

## **BILL ANALYSIS**

S.B. 1696  
By: Nelson  
Public Health  
Committee Report (Unamended)

### **BACKGROUND AND PURPOSE**

In Texas, an uninsured woman can get access to the Medicaid Breast and Cervical Cancer Treatment Program (program) coverage under Medicaid if she is actually screened or diagnosed by an entity funded under the separate, sister program, the Centers for Disease Control and Prevention Breast and Cervical Cancer Early Detection Program established under Title XV of the Public Health Services Act (Establishment of Program of Grants to States), and found to need treatment for either breast or cervical cancer (including a precancerous condition).

SB 1696 expands the pool of eligible women if they meet certain criteria or are merely screened by a program provider, regardless of federal funding stream as long as the screener is funded in part by Title XV funds.

### **RULEMAKING AUTHORITY**

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

### **ANALYSIS**

SECTION 1. Amends Section 32.024, Human Resources Code, by adding Subsection (y-1), as follows:

(y-1) Provides that a woman who receives a breast or cervical cancer screening service (service) under Title XV of the Public Health Service Act (42 U.S.C. Section 300k et seq.) and who otherwise meets the eligibility requirements for medical assistance for treatment of breast or cervical cancer as provided by Subsection (y) (relating to the requirement that the Health and Human Services Commission provide medical assistance to a person eligible for assistance under the Breast and Cervical Cancer Prevention and Treatment Act of 2000) is eligible for medical assistance under that subsection, regardless of whether federal Medicaid matching funds are available. Provides that a service of a type that is within the scope of services under that title is considered to be provided under that title regardless of whether the service was provided by a provider who receives or uses funds under that title.

SECTION 2. Authorizes a state agency to delay implementing a provision of this Act until a requested federal waiver or authorization necessary to implement that provision is obtained.

### **EFFECTIVE DATE**

September 1, 2007.