

By: Shelton, Zerwas, Rose, Pitts, Naishtat,
et al.

H.B. No. 2686

Substitute the following for H.B. No. 2686:

By: Zerwas

C.S.H.B. No. 2686

A BILL TO BE ENTITLED

1 AN ACT
2 relating to a pilot project to increase enrollee access to primary
3 care services and simplify enrollment procedures under the child
4 health plan program.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

6 SECTION 1. Subchapter D, Chapter 62, Health and Safety
7 Code, is amended by adding Section 62.160 to read as follows:

8 Sec. 62.160. PILOT PROJECT TO INCREASE ENROLLEE ACCESS TO
9 PRIMARY CARE SERVICES AND SIMPLIFY ENROLLMENT PROCEDURES. (a) In
10 this section:

11 (1) "CPT code" means the number assigned to identify a
12 specific health care procedure performed by a health care provider
13 under the American Medical Association's "Current Procedural
14 Terminology 2009 Professional Edition" or a subsequent edition of
15 that publication adopted by the executive commissioner by rule.

16 (2) "Lower-cost medical setting" means a facility,
17 clinic, center, office, or other setting primarily used to provide
18 primary care services.

19 (3) "Primary care services" means health services
20 generally provided through a general, family, internal medicine, or
21 pediatrics practice. The term does not include services provided
22 through a hospital emergency room or surgical services.

23 (4) "Service area" means the geographical area
24 determined by the commission that is coterminous with one or more

1 Medicaid service areas and in which the pilot project is
2 established.

3 (b) The commission shall establish a two-year pilot project
4 in one or more Medicaid service areas that is designed to:

5 (1) increase child health plan enrollee access to
6 primary care services; and

7 (2) simplify child health plan enrollment procedures.

8 (c) In establishing the pilot project under this section,
9 the executive commissioner shall:

10 (1) for each service area, establish health care
11 provider reimbursement rates for primary care services provided in
12 lower-cost medical settings that are comparable to the federal
13 Medicare program rates for the same or similar services;

14 (2) identify CPT codes that represent primary care
15 services for purposes of Subdivision (1);

16 (3) prescribe and use an alternative application for
17 child health plan coverage that is written on a sixth-grade reading
18 comprehension level; and

19 (4) require any enrollment services provider in a
20 service area to reduce application processing delays and procedural
21 denials and increase renewal rates.

22 (d) An individual who resides in the service area and who is
23 determined eligible for coverage under the child health plan
24 remains eligible for benefits until the expiration of the period
25 provided by Section 62.102(a), subject to Section 62.102(b).

26 (e) The commission shall provide at least one point of
27 service contact in each county in the service area where trained

1 personnel are available to personally assist interested
2 individuals who reside in the service area with the application
3 form and procedures for child health plan coverage.

4 (f) The commission may only enroll an individual in the
5 child health plan program under the pilot project established under
6 this section during the first year of the project.

7 (g) Not later than January 1, 2011, the commission shall
8 submit an initial report to the governor, the lieutenant governor,
9 the speaker of the house of representatives, and the presiding
10 officers of the standing committees of the senate and house of
11 representatives having primary jurisdiction over the child health
12 plan program. The report must evaluate the operation of the pilot
13 project and make recommendations regarding the continuation or
14 expansion of the pilot project. The report must:

15 (1) state whether:

16 (A) a higher percentage of eligible individuals
17 in the service area enrolled in the child health plan as a result of
18 the pilot project, as compared to percentages in other areas;

19 (B) a higher percentage of health plan providers
20 in the service area participated in the child health plan as a
21 result of the pilot project, as compared to percentages in other
22 areas; and

23 (C) the enrollment changes implemented under the
24 pilot project:

25 (i) reduced application processing delays
26 and procedural denials; and

27 (ii) affected reenrollment rates; and

1 (2) include recommendations for the statewide
2 implementation of successful pilot project strategies.

3 (h) The commission shall submit a final report regarding the
4 results of the pilot project in the manner prescribed by Subsection
5 (g) not later than the 60th day after the date the pilot project
6 terminates. The report must contain the information required by
7 Subsection (g).

8 (i) The executive commissioner shall adopt rules necessary
9 to implement this section.

10 (j) This section expires January 1, 2013.

11 SECTION 2. Subject to Section 3 of this Act, not later than
12 October 1, 2009, the Health and Human Services Commission shall
13 establish the pilot project required under Section 62.160, Health
14 and Safety Code, as added by this Act.

15 SECTION 3. If before implementing any provision of this Act
16 a state agency determines that a waiver or authorization from a
17 federal agency is necessary for implementation of that provision,
18 the agency affected by the provision shall request the waiver or
19 authorization and may delay implementing that provision until the
20 waiver or authorization is granted.

21 SECTION 4. This Act takes effect immediately if it receives
22 a vote of two-thirds of all the members elected to each house, as
23 provided by Section 39, Article III, Texas Constitution. If this
24 Act does not receive the vote necessary for immediate effect, this
25 Act takes effect September 1, 2009.