

BILL ANALYSIS

H.B. 1605
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Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Texas currently has many underserved populations within the state's health care infrastructure, and among those are pregnant women. According to interested parties, emergency rooms and neonatal intensive care units continue to see a rise in their utilization by pregnant women. The parties suggest that creation of pregnancy medical homes, in which a patient has access to a variety of medical specialists needed to provide comprehensive prenatal and postpartum care, would help address this issue. H.B. 1605 aims to ensure healthy pregnancies in Texas by creating a women's pregnancy medical home pilot program.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 of this bill.

ANALYSIS

H.B. 1605 amends the Government Code to add temporary provisions, set to expire September 1, 2017, to require the Health and Human Services Commission (HHSC) to develop and implement a pilot program in Harris County to create pregnancy medical homes that provide coordinated evidence-based maternity care management to women who reside in the pilot program area and are recipients of medical assistance through a Medicaid managed care model or arrangement under the Medicaid managed care program. The bill requires HHSC, in developing the pilot program, to ensure that each pregnancy medical home created for the program provides a maternity management team that consists of health care providers, including obstetricians, gynecologists, family physicians, physician assistants, certified nurse midwives, nurse practitioners, and social workers in a single location; that conducts a risk-classification assessment for each pilot program participant on entry into the program to determine whether her pregnancy is considered high- or low-risk; that establishes an individual pregnancy care plan for each participant based on such assessment; and that follows the participant throughout her pregnancy in order to reduce poor birth outcomes. The bill authorizes HHSC to incorporate financial incentives to health care providers who participate in a maternity management team as a component of the pilot program.

H.B. 1605 requires HHSC to report to the legislature on the progress of the pilot program not later than January 1, 2015, and requires the report to include an evaluation of the pilot program's success in reducing poor birth outcomes and a recommendation as to whether the pilot program should be continued, expanded, or terminated. The bill authorizes the executive commissioner of HHSC to adopt rules to implement the bill's provisions.

EFFECTIVE DATE

September 1, 2013.