

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION

April 8, 2013

TO: Honorable John T. Smithee, Chair, House Committee on Insurance

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2129 by Zerwas (Relating to information about private health care insurance coverage and the health insurance exchange for individuals applying for certain Department of State Health Services programs and services.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would implement a recommendation in the report, "Maximize the Use of Private Health Insurance Coverage for Certain Clients Served by the Department of State Health Services," in the Legislative Budget Board's Government Effectiveness and Efficiency Report, submitted to the Eighty-third Texas Legislature, 2013.

The bill would amend Chapter 1001 of the Texas Health and Safety Code to prohibit the Department of State Health Services (DSHS) from providing a health or mental health program or service described in subsection (b) of the bill to an individual, unless the individual or the individual's legally authorized representative attests that the he or she does not have access to private health care insurance coverage that provides benefits for the services provided under the program or service. DSHS may waive the prohibition for an individual or for a mental health program or service if the department determines that the program or service is necessary during a crisis or emergency.

The bill would also require DSHS to develop and distribute informational materials regarding health care insurance coverage and subsidies available under a health insurance exchange. This information must be distributed to individuals, or their legally authorized representatives, who apply to receive a health or mental health program or service described in Section 1001.080(b) of the bill, and who has an income above 100 percent of the federal poverty level. The executive commissioner shall adopt rules necessary to implement the provisions of the bill.

Based on the LBB's analysis of DSHS duties and responsibilities associated with implementing the provisions of the bill, the bill's requirements could be accomplished by utilizing existing agency resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 537 State Health Services, Department of

LBB Staff: UP, AG, MH, ACI