

Amend CSSB 7 (house committee report) as follows:

(1) On page 30, line 23, strike "Subsection (a)" and substitute "Subsections (a) and (b)".

(2) Between page 30, line 27, and page 31, line 1, insert the following:

(b) Except as otherwise provided by this section and notwithstanding any other law, the commission shall provide medical assistance for acute care services through the most cost-effective model of Medicaid capitated managed care as determined by the commission. The [If the] commission shall require mandatory participation in a Medicaid capitated managed care program for all persons eligible for acute care [determines that it is more cost-effective, the commission may provide] medical assistance benefits, but may implement alternative models or arrangements, including a traditional fee-for-service arrangement, if the commission determines the alternative would be more cost-effective or efficient [for acute care in a certain part of this state or to a certain population of recipients using:

[(1) a health maintenance organization model,
including the acute care portion of Medicaid Star + Plus pilot
programs,

[(2) a primary care case management model,

[(3) a prepaid health plan model,

[(4) an exclusive provider organization model, or

[(5) another Medicaid managed care model or
arrangement].

(3) Add the following appropriately numbered SECTION to ARTICLE 2 of the bill and renumber subsequent SECTIONS of the ARTICLE appropriately:

SECTION 2.____. Section 32.0212, Human Resources Code, is amended to read as follows:

Sec. 32.0212. DELIVERY OF MEDICAL ASSISTANCE. Notwithstanding any other law and subject to Section 533.0025, Government Code, the department shall provide medical assistance for acute care services through the Medicaid managed care system implemented under Chapter 533, Government Code, or another Medicaid capitated managed care program.