-42 Subsection (d); or (B) the department, at the time the child leaves the facility, to transfer the amount quantified under Subdivision (1)(A) within the department's budget as necessary to comply with 1-43 1-44 1-45 this section, subject to Subsection (d). 1-46 (c) The commission shall ensure that the amount transferred under this section is redirected by the commission or the department, as applicable, to one or more community-based programs to provide community-based services to the child after the child 1-47 1-48 1-49 1-50 1-51 leaves the facility. (d) During each state fiscal year, the department may notify the commission under Subsection (b)(1)(B) with respect to not more 1-52 1-53 than 50 children, and the commission shall direct that money be transferred under Subsection (b)(2) with respect to those children. 1-54 1-55 1-56 (e) The commission may decertify an appropriate Medicaid bed for each child who leaves an ICF-MR facility and for whom money 1-57 is transferred under Subsection (b)(2). The executive commissioner 1-58 shall consider the entire bed plan for ICF-MRs when making any decision to decertify a bed, in order to maintain the viability of 1-59 1-60 small ICF-MR providers. 1-61 1-62 (f) Not later than December 1, 2006, the commission and the department shall jointly prepare and submit a report concerning the

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effectiveness of the pilot program to the governor and the committees of each house of the legislature that have primary oversight jurisdiction over health and human services. The report

must:

(1) indicate the number of children who left an ICF-MR facility to receive community-based services under the pilot program and the locations of the ICF-MR facilities in which those

children previously resided;

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2-29 2-30 (2) identify the waiver programs that provided the community-based services to children described by Subdivision (1); and

(3) include:

(A) an evaluation of any systemic barriers that affected implementation of the pilot program;

(B) recommendations on possible incentives or assistance that would encourage providers of ICF-MR services to convert those services to community-based services; and

(C) a recommendation regarding the feasibility

of expanding the pilot program statewide.

(g) This section expires September 1, 2007.
SECTION 2. Not later than December 1, 2005, the Department of Aging and Disability Services shall implement the pilot program under Section 161.075, Human Resources Code, as added by this Act.

SECTION 3. 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.

SECTION 4. This Act takes effect September 1, 2005.

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