BILL ANALYSIS

Senate Research Center 84R15689 CJC-F H.B. 3433 By: Sheffield et al. (Kolkhorst) Health & Human Services 5/15/2015 Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Concerns have been raised that recent legislation establishing hospital level of care designations for neonatal and maternal care has resulted in some unintended consequences for hospitals in rural areas of Texas. Interested parties contend that, while rural hospitals welcome efforts to enhance the care they provide, these hospitals have always faced a struggle in finding a balance between what is realistic, practical, and achievable with available resources. A number of rural hospitals report that they have experienced incredible difficulty in attempting to comply with certain rules regarding these designations, and some hospitals have even indicated that they may be forced to stop offering obstetrics services altogether. The parties argue that these consequences go against the original intent of the legislation and that additional representation on the Perinatal Advisory Council from providers in rural areas would help to clarify the situation. H.B. 3433 seeks to address this issue.

H.B. 3433 amends current law relating to level of care designations for hospitals that provide neonatal and maternal care.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Sections 241.187(b), (d), and (j), Health and Safety Code, as added by Chapter 217 (H.B. 15), Acts of the 83rd Legislature, Regular Session, 2013, as follows:

(b) Provides that the Perinatal Advisory Council (advisory council) consists of 19 members, rather than 17 members, appointed by the executive commissioner of Health and Human Services Commission (executive commissioner) as follows:

(1)-(4) Makes no change to these subdivisions;

(5) two physicians, rather than one physician, licensed to practice medicine under Subtitle B (Physicians), Title 3, Occupations Code, specializing in family practice who provide obstetrical care in a rural community, at least one of whom must provide such care at a hospital that has 50 or fewer patient beds and that is:

(A) located in a county with a population of 60,000 or less; or

(B) designated by the Centers for Medicare and Medicaid Services as a critical access hospital, rural referral center, or sole community hospital;

Makes a nonsubstantive change.

(6)-(9) Makes no change to these subdivisions;

(10) two representatives, rather than one representative, from a rural hospital, at least one of whom must be an administrative representative from a hospital that has 50 or fewer patient beds and that is:

- (A) located in a county with a population of 60,000 or less; or
- (B) designated by the Centers for Medicare and Medicaid Services as a critical access hospital, rural referral center, or sole community hospital;
- (11) and (12) Makes no changes to these subdivisions.

(d) Provides that members of the advisory council described by Subsections (b)(1)-(11) serve staggered three-year terms, with the terms of six of those members, rather than five or six of those members, expiring September 1 of each year. Authorizes a member to be reappointed to the advisory council.

(j) Requires the advisory council to submit a report detailing the advisory council's determinations and recommendations to the department and the executive commissioner not later than September 1, 2016, rather than September 1, 2015.

SECTION 2. Requires the executive commissioner to appoint the additional member described by Section 241.187(b)(5), Health and Safety Code, to an initial term that expires September 1, 2019, and the additional member described by Section 241.187(b)(10), Health and Safety Code, to an initial term that expires September 1, 2017, notwithstanding Section 241.187 (Perinatal Advisory Council), Health and Safety Code, as added by Chapter 217 (H.B. 15), Acts of the 83rd Legislature, Regular Session, 2013, and as amended by this Act, of the two additional persons appointed to the Perinatal Advisory Council by this Act. Requires the executive commissioner to make the appointments not later than October 1, 2015.

SECTION 3. Provides that, notwithstanding Section 2, Chapter 217 (H.B. 15), Acts of the 83rd Legislature, Regular Session, 2013:

(1) Requires the executive commissioner to adopt the initial rules required by Section 241.183, Health and Safety Code, as added by Chapter 217 (H.B. 15), Acts of the 83rd Legislature, Regular Session, 2013, not later than March 1, 2018, after consideration of the report of the Perinatal Advisory Council;

(2) Requires the executive commissioner to complete for each hospital in this state:

(A) the neonatal level of care designation not later than August 31, 2018; and

(B) the maternal level of care designation not later than August 31, 2020; and

(3) Provides that a hospital is not required to have:

(A) a neonatal level of care designation as a condition of reimbursement for neonatal services through the Medicaid program before September 1, 2018; and

(B) a maternal level of care designation as a condition of reimbursement for maternal services through the Medicaid program before September 1, 2020.

SECTION 4. Requires the agency affected by the provision to request the waiver or authorization and authorizes it to delay implementing that provision until the waiver or authorization is granted, if before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision.

SECTION 5. Effective date: upon passage or September 1, 2015.