House Bill 3519 Senate Amendments

Section-by-Section Analysis

HOUSE VERSION

SENATE VERSION (CS)

No equivalent provision.

CONFERENCE

SECTION 1. Section 531.02164, Government Code, is amended by amending Subsection (c), as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, and adding Subsections (c-1) and (c-2) to read as follows: (c) The program required under this section must: (1) provide that home telemonitoring services are available only to a person [persons] who: (A) is [are] diagnosed with one or more of the following conditions: (i) pregnancy; (ii) diabetes; (iii) heart disease; (iv) cancer; (v) chronic obstructive pulmonary disease; (vi) hypertension; (vii) congestive heart failure; (viii) mental illness or serious emotional disturbance; (ix) asthma; (x) myocardial infarction; [or] (xi) stroke; or [and] (xii) another condition for which the commission makes an evidence-based determination that monitoring through the use of home telemonitoring services is cost-effective and feasible; and exhibits [exhibit] two or more of the following risk (B) factors: (i) two or more hospitalizations in the prior 12-month period; (ii) frequent or recurrent emergency room admissions; (iii) a documented history of poor adherence to ordered medication regimens;

(iv) a documented history of falls in the prior six-month period;

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(v) limited or absent informal support systems;

(vi) living alone or being home alone for extended periods of time; and

(vii) a documented history of care access challenges;

(2) ensure that clinical information gathered by a home and community support services agency or hospital while providing home telemonitoring services is shared with the patient's physician; [and]

(3) ensure that the program does not duplicate disease management program services provided under Section 32.057, Human Resources Code<u>; and</u>

(4) provide reimbursement for home telemonitoring services in the event of an unsuccessful data transmission if the provider of the services attempts to communicate with the patient by telephone or in person to establish a successful data transmission.

(c-1) Notwithstanding Subsection (c)(1), the program required under this section must also provide that home telemonitoring services are available to a pediatric patient with chronic or complex medical needs who:

(1) is being concurrently treated by at least three medical specialists;

(2) is medically dependent on technology;

(3) is diagnosed with end-stage solid organ disease; or

(4) requires mechanical ventilation.

(c-2) A provider that is reimbursed under Subsection (c)(4) for home telemonitoring services provided to a patient may not also be reimbursed for communicating with the patient by telephone or in person to establish a successful data transmission as described by Subsection (c)(4).

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HOUSE VERSION

SECTION 2. Section 531.02176, Government Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows: Sec. 531.02176. EXPIRATION OF MEDICAID REIMBURSEMENT FOR PROVISION OF HOME TELEMONITORING SERVICES. Notwithstanding any other law, the commission may not reimburse providers under Medicaid for the provision of home telemonitoring services on or after September 1, 2021 [2015].

SECTION 3. As soon as practicable after the effective date of this Act, the executive commissioner of the Health and Human Services Commission shall adopt necessary rules to implement the changes in law made by this Act.

SECTION 4. 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, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 5. This Act takes effect September 1, 2015.

SENATE VERSION (CS)

SECTION 1. Section 531.02176, Government Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows: Sec. 531.02176. EXPIRATION OF MEDICAID REIMBURSEMENT FOR PROVISION OF HOME TELEMONITORING SERVICES. Notwithstanding any other law, the commission may not reimburse providers under Medicaid for the provision of home telemonitoring services on or after September 1, 2019 [2015].

No equivalent provision.

SECTION 2. Same as House version.

SECTION 3. Same as House version.

CONFERENCE