

Amend CSSB 1 (house committee printing) by adding the following appropriately numbered provision under the Article II appropriations to the Health and Human Services Commission (page II-79) and renumbering subsequent provisions accordingly:

\_\_\_\_\_. Development of Plan to Create More Efficient Health Care Coverage Options for Persons Eligible for Medicaid; Use of Savings. (a) Notwithstanding any other provision of this Act, out of the funds appropriated to the Health and Human Services Commission in Goal B, Medicaid, for the state fiscal biennium beginning September 1, 2013, no amount may be expended to modify Medicaid eligibility unless the commission develops a plan to create more efficient health care coverage options for all existing and newly eligible populations and the commission receives prior written approval from the Legislative Budget Board before implementing the plan.

(b) Legislative Budget Board approval may not be granted unless the plan satisfactorily addresses, as determined by the board, the following principles;

- (1) the reduction of uncompensated costs;
- (2) the promotion of the use of existing private coverage and employer sponsored coverage;
- (3) the establishment of wellness initiatives;
- (4) the development of cost-sharing initiatives that require a recipient to pay a copayment, deductible, premium payment, or other cost-sharing payment;
- (5) the creation of pay-for-performance initiatives;
- (6) the creation of customized benefit plans for defined populations within Medicaid;
- (7) the promotion of health savings accounts;
- (8) the encouragement of individual responsibility;
- (9) the achievement of efficiency, including containing cost growth and improving the coordination of care within Medicaid;
- (10) the reduction of non-emergency visits to emergency rooms for patients who can access services in other settings; and
- (11) the reduction of the need to gain federal

approval for minor changes to the state Medicaid plan.

(c) If the Health and Human Services Commission modifies Medicaid eligibility in accordance with a plan developed under this section:

(1) the Legislative Budget Board shall calculate the estimated resulting savings in general revenue money appropriated by this Act in Articles II and IV and identify the agencies, goals, and strategies to which that money was appropriated; and

(2) notwithstanding Rider 12 following the appropriations to the Health and Human Services Commission or any other limitation on transfers in this Act, the amounts of money calculated by the Legislative Budget Board under Subdivision (1) are transferred from the identified agencies, goals, and strategies to the Texas Education Agency for the state fiscal biennium beginning September 1, 2013, for Strategy A.1.1, FSP - Equalized Operations, to increase the basic allotment under Section 42.101, Education Code, to the maximum extent possible.