By: Garcia S.B. No. 1475

A BILL TO BE ENTITLED

1	AN ACT
2	relating to establishing an enhanced Medicaid managed care consumer
3	support system.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Subchapter B, Chapter 531, Government Code, is
6	amended by adding Section 531.02132 to read as follows:
7	Sec. 531.02132. MEDICAID MANAGED CARE CONSUMER SUPPORT
8	SYSTEM. (a) In this section, "enhanced system" means the Medicaid
9	managed care consumer support system established by this section.
10	(b) The commission shall develop and establish an enhanced
11	Medicaid managed care consumer support system consisting of a
12	connected network of Medicaid managed care consumer support staff
13	that is organized for the purpose of:
14	(1) educating Medicaid managed care recipients
15	regarding:
16	(A) the concept of managed care;
17	(B) their rights under the Medicaid program,
18	including grievance and appeal procedures; and
19	(C) how to advocate for themselves; and
20	(2) ultimately reducing the need for the internal
21	appeals process of managed care organizations under the Medicaid
22	program and for the Medicaid fair hearing process.
23	(c) The enhanced system must be designed to:
24	(1) be fully integrated with:

1	(A) the unit of the commission's office of the
2	ombudsman responsible for providing the Medicaid Managed Care
3	Helpline; and
4	(B) the office of the state long-term care
5	ombudsman established under Chapter 101, Human Resources Code;
6	(2) include specialized capacity to meet the needs of
7	all current and future Medicaid managed care recipients, including
8	children receiving dental benefits and other recipients receiving
9	benefits, under the:
10	(A) STAR Medicaid managed care program;
11	(B) STAR + PLUS Medicaid managed care program,
12	including the Texas Dual Eligibles Integrated Care Demonstration
13	Project provided under that program;
14	(C) STAR Kids managed care program established
15	under Section 533.00253;
16	(D) STAR Health program; and
17	(E) child health plan established under Chapter
18	62, Health and Safety Code;
19	(3) include adequate staffing to support timely access
20	to the enhanced system by all Medicaid managed care recipients in
21	this state;
22	(4) ensure that the enhanced system staff:
23	(A) receives sufficient training, including
24	training in the Medicare program for the purpose of assisting
25	recipients who are dually eligible for Medicare and Medicaid, and
26	has sufficient authority to resolve barriers experienced by
27	recipients to health care and long-term services and supports;

1	(B) has the capacity to actively refer recipients
2	to community-based organizations that can assist the recipients
3	with the appeals process, including preparation for appeals and
4	representation, as needed, whether the appeal is an internal
5	appeal provided by a managed care organization or an appeal under
6	the Medicaid fair hearing process;
7	(C) is locally accessible through satellite
8	offices in a network of regional hub sites with at least one office
9	in each Medicaid managed care service area, patterned after similar
10	satellite offices operated by:
11	(i) the following partners in the Health
12	Information, Counseling, and Advocacy Program:
13	(a) area agencies on aging; and
14	(b) aging and disability resource
15	centers established under the Aging and Disability Resource Center
16	initiative funded in part by the federal Administration on Aging
17	and the Centers for Medicare and Medicaid Services; and
18	(ii) the office of the state long-term care
19	ombudsman; and
20	(D) has ready access to the upper management of
21	the commission and managed care organizations participating in the
22	Medicaid program that will enable staff to promptly identify and
23	resolve both recipient-specific and systemic issues; and
24	(5) include an advisory interface with nonprofit,
25	community-based organizations that routinely assist recipients in
26	resolving Medicaid managed care issues, for purposes of timely
27	identifying recurring systemic issues

- 1 (d) Enhanced system staff may include the employees of
- 2 appropriate health and human services agencies and the staff of
- 3 appropriate community partners under contract with the state.
- 4 (e) The commission's office of the ombudsman, or other
- 5 division of the commission in which the enhanced system is
- 6 established, must be:
- 7 (1) sufficiently independent from other aspects of the
- 8 Medicaid managed care system and have no financial interest in the
- 9 outcome of recipient grievances; and
- 10 (2) empowered to represent the best interests of
- 11 recipients in problem resolution.
- 12 (f) The enhanced system staff shall collect and maintain
- 13 <u>statistical information on a Medicaid managed care service area</u>
- 14 basis and publish quarterly reports that:
- 15 (1) track the incidence of complaints and barriers
- 16 <u>identified by the enhanced system;</u>
- 17 (2) identify trends and recurring barriers in delivery
- 18 and access to Medicaid managed care in this state; and
- 19 (3) identify other problems occurring in the Medicaid
- 20 managed care system.
- 21 SECTION 2. Not later than January 1, 2016, the Health and
- 22 Human Services Commission shall establish the Medicaid managed care
- 23 consumer support system required under Section 531.02132,
- 24 Government Code, as added by this Act.
- 25 SECTION 3. If before implementing any provision of this Act
- 26 a state agency determines that a waiver or authorization from a
- 27 federal agency is necessary for implementation of that provision,

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- 1 the agency affected by the provision shall request the waiver or
- 2 authorization and may delay implementing that provision until the
- 3 waiver or authorization is granted.
- 4 SECTION 4. This Act takes effect immediately if it receives
- 5 a vote of two-thirds of all the members elected to each house, as
- 6 provided by Section 39, Article III, Texas Constitution. If this
- 7 Act does not receive the vote necessary for immediate effect, this
- 8 Act takes effect September 1, 2015.