

1-1 By: Davis of Harris, et al. H.B. No. 802  
1-2 (Senate Sponsor - Zaffirini)  
1-3 (In the Senate - Received from the House May 4, 2009;  
1-4 May 6, 2009, read first time and referred to Committee on Health  
1-5 and Human Services; May 15, 2009, reported adversely, with  
1-6 favorable Committee Substitute by the following vote: Yeas 9,  
1-7 Nays 0; May 15, 2009, sent to printer.)

1-8 COMMITTEE SUBSTITUTE FOR H.B. No. 802 By: Zaffirini

1-9 A BILL TO BE ENTITLED  
1-10 AN ACT

1-11 relating to the creation of the lifespan respite services program.  
1-12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:  
1-13 SECTION 1. Chapter 161, Human Resources Code, is amended by  
1-14 adding Subchapter F to read as follows:

1-15 SUBCHAPTER F. LIFESPAN RESPITE SERVICES PROGRAM

1-16 Sec. 161.151. DEFINITIONS. In this subchapter:

1-17 (1) "Chronic serious health condition" means a health  
1-18 condition that:

1-19 (A) requires periodic treatment by a health care  
1-20 provider, including a nurse as authorized by Chapter 301,  
1-21 Occupations Code, or a physician assistant as authorized by Chapter  
1-22 204, Occupations Code; and

1-23 (B) continues over an extended period, including  
1-24 recurring episodes of a single underlying health condition such as  
1-25 asthma, diabetes, epilepsy, or multiple sclerosis.

1-26 (2) "Respite services" means support services,  
1-27 including in-home services or adult day-care services, that are  
1-28 provided for the purpose of temporarily giving relief to a primary  
1-29 caregiver who provides care to an individual with a chronic serious  
1-30 health condition or disability.

1-31 (3) "Respite services coordinator" means a  
1-32 community-based organization or local governmental entity with  
1-33 which the department enters into a contract to facilitate access to  
1-34 respite services under Section 161.154.

1-35 Sec. 161.152. LIFESPAN RESPITE SERVICES PROGRAM. The  
1-36 department shall implement the lifespan respite services program to  
1-37 promote the provision of respite services through contracts with  
1-38 eligible community-based organizations or local governmental  
1-39 entities.

1-40 Sec. 161.153. ELIGIBILITY. (a) A person is eligible to  
1-41 participate in the program if the person:

1-42 (1) is the primary caregiver for a person who:

1-43 (A) is related to the caregiver within the second  
1-44 degree of consanguinity or affinity;

1-45 (B) has a chronic serious health condition or  
1-46 disability;

1-47 (C) requires assistance with one or more  
1-48 activities of daily living; and

1-49 (D) is not eligible for or not able to  
1-50 participate in any other existing program that provides respite  
1-51 services; and

1-52 (2) meets criteria specified in rules adopted by the  
1-53 executive commissioner.

1-54 (b) The executive commissioner may not specify criteria  
1-55 that limit a person's eligibility based on the type of chronic  
1-56 serious health condition or disability of the person receiving  
1-57 care.

1-58 Sec. 161.154. RESPITE SERVICES CONTRACTS. (a) The  
1-59 department shall contract with at least three eligible  
1-60 community-based organizations or local governmental entities  
1-61 selected by the department to:

1-62 (1) provide respite services; and

1-63 (2) facilitate access to respite services.

2-1 (b) The department may award a contract under this section  
2-2 only after issuing a request for proposals for the contract.

2-3 (c) A community-based organization or local governmental  
2-4 entity is eligible to contract under this section only if the  
2-5 organization or entity has experience in and an existing procedure  
2-6 for:

2-7 (1) coordinating support services for multiple groups  
2-8 of persons who need support services, including persons with a  
2-9 physical or intellectual disability and elderly persons;

2-10 (2) connecting caregivers with respite services  
2-11 providers;

2-12 (3) maintaining and providing information regarding  
2-13 available respite services; and

2-14 (4) conducting public awareness activities regarding  
2-15 available respite services.

2-16 (d) The department shall include in each contract with a  
2-17 respite services coordinator provisions requiring the coordinator  
2-18 to:

2-19 (1) subject to the availability of money, provide  
2-20 vouchers for respite services to caregivers participating in the  
2-21 program who are not eligible for respite services provided through  
2-22 other programs; and

2-23 (2) connect caregivers participating in the program  
2-24 with available respite services.

2-25 (e) The department shall provide each community-based  
2-26 organization or local governmental entity with which the department  
2-27 contracts under this subchapter with:

2-28 (1) technical assistance; and

2-29 (2) policy and program development support.

2-30 (f) The department shall monitor a contractor's performance  
2-31 under a contract entered into under this subchapter using clearly  
2-32 defined and measurable performance objectives.

2-33 Sec. 161.155. RESPITE SERVICES COORDINATOR FUNCTIONS. A  
2-34 respite services coordinator under contract with the department  
2-35 shall:

2-36 (1) maintain information regarding respite services  
2-37 providers;

2-38 (2) build partnerships with respite services  
2-39 providers; and

2-40 (3) implement public awareness activities regarding  
2-41 respite services.

2-42 Sec. 161.156. RULES. The executive commissioner shall adopt  
2-43 rules necessary to implement this subchapter.

2-44 SECTION 2. Not later than November 1, 2010, the executive  
2-45 commissioner of the Health and Human Services Commission, in  
2-46 consultation with the Department of Aging and Disability Services,  
2-47 shall submit a report to the governor and the Legislative Budget  
2-48 Board regarding the lifespan respite services program established  
2-49 under Subchapter F, Chapter 161, Human Resources Code, as added by  
2-50 this Act. The report must include an evaluation of the effect of  
2-51 the program on:

2-52 (1) access to respite services by primary caregivers  
2-53 of persons with chronic serious health conditions or disabilities;  
2-54 and

2-55 (2) Medicaid expenditures for long-term care services  
2-56 provided in institutional care settings.

2-57 SECTION 3. This Act does not make an appropriation. A  
2-58 provision in this Act that creates a new governmental program,  
2-59 creates a new entitlement, or imposes a new duty on a governmental  
2-60 entity is not mandatory during a fiscal period for which the  
2-61 legislature has not made a specific appropriation to implement the  
2-62 provision.

2-63 SECTION 4. This Act takes effect September 1, 2009.

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