## A BILL TO BE ENTITLED

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                    AN ACT
relating to improving application and eligibility determination
processes and efficiencies for certain benefits programs.
    BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
    SECTION 1. Subchapter B, Chapter 531, Government Code, is
    amended by adding Section 531.0992 to read as follows:
    Sec. 531.0992. COMMUNITY OUTREACH FOR BENEFITS PROGRAMS.
    (a) In this section, "benefits program" includes:
    (1) the child health plan program;
    (2) the financial assistance program under Chapter 31,
    Human Resources Code;
    (3) the medical assistance program under Chapter 32,
    Human Resources Code, including long-term care services provided
    under the program; and
    (4) the food stamp program under Chapter 33, Human
Resources Code.
    (b) The commission shall improve the effectiveness of
    community outreach efforts with respect to benefits programs. To
    improve that effectiveness, the commission shall:
    (1) increase the capacity of existing outreach efforts
    implemented through community-based organizations by providing
    those organizations with adequate resources to:
    (A) educate the public about benefits programs;
    (B) provide assistance to the public in
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completing applications for eligibility or recertification of eligibility and obtaining required documentation for applications; and
(C) assist applicants in resolving problems encountered during the eligibility determination process; and
(2) establish a partnership with stakeholders who will provide outreach and application assistance by:
(A) fostering the exchange of information regarding, and promoting, best practices for obtaining health benefits coverage for children;
(B) assisting the commission in designing and implementing processes to reduce procedural denials under Section 531.474; and
(C) disseminating successful outreach models across this state under which entities such as hospitals, school districts, and local businesses partner to identify children without health benefits coverage.
(c) The partnership established under Subsection (b) (2) must include entities that contract with the commission to perform child health plan and medical assistance program eligibility determination and enrollment functions, community-based organizations that contract with the commission, health benefit plan providers, Texas Health Steps program contractors, health care providers, consumer advocates, and other interested stakeholders.
(d) The commission may also improve the effectiveness of community outreach efforts with respect to benefits programs by contracting with one or more persons to provide outreach and
application assistance for the programs. The commission shall require each potential contractor under this subsection to indicate the person's interest in writing before submitting a proposal for a contract. If more than one person from a geographic area determined by the commission submits a letter of interest, the commission shall encourage the persons from that area to collaborate on a proposal for a contract.
(e) To the extent practicable, the commission shall give preference in awarding contracts under Subsection (d) to proposals submitted by collaborations that include multiple entities with experience in serving a variety of populations, including populations that more commonly enroll in or receive benefits under benefits programs.

SECTION 2. Chapter 531, Government Code, is amended by adding Subchapter M-1 to read as follows:

SUBCHAPTER M-1. ELIGIBILITY DETERMINATION STREAMLINING AND IMPROVEMENT

Sec. 531.471. DEFINITIONS. In this subchapter: (1) "Benefits program" includes:
(A) the child health plan program;
(B) the financial assistance program under Chapter 31, Human Resources Code;
(C) the medical assistance program under Chapter 32, Human Resources Code, including long-term care services provided under the program; and
(D) the food stamp program under Chapter 33, Human Resources Code.
(2) "SAVERR" means the System of Application, Verification, Eligibility, Referral, and Reporting.
(3) "TIERS" means the Texas Integrated Eligibility Redesign System.

Sec. 531.472. APPLICATION PROCESSING STANDARDS AND PROCEDURES. (a) The executive commissioner by rule shall adopt for benefits programs:
(1) a methodology for establishing minimum levels of eligibility determination staff, qualifications for that staff, and the maximum caseload per staff person, that will ensure that:
(A) benefits program eligibility determinations are made within applicable processing time requirements established by state and federal law and are accurately made; and
(B) case appeals and enrollee recipient information changes are timely processed; and (2) in addition to streamlined administrative processes implemented under Section 531.02411, eligibility determination procedures that enhance efficiencies and eliminate unnecessary administrative requirements in making those determinations.
(b) In adopting the methodology and procedures required by Subsection (a), the executive commissioner must ensure that it is feasible, under both SAVERR and TIERS, evaluated separately, to achieve a goal of processing at least 95 percent of the applications and eligibility recertifications for benefits programs within the applicable processing time requirements established by state and federal law.
(c) The methodology for establishing staffing levels and staff qualifications and maximum caseloads adopted under Subsection (a) must apply with respect to all eligibility determination staff persons, regardless of whether those persons are state employees, contractors, or contractors' employees.

Sec. 531.473. CORRECTIVE ACTION PLAN. (a) The executive commissioner shall develop and implement a corrective action plan for application and eligibility recertification determination processes for benefits programs if, for three consecutive months:
(1) less than 90 percent of the applications or eligibility recertifications for benefits programs are accurately processed through SAVERR within the applicable processing time requirements established by state and federal law; or
(2) less than 90 percent of the applications or eligibility recertifications for benefits programs are accurately processed through TIERS within the applicable processing time requirements established by state and federal law.

## (b) A corrective action plan:

(1) must require the implementation of changes specifically designed to target the processing time or accuracy factors that required the implementation of the plan, which may include implementing changes with respect to contractors or changes to address TIERS defects or staff training; and
(2) may authorize the commission to take necessary actions to hire additional eligibility determination staff, including requesting that the Legislative Budget Board take action as provided by Chapter 317 to make money available for that purpose.

Sec. 531.474. REDUCTION OF PROCEDURAL DENIALS. (a) In this section, "procedural denial" includes:
(1) a denial of eligibility solely because information is missing from an application; and
(2) an automatic denial of eligibility because an enrollee or recipient, the parent or legal guardian of an enrollee or recipient, or an eligibility determination staff person or contractor fails to take necessary actions for recertification of eligibility.
(b) In consultation with the partnership with stakeholders established under Section 531.0992, the executive commissioner shall adopt, and the commission shall implement, processes designed to reduce to the lowest practicable level the incidence of procedural denials of eligibility for benefits programs.
(c) Processes adopted under Subsection (b) may include:
(1) providing specific instructions to applicants, enrollees, and recipients, or their parents or legal guardians, regarding acceptable documentation of income for purposes of an eligibility determination, including instructions for documenting income from part-time employment, contract employment, and income paid in cash or by personal check;
(2) contacting by telephone enrollees and recipients, or the parents and legal guardians of enrollees and recipients, who do not complete required forms for recertification of eligibility; and
(3) allowing an applicant, enrollee, or recipient, or the parent or legal guardian of an applicant, enrollee, or
recipient, a period to provide information that is missing from an application for an initial determination or recertification of eligibility and the lack of which would otherwise cause a procedural denial, instead of requiring the person to submit a new application.
(d) If the commission implements a telephone contact process as described by Subsection (c) (2), the contacts may be made by commission employees or by entities that contract with the commission.
(e) The commission shall specify the period during which missing information described by Subsection (c) (3) may be provided to avoid a procedural denial. The period may not be less than 10 business days after the date an applicant, enrollee, or recipient, or the parent or legal guardian of the applicant, enrollee, or recipient, is notified that the information is missing.

Sec. 531.475. CALL RESOLUTION STANDARDS. (a) The executive commissioner by rule shall adopt:
(1) telephone call resolution standards and processes for each call center established under Section 531.063 , including a call center operated by a contractor, to increase the percentage of telephone calls regarding questions, issues, or complaints received at call centers that are successfully resolved; and
(2) a process for receiving and resolving issues and complaints from a person who applies for an initial determination or recertification of eligibility for a benefits program, regardless of whether the person applied through a call center, a local eligibility determination office, or mail correspondence.
(b) Standards adopted under Subsection (a)(1) must specify the criteria by which the resolution of a telephone call received at a call center will be evaluated. The criteria may include hold times and call abandonment rates, but must include additional measures the executive commissioner determines appropriate.
(c) To be considered for a contract to operate a call center under Section 531.063, a person must include in the proposal for the contract a specific description of the means by which the person will ensure compliance with the standards adopted under Subsection (a)(1) if awarded the contract. Each contract entered into by the commission and a person to operate a call center must include terms regarding the means by which the contractor will ensure that compliance.

SECTION 3. Effective September 1, 2009, Section 32.0261, Human Resources Code, is amended to read as follows:

Sec. 32.0261. CONTINUOUS ELIGIBILITY. The department shall adopt rules in accordance with 42 U.S.C. Section 1396a(e)(12), as amended, to provide for a period of continuous eligibility for a child under 19 years of age who is determined to be eligible for medical assistance under this chapter. The rules shall provide that the child remains eligible for medical assistance, without additional review by the department and regardless of changes in the child's resources or income, until the earlier of:
(1) the first anniversary of [end of the six-month period followingl the date on which the child's eligibility was determined; or
(2) the child's 19th birthday.

SECTION 4. Section 531.475(c), Government Code, as added by this Act, applies to a proposal for a contract for the operation of a call center submitted, and a contract for the operation of a call center entered into or renewed, on or after September 1, 2009. A proposal for a contract submitted, or a contract entered into or renewed, before that date is governed by the law in effect on the date the proposal was submitted or the contract was entered into or renewed, and the former law is continued in effect for that purpose.

SECTION 5. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 6. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2009.

