

1-1 By: Schwertner S.B. No. 1808
 1-2 (In the Senate - Filed March 8, 2013; March 18, 2013, read
 1-3 first time and referred to Committee on Finance; April 29, 2013,
 1-4 reported adversely, with favorable Committee Substitute by the
 1-5 following vote: Yeas 9, Nays 3; April 29, 2013, sent to printer.)

1-6 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-7 Williams	X			
1-8 Hinojosa		X		
1-9 Deuell	X			
1-10 Duncan			X	
1-11 Eltife	X			
1-12 Estes	X			
1-13 Hegar	X			
1-14 Huffman	X			
1-15 Lucio		X		
1-16 Nelson	X			
1-17 Patrick	X			
1-18 Seliger	X			
1-19 West			X	
1-20 Whitmire			X	
1-21 Zaffirini		X		

1-23 COMMITTEE SUBSTITUTE FOR S.B. No. 1808 By: Huffman

1-24 A BILL TO BE ENTITLED
 1-25 AN ACT

1-26 relating to the cost effects of expanding eligibility for medical
 1-27 assistance under the federal Patient Protection and Affordable Care
 1-28 Act.

1-29 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-30 SECTION 1. Subchapter B, Chapter 32, Human Resources Code,
 1-31 is amended by adding Section 32.02473 to read as follows:

1-32 Sec. 32.02473. COST EFFECTS OF EXPANDED ELIGIBILITY FOR
 1-33 MEDICAL ASSISTANCE UNDER PATIENT PROTECTION AND AFFORDABLE CARE
 1-34 ACT. (a) In this section, "commission" means the Health and Human
 1-35 Services Commission.

1-36 (b) If the commission expands eligibility for medical
 1-37 assistance in accordance with and provides medical assistance using
 1-38 federal matching funds made available under the Patient Protection
 1-39 and Affordable Care Act (Pub. L. No. 111-148), as amended by the
 1-40 Health Care and Education Reconciliation Act of 2010 (Pub. L. No.
 1-41 111-152), the commission, in cooperation with the comptroller and
 1-42 Legislative Budget Board, shall conduct a study regarding the cost
 1-43 effects of that expanded eligibility. The study must identify:

1-44 (1) the estimated amount of uncompensated care costs
 1-45 the state will save each state fiscal year by expanding that
 1-46 eligibility;

1-47 (2) the estimated amount of health care costs hospital
 1-48 districts and counties in this state will save each state fiscal
 1-49 year by expanding that eligibility; and

1-50 (3) the estimated reduction in uncompensated care
 1-51 costs to hospital districts and counties that will result from the
 1-52 expansion of medical assistance eligibility and that would
 1-53 otherwise be paid from hospital district and county tax revenue.

1-54 (c) The commission shall ensure that cost savings
 1-55 identified under Subsection (b)(1) are reflected in each biennial
 1-56 legislative appropriations request submitted to the Legislative
 1-57 Budget Board by the commission or a health and human services
 1-58 agency.

1-59 (d) In preparing a general appropriations bill as required
 1-60 by Section 322.008, Government Code, the Legislative Budget Board

2-1 shall ensure that any proposed appropriation for providing health
2-2 care to residents of this state reflects the cost savings
2-3 identified under Subsection (b)(1) and the legislative
2-4 appropriations requests prepared in accordance with Subsection
2-5 (c).

2-6 SECTION 2. Chapter 26, Tax Code, is amended by adding
2-7 Section 26.0442 to read as follows:

2-8 Sec. 26.0442. TAX RATE ADJUSTMENT FOR EXPANDED ELIGIBILITY
2-9 FOR MEDICAL ASSISTANCE UNDER PATIENT PROTECTION AND AFFORDABLE CARE
2-10 ACT. In the first tax year in which a hospital district or a county
2-11 adopts a tax rate and in which the state expands eligibility for
2-12 medical assistance in accordance with and provides medical
2-13 assistance using federal matching funds made available under the
2-14 Patient Protection and Affordable Care Act (Pub. L. No. 111-148),
2-15 as amended by the Health Care and Education Reconciliation Act of
2-16 2010 (Pub. L. No. 111-152), the effective tax rate and the rollback
2-17 tax rate for the hospital district or the county are decreased by
2-18 the rate that, if applied to current total value, would impose an
2-19 amount of taxes equal to the reduction in uncompensated care costs
2-20 realized by the hospital district or county as identified under
2-21 Section 32.02473(b)(3), Human Resources Code, that will result from
2-22 the provision of that assistance.

2-23 SECTION 3. (a) Not later than the first anniversary of the
2-24 effective date of expanded eligibility criteria implemented in
2-25 accordance with the Patient Protection and Affordable Care Act
2-26 (Pub. L. No. 111-148), as amended by the Health Care and Education
2-27 Reconciliation Act of 2010 (Pub. L. No. 111-152), for the Medicaid
2-28 program, the Health and Human Services Commission, in cooperation
2-29 with the comptroller of public accounts and the Legislative Budget
2-30 Board, shall complete the study required under Subsection (b),
2-31 Section 32.02473, Human Resources Code, as added by this Act.

2-32 (b) Subsections (c) and (d), Section 32.02473, Human
2-33 Resources Code, as added by this Act, apply only to legislative
2-34 appropriations requests and general appropriations bills,
2-35 respectively, prepared on or after the date the Health and Human
2-36 Services Commission completes the study required under Subsection
2-37 (b), Section 32.02473, Human Resources Code, as added by this Act.

2-38 SECTION 4. If before implementing any provision of this Act
2-39 a state agency determines that a waiver or authorization from a
2-40 federal agency is necessary for implementation of that provision,
2-41 the agency affected by the provision shall request the waiver or
2-42 authorization and may delay implementing that provision until the
2-43 waiver or authorization is granted.

2-44 SECTION 5. This Act takes effect September 1, 2013.

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