## **BILL ANALYSIS**

Senate Research Center 81R388 CLG-D S.B. 943 By: Zaffirini Health & Human Services 4/29/2009 As Filed

## AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Currently, persons seeking long-term care services may face a confusing array of information and access points, including the 2-1-1 system, area agencies on aging (AAA), Department of Aging and Disability Services (DADS) regional offices, Health and Human Services Commission (HHSC) eligibility offices, or Aging and Disability Resource Centers (ADRC). Regardless of where they go, none of these entities have the ability to address fully all of the consumers' needs and complete the entire process for entry into services, start to finish. The ADRCs are the most likely venue for providing access in one location. However, the ADRCs do not have an HHSC or DADS worker regularly on-site who can determine program and Medicaid eligibility and authorize services.

A single point of entry site would advise consumers regarding their service options, screen persons to determine their service eligibility, tentatively determine financial eligibility for Medicaid or other services, and ensure a rapid start of community based services to help avoid more expensive care in nursing facilities.

As proposed, S.B. 943 authorizes a pilot project to demonstrate a comprehensive, single point of entry for long-term care services in up to three locations across the state. The bill establishes presumptive eligibility for Medicaid-funded community care services, such as primary home care and community attendant services.

## **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 Subchapter B, Chapter 531, Government Code, by adding Section 531.0525, as follows:

Sec. 531.0525. PILOT PROJECT TO ESTABLISH COMPREHENSIVE SINGLE POINT OF ENTRY FOR LONG-TERM SERVICES AND SUPPORTS. (a) Defines "aging and disability resource center," "Department of Aging and Disability Services staff members," "expedited service authorization," "long-term services and supports," "long-term services and support staff," "physically collocated staff members," "pilot project site," and "tentative eligibility."

(b) Requires the Health and Human Services Commission (HHSC) to develop and implement in not more than three geographic areas of this state a pilot project to establish a comprehensive single point of entry system for long-term services and supports in which long-term services and supports staff members located in the same physical office work in collaboration to provide all necessary services in connection with long-term services and supports from the intake process to the start of service delivery. Requires that the pilot project require, at a minimum, physically colocated staff members work collaboratively to screen the aged and physically disabled individuals requesting long-term services and supports; establish tentative eligibility for long-term services and supports; support and provide expedited service authorization for the aged and physically disabled individuals requesting long-term services for which there are no waiting lists; and make final determinations of financial eligibility for long-term services and supports after a period of tentative eligibility for receipt of those services and supports.

(c) Requires HHSC, in developing and implementing the pilot project, to ensure that: each pilot project site serves as a comprehensive single point of entry for the aged and physically disabled individuals to access long-term services and supports in the site's service area; each pilot project site is designed and operated in accordance with best practices adopted by the executive commissioner of HHSC after HHSC reviews best practices for similar initiatives in other states and professional policy-based research describing best practices for successful initiatives; the physically colocated staff members at each pilot project site include one or more full-time HHSC staff members who determine eligibility for the Medicaid program and who have full access to the Texas Eligibility Redesign System (TIERS) or the System of Application, Verification, Eligibility, Referral, and Reporting (SAVERR), have previously made Medicaid long-term care eligibility determinations, and are dedicated primarily to making eligibility determinations for incoming clients at the site, sufficient Department of Aging and Disability Services (DADS) staff members to carry out the screening and expedited service authorization functions at the site, sufficient area agency on aging staff members to assist with the performance of screening functions and service coordination for services funded under the Older Americans Act of 1965 (42 U.S.C. Section 3001 et seq.), such as meals programs and identify other locally funded and supported services that will enable the aged or physically disabled individuals to continue to reside in the community to the extent reasonable, and any available staff members from local service agencies; and the physically collocated staff members of a pilot project site use a standardized screening tool that assesses both functional and financial program eligibility and provides sufficient information to make a tentative eligibility determination for receipt of services, process requests for long-term services and supports in person or by telephone or through the Internet, perform all screening and assessment, eligibility determination, and service authorization functions necessary to promptly initiate appropriate service delivery, closely coordinate with local hospital discharge planners and staff members of extended rehabilitation units of local hospitals and nursing homes, give first priority to individuals who urgently need services, and inform individuals about community-based services available in the area served by the pilot project.

(d) Authorizes an area in which a pilot project will be implemented to consist of a single county or a multicounty region, as determined by HHSC. Requires that at least one of the areas have a pilot project site located within an aging and disability resource center. Authorizes the pilot project site, if HHSC finds that there is no aging or disability resource center that is willing or able to accommodate a pilot project site on the date the pilot project is to be implemented, to be located at a local DADS office, an area agency on aging office, or another appropriate location.

(e) Requires HHSC, not later than January 31, 2011, to submit a report concerning the pilot project to the presiding officers of the standing committees of the senate and the house of representatives having primary jurisdiction over health and human services. Requires that the report be prepared by a person not associated with the pilot project or HHSC; contain, for each area of this state in which the pilot project is being implemented, an evaluation of the operation of the pilot project in that area; contain an evaluation of the pilot project's benefits for individuals who received services; contain a calculation of the costs and cost savings that can be attributed to implementation of the pilot project; include a recommendation regarding adopting improved policies and procedures concerning long-term services and supports with statewide applicability, as determined from information obtained in operating the pilot project to other areas of this state or statewide; and contain the perspectives of service providers of programs listed in Subsection (a)(4) who are operating in the area served by a pilot project site.

(f) Provides that this section expires September 1, 2013.

SECTION 2. Requires HHSC, not later than December 31, 2009, to ensure that at least one pilot project site is in operation under the pilot project required by Section 531.0525, Government Code, as added by this Act.

SECTION 3. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such waivers or authorizations are granted.

SECTION 4. Effective date: upon passage or September 1, 2009.