

By: Paxton

H.B. No. 3053

A BILL TO BE ENTITLED

AN ACT

relating to efficiency in the delivery of health and human services.

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

SECTION 1. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.024115 to read as follows:

Sec. 531.024115. STREAMLINING OF FORMS AND RECORDS. (a)

The commission shall create any form necessary for the administration of the Medicaid program and may not contract with a private entity to provide the forms.

(b) The commission shall determine characteristics of cost-effective forms and procedures and use those characteristics to develop the forms under Subsection (a).

(c) A form developed under this section may not exceed 10 pages.

(d) The commission shall create a database for records storage to facilitate audit procedures and reduce costs associated with records management.

(e) The commission shall create a portal on the commission's Internet website designed to facilitate commerce, recordkeeping, communication, and information. The portal must be designed for use by patients, physicians, nurses, commission employees, and private entities.

SECTION 2. Chapter 531, Government Code, is amended by

1 adding Subchapter E-1 to read as follows:

2 SUBCHAPTER E-1. TASK FORCE TO IMPROVE HEALTH AND HUMAN SERVICES
3 EFFICIENCY

4 Sec. 531.181. DEFINITION. In this subchapter, "task force"
5 means the task force to improve health and human services
6 efficiency established under this subchapter.

7 Sec. 531.182. ESTABLISHMENT OF TASK FORCE. A task force is
8 established to develop strategies to improve health and human
9 services efficiency and to advise the legislature regarding those
10 strategies.

11 Sec. 531.183. MEMBERSHIP. The task force consists of at
12 least 16 members appointed as follows:

13 (1) a senator, appointed by the lieutenant governor,
14 as a co-chair of the task force;

15 (2) a member of the house of representatives,
16 appointed by the speaker of the house of representatives, as a
17 co-chair of the task force;

18 (3) three additional senators, appointed by the
19 lieutenant governor;

20 (4) three additional members of the house of
21 representatives, appointed by the speaker; and

22 (5) at least eight members appointed jointly by the
23 lieutenant governor and the speaker of the house of representatives
24 as follows:

25 (A) at least two representatives of the
26 commission, including at least one caseworker;

27 (B) at least two members who receive Medicaid

1 benefits either in their own names or on behalf of their children;

2 (C) at least two representatives of colleges or
3 universities; and

4 (D) at least two representatives of private
5 health care service providers that contract with the commission.

6 Sec. 531.184. VACANCY. Members of the task force serve at
7 the pleasure of the appointing officer or officers, and a vacancy on
8 the task force shall be filled in the same manner as the original
9 appointment.

10 Sec. 531.185. MEETINGS. Subject to the governor's
11 approval, the task force shall meet at the call of the co-chairs.

12 Sec. 531.186. COMPENSATION; REIMBURSEMENT. A task force
13 member is not entitled to compensation for service on the task force
14 but is entitled to reimbursement for necessary expenses incurred in
15 performance of the task force member's duties.

16 Sec. 531.187. ADMINISTRATIVE SUPPORT. The senate shall
17 provide administrative support services to the task force.

18 Sec. 531.188. TASK FORCE DUTIES. The task force shall
19 create proposals and provide recommendations, including fiscal
20 impact statements, regarding methods to save and conserve state
21 health and human services resources, foster and promote free
22 competitive enterprise among private health care service
23 providers, and enhance the ability of the executive branch of state
24 government to respond to the needs of parties involved in health
25 care administration.

26 Sec. 531.189. REPORT. The task force shall submit annual
27 reports to the governor and the legislature regarding the task

1 force's activities and recommendations.

2 SECTION 3. Subchapter B, Chapter 32, Human Resources Code,
3 is amended by adding Section 32.0521 to read as follows:

4 Sec. 32.0521. HOSPITAL LEVEL OF CARE WAIVER PROGRAM FOR
5 MEDICALLY FRAGILE INDIVIDUALS. (a) The department shall apply for
6 a waiver under Section 1915(c) of the federal Social Security Act
7 (42 U.S.C. Section 1396n(c)) to provide the state with the
8 flexibility to provide medical assistance services outside the
9 scope, amount, or duration of nonwaiver services available to
10 medically fragile individuals who are not more than 21 years of age
11 and who require a hospital level of care under the medical
12 assistance program.

13 (b) The waiver program under this section must include
14 coverage for case management services, attendant care services,
15 rehabilitation, respite and companion care services, private duty
16 nursing, medical equipment and supplies, home health care services,
17 and in-home support services.

18 (c) To ensure that services subject to this section are cost
19 neutral and not duplicative of other services provided under the
20 medical assistance program, the department shall coordinate the
21 provision of services subject to this section with services
22 provided under other federal waiver programs.

23 (d) The waiver program under this section must be designed
24 to permit a medically fragile individual who is not more than 21
25 years of age to apply for services through the waiver program
26 without enrolling in the Medically Dependent Children Program.

27 SECTION 4. (a) Rules relating to health and human services

1 shall be consolidated and reconsidered to ensure compliance with
2 this Act and recommendations of the task force established under
3 Subchapter E-1, Chapter 531, Government Code, as added by this Act.

4 (b) The Health and Human Services Commission shall suspend
5 the effective date of any rule adopted by the commission that has
6 not taken effect on the effective date of this Act.

7 (c) The executive commissioner of the Health and Human
8 Services Commission shall consult with the task force established
9 under Subchapter E-1, Chapter 531, Government Code, as added by
10 this Act, regarding reconsideration of any rule described by
11 Subsection (a) of this section for the purpose of streamlining
12 services administered by the commission and improving efficiency.

13 (d) The Health and Human Services Commission shall report to
14 the executive commissioner regarding any rule described by
15 Subsection (a) of this section that cannot be reconsidered together
16 with an explanation of the legal reasons the rule cannot be
17 reconsidered.

18 (e) Following consolidation and reconsideration in
19 accordance with this section, the Health and Human Services
20 Commission may adopt final rules on the following dates:

- 21 (1) January 1;
- 22 (2) April 1;
- 23 (3) July 1; and
- 24 (4) October 1.

25 (f) The Health and Human Services Commission shall make
26 every effort to consolidate the commission's rules regarding the
27 Medically Dependent Children Program. In consolidating the rules,

1 the commission must consider the needs of patients, physicians,
2 nurses, and home health agencies.

3 (g) To the extent this section conflicts with the
4 administrative procedure law, Chapter 2001, Government Code, this
5 section prevails.

6 SECTION 5. As soon as practicable after the effective date
7 of this Act, the lieutenant governor and the speaker of the house of
8 representatives shall appoint the members of the task force
9 established under Subchapter E-1, Chapter 531, Government Code, as
10 added by this Act.

11 SECTION 6. If before implementing any provision of this Act
12 a state agency determines that a waiver or authorization from a
13 federal agency is necessary for implementation of that provision,
14 the agency affected by the provision shall request the waiver or
15 authorization and may delay implementing that provision until the
16 waiver or authorization is granted.

17 SECTION 7. This Act takes effect September 1, 2011.