

By: Laubenberg

H.B. No. 3445

A BILL TO BE ENTITLED

AN ACT

relating to implementing certain incentives and cost-sharing requirements under the Medicaid program.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.098 to read as follows:

Sec. 531.098. INCENTIVES TO PROMOTE HEALTHY BEHAVIORS. (a) If the commission determines that it is feasible and cost-effective, the commission shall develop and implement incentives to encourage Medicaid recipients to engage in healthy behaviors.

(b) Incentives implemented under Subsection (a) may include enhanced benefit accounts, health opportunity accounts, health savings accounts, or other similar rewards accounts that allow Medicaid recipients who engage in prescribed health-related activities to earn credits to the accounts that may be used to obtain additional benefits.

SECTION 2. Section [32.0641](#), Human Resources Code, is amended by amending Subsection (a) and adding Subsection (a-1) to read as follows:

(a) To the extent permitted under and in a manner that is consistent with Title XIX, Social Security Act (42 U.S.C. Section 1396 et seq.), and any other applicable law or regulation or under a federal waiver or other authorization, the executive commissioner

1 of the Health and Human Services Commission shall adopt, after
2 consulting with the Medicaid and CHIP Quality-Based Payment
3 Advisory Committee established under Section 536.002, Government
4 Code, cost-sharing provisions that encourage personal
5 accountability and appropriate utilization of health care
6 services.

7 (a-1) The executive commissioner of the Health and Human
8 Services Commission shall seek to adopt [~~, including~~] a
9 cost-sharing provision under this section that requires
10 [~~applicable to~~] a recipient who chooses to receive a nonemergency
11 medical service through a hospital emergency room to pay a
12 copayment or premium payment for the high-cost medical service if:

13 (1) the hospital from which the recipient seeks
14 service:

15 (A) performs an appropriate medical screening
16 and determines that the recipient does not have a condition
17 requiring emergency medical services;

18 (B) informs the recipient:

19 (i) that the recipient does not have a
20 condition requiring emergency medical services;

21 (ii) that, if the hospital provides the
22 nonemergency service, the hospital may require payment of a
23 copayment, premium payment, or other cost-sharing payment by the
24 recipient in advance; and

25 (iii) of the name and address of a
26 nonemergency Medicaid provider who can provide the appropriate
27 medical service without imposing a cost-sharing payment; and

1 (C) offers to provide the recipient with a
2 referral to the nonemergency provider to facilitate scheduling of
3 the service; and

4 (2) after receiving the information and assistance
5 described by Subdivision (1) from the hospital, the recipient
6 chooses to obtain emergency medical services despite having access
7 to medically acceptable, lower-cost medical services.

8 SECTION 3. If before implementing any provision of this Act
9 a state agency determines that a waiver or authorization from a
10 federal agency is necessary for implementation of that provision,
11 the agency affected by the provision shall request the waiver or
12 authorization and may delay implementing that provision until the
13 waiver or authorization is granted.

14 SECTION 4. This Act takes effect September 1, 2015.