Amend **SB 8** by adding the following appropriately numbered SECTIONS to the bill and renumbering subsequent SECTIONS of the bill accordingly:

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

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

(1) "CPT code" means the number assigned to identify a specific health care procedure performed by a health care provider under the American Medical Association's "Current Procedural Terminology 2011 Professional Edition" or a subsequent edition of that publication adopted by the executive commissioner of the Health and Human Services Commission by rule.

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

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

(4) "Service area" means the geographical area determined by the commission that is coterminous with one or more Medicaid service areas and in which the pilot project is established.

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

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

(2) simplify child health plan enrollment procedures.

(c) In establishing the pilot project under this section, the executive commissioner of the Health and Human Services <u>Commission shall:</u>

(1) for each service area, establish health care provider reimbursement rates for primary care services provided in lower-cost medical settings that are comparable to the federal Medicare program rates for the same or similar services; (2) identify CPT codes that represent primary care services for purposes of Subdivision (1);

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

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

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

(e) The commission shall provide at least one point of service contact in each county in the service area where trained personnel are available to personally assist interested individuals who reside in the service area with the application form and procedures for child health plan coverage.

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

(g) Not later than January 1, 2013, the commission shall submit an initial report to the governor, the lieutenant governor, the speaker of the house of representatives, and the presiding officers of the standing committees of the senate and house of representatives having primary jurisdiction over the child health plan program. The report must evaluate the operation of the pilot project and make recommendations regarding the continuation or expansion of the pilot project. The report must:

(1) state whether:

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

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

(C) the enrollment changes implemented under the

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## (i) reduced application processing delays

and procedural denials; and

(ii) affected reenrollment rates; and

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

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

(i) The executive commissioner of the Health and Human Services Commission shall adopt rules necessary to implement this section.

(j) This section expires January 1, 2015.

SECTION \_\_\_\_\_. (a) Subject to Subsection (b) of this section, not later than October 1, 2011, the Health and Human Services Commission shall establish the pilot project required under Section 62.160, Health and Safety Code, as added by this Act.

(b) 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.

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