

BILL ANALYSIS

C.S.H.B. 2627
By: Naishtat
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Currently, Texas law permits a nurse practitioner and physician assistant to sign orders for home health services. However, under the Medicaid Texas Health Steps Comprehensive Care Program, which provides skilled nursing and therapy services to medically complex children, such practitioners are not permitted to sign orders for home health services.

Home health agencies have difficulty obtaining orders from physicians for services under the comprehensive care program. Consequently, patients experience delays in services and physicians experience delays in billing. In many cases, nurse practitioners or physician assistants provide much of the ongoing management of care for these patients.

C.S.H.B. 2627 requires the Health and Human Services Commission to ensure that licensed nurse practitioners and physician assistants are permitted to sign orders for private duty nursing and therapy services to individuals through the Texas Health Steps Comprehensive Care Program.

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 531.0055, Government Code, as amended by Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, expressly grants to the executive commissioner of the Health and Human Services Commission all rulemaking authority for the operation of and provision of services by the health and human services agencies. Similarly, Sections 1.16-1.29, Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, provide for the transfer of a power, duty, function, program, or activity from a health and human services agency abolished by that act to the corresponding legacy agency. To the extent practicable, this bill analysis is written to reflect any transfer of rulemaking authority and to update references as necessary to an agency's authority with respect to a particular health and human services program.

C.S.H.B. 2627 amends the Human Resources Code to require the Health and Human Services Commission or an agency operating part of the Medicaid program, as appropriate, to ensure that a licensed nurse practitioner or a physician assistant is permitted to authorize the provision of private duty nursing and therapy services to individuals through the Texas Health Steps Comprehensive Care Program, to the extent that a nurse practitioner or physician assistant is permitted to authorize those services under provisions relating to home and community support services, provisions granting the authority of a physician to delegate certain medical acts, or federal law. The bill requires a state agency, if before implementing any of these provisions determines that a waiver or authorization from a federal agency is necessary for implementation of a provision, to request the waiver or authorization and authorizes the agency to delay implementing the provision until the waiver or authorization is granted.

EFFECTIVE DATE

September 1, 2009.

COMPARISON OF ORIGINAL AND SUBSTITUTE

C.S.H.B. 2627 differs from the original by making nonsubstantive technical corrections, clarifying that the services to be provided are private duty nursing and therapy services, rather than home health services as in the original, and adding cross-references to the authorization for a nurse practitioner or physician assistant to perform those services.