| **House Bill 335**  Senate Amendments  Section-by-Section Analysis | | |
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| HOUSE VERSION | SENATE VERSION (IE) | CONFERENCE |
| SECTION 1. Chapter 322, Government Code, is amended by adding Section 322.021 to read as follows:  Sec. 322.021. MANDATORY HEALTH CARE REFORM REPORTS FROM STATE AGENCIES. (a) In this section, "state agency" has the meaning assigned by Section 2056.001.  (b) A state agency may not implement a provision of a federal health care reform law described by Subsection (c) unless the state agency submits a report described by Subsection (d) to:  (1) the board;  (2) the governor;  (3) the lieutenant governor;  (4) the speaker of the house of representatives; and  (5) the appropriate standing legislative committees having jurisdiction over issues relating to health care reform.  (c) A state agency must submit a report described by Subsection (d) of an expenditure incurred in implementing a provision of a federal health care reform law if:  (1) the provision:  (A) requires a person to purchase health insurance or similar health coverage;  (B) requires an employer to provide health insurance or similar health coverage to or for employees;  (C) imposes a penalty on an employer who does not provide health insurance or similar health coverage to or for employees;  (D) expands eligibility for the state Medicaid program or state child health plan program;  (E) creates a health insurance coverage mandate affecting a person; or  (F) creates a new health insurance or similar health coverage program that is administered by this state or a political subdivision of this state; or  (2) the board, in the exercise of the board's duties under this chapter, determines that a report about the expenditure is necessary to a comprehensive and continuing review of a program or operation of a state agency.  (d) A report required under Subsection (b) must:  (1) cite the specific federal statute or regulation that requires the state to implement the provision;  (2) state whether the provision requires or allows a state waiver or option;  (3) describe the state action required to implement the provision;  (4) identify the individuals, legal entities, and state agencies that may be impacted by the implementation of or refusal to implement the provision; and  (5) estimate the cost to be incurred by the state to implement the provision. | SECTION 1. Chapter 322, Government Code, is amended by adding Section 322.021 to read as follows:  Sec. 322.021. MANDATORY HEALTH CARE REFORM REPORTS FROM STATE AGENCIES. (a) In this section, "state agency" has the meaning assigned by Section 2056.001.  (b) A state agency shall submit a report described by Subsection (d) to:  (1) the board;  (2) the governor;  (3) the lieutenant governor;  (4) the speaker of the house of representatives; and  (5) the appropriate standing legislative committees having jurisdiction over issues relating to health care reform.  (c) A state agency must submit a report described by Subsection (d) of an expenditure and revenue incurred in implementing a provision of a federal health care reform law if:  (1) the provision:  (A) requires a person to purchase health insurance or similar health coverage;  (B) requires an employer to provide health insurance or similar health coverage to or for employees;  (C) imposes a penalty on an employer who does not provide health insurance or similar health coverage to or for employees;  (D) expands eligibility for the state Medicaid program or state child health plan program;  (E) creates a health insurance coverage mandate affecting a person; or  (F) creates a new health insurance or similar health coverage program that is administered by this state or a political subdivision of this state; or  (2) the board, in the exercise of the board's duties under this chapter, determines that a report about the expenditure is necessary to a comprehensive and continuing review of a program or operation of a state agency.  (d) A report required under Subsection (b) must:  (1) cite the specific federal statute or regulation that requires the state to implement the provision;  (2) state whether the provision requires or allows a state waiver or option;  (3) describe the state action required to implement the provision;  (4) identify the individuals, legal entities, and state agencies that may be impacted by the implementation of or refusal to implement the provision;  (5) estimate the cost and savings to be incurred by the state to implement the provision; and  (6) describe the amount of federal funding the agency uses to fund agency operations, including each federal program from which the agency receives or is eligible to receive federal funding; and  (7) describe the amounts of any increases in federal funding, including matching funds, that would be available to the agency if state funding for agency operations were increased. [FA1;FA2(1)-(5)] |  |
| No equivalent provision. | SECTION \_\_. The changes in law made by Section 322.021, Government Code, as added by this Act, apply only to a provision of federal health care reform law implemented by a state agency on or after the effective date of this Act. A provision of federal health care reform law implemented by a state agency before the effective date of this Act is governed by the law as it existed immediately before the effective date of this Act, and that law is continued in effect for that purpose. [FA3] |  |
| SECTION 2. This Act takes effect September 1, 2011. | SECTION 2. Same as House version. |  |