

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 12, 2015

TO: Honorable Myra Crownover, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: **HB3476** by Coleman (Relating to the provision and reimbursement of home telemonitoring services, telemedicine medical services, and telehealth services under the Medicaid program.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would add elderly individuals 60 years of age or older and individuals with a chronic physical or developmental condition or a terminal illness to those eligible to receive home telemonitoring services. Current law directs HHSC to provide home telemonitoring if cost effective and feasible. It is assumed that any additional services provided to newly eligible individuals as authorized by the bill would only be provided if HHSC determines it would be cost effective to do so, and therefore no significant fiscal impact is anticipated to the state.

The bill would also require the Health and Human Services Commission (HHSC) to develop and implement a pilot project under the state Medicaid program that provides for the reimbursement of telemedicine medical services and telehealth services provided in recipient's home, nursing home, convalescent home or residential unit. This section requires HHSC to establish the statewide program by rule if HHSC determines that it would be cost-effective and feasible. The section requires HHSC to submit a report to the legislature on the results of the pilot project no later than December 1, 2016. The bill leaves discretion as to the size, scope, duration, and design of the pilot to the agency. Given that telehealth and telemedicine services could offset the cost of other services, such as non-emergency medical transportation, it is assumed HHSC could develop a pilot program that could be executed within existing resources.

The bill would also require HHSC to prepare a report on telemedicine medical services billing procedures to the legislative committees no later than December 1 of each even-numbered year. It is assumed this report could be developed using existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission

LBB Staff: UP, NB, JJ, JQ, LR