

Amend CSHB 1 (house committee report) in Article II of the bill, immediately following the appropriations to the Health and Human Services Commission, by adding the following appropriately numbered rider and renumbering subsequent riders appropriately:

____. Health Homes and Health Teams: Amendment to State Medicaid Plan. (a) It is the intent of the legislature that using funds appropriated above in Strategy B.3.1, Medicaid Contracts and Administration (page II-72), the Health and Human Services Commission seek to amend the Medicaid state plan amendment under Section 1945, Social Security Act (42 U.S.C. Section 1396w-4), to authorize Medicaid reimbursement for patient-centered health home services rendered by health teams designated as providers by individuals who are eligible for services under that section and also for benefits under the existing state Medicaid program. Additionally, it is the intent of the legislature that among this eligible population, persons who are homeless, at risk of homelessness, residents of permanent supportive housing or recognized as high-users of emergency care services be given specific consideration in the design and outreach of the state plan amendment authorized under this subsection.

(b) Contingent on federal approval of a state plan amendment under Subsection (a) of this section and the prior written approval from the governor and the Legislative Budget Board, the Health and Human Services Commission may use funds appropriated above in Strategy B.1.2, Disability-related Eligibility Group (page II-71), to provide services under the state plan amendment.

(c) To request approval under Subsection (b) of this section, the Health and Human Services Commission shall submit a written request to the governor and the Legislative Budget Board, and provide a copy of the request to the comptroller. The request must include:

(1) a copy of the federal approval of the state plan amendment authorized under Subsection (a) of this section;

(2) the estimated number of health teams that will provide services;

(3) the estimated fiscal impact for each fiscal year of the fiscal biennium beginning September 1, 2015, including the

impact on methods of finance the implementation of the amendment will have on services and providers in the Medicaid program, including any projected savings anticipated from implementation of the amendment; and

(4) an estimate of provider performance levels and, where relevant, a comparison to performance targets specified in this Act.

(d) The Legislative Budget Board shall review a request submitted under Subsection (c) of this section and deliver the board's analysis to the governor, the lieutenant governor, the chair of the House Appropriations Committee, the chair of the Senate Finance Committee, and the speaker of the house of representatives. A request is considered approved unless the board or the governor issues a written disapproval not later than the 15th business day after the date the board delivers its analysis under this subsection.