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| BILL ANALYSIS |

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| C.S.H.B. 1225 |
| By: Smithee |
| Public Health |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE** Interested parties contend that there is currently a shortage of primary care providers across Texas, specifically for Medicaid populations. These parties have also expressed confusion regarding whether managed care plans may credential advanced practice registered nurses when the nurse's delegating physician is not an in-network provider. C.S.H.B. 1225 seeks to address these issues by authorizing certain health plans to include these nurses as primary care providers in an applicable entity's provider network, regardless of whether the physician supervising the nurse is in the entity’s provider network. |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS** C.S.H.B. 1225 amends the Government Code to clarify, for purposes of a required provision of a Medicaid managed care contract between a managed care organization and the Health and Human Services Commission (HHSC) relating to the organization's use of advanced practice registered nurses as primary care providers, that an advanced practice registered nurse may be included as a primary care provider in the organization's provider network regardless of whether the physician supervising the advanced practice registered nurse is in the provider network. The bill prohibits this provision from being construed as authorizing a managed care organization to supervise or control the practice of medicine as prohibited by the Medical Practice Act.C.S.H.B. 1225 amends the Health and Safety Code to clarify, for purposes of rules adopted by the executive commissioner of HHSC under statutory provisions governing the child health plan to require a managed care organization or other entity to ensure that advanced practice registered nurses are available as primary care providers in the organization's or entity's provider network, that an advanced practice registered nurse may be included as a primary care provider in the organization's or entity's provider network regardless of whether the physician supervising the advanced practice registered nurse is in the provider network. The bill prohibits this provision from being construed as authorizing a managed care organization or other entity to supervise or control the practice of medicine as prohibited by the Medical Practice Act. C.S.H.B. 1225 amends the Human Resources Code to clarify that advanced practice registered nurses may be selected by and assigned to recipients of Medicaid benefits as the primary care providers of those recipients regardless of whether the physician supervising the advanced practice registered nurse is included in any directory of Medicaid providers maintained by HHSC. The bill prohibits this provision from being construed as authorizing HHSC to supervise or control the practice of medicine as prohibited by the Medical Practice Act.  |
| **EFFECTIVE DATE** September 1, 2017. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE**While C.S.H.B. 1225 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill. |
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| INTRODUCED | HOUSE COMMITTEE SUBSTITUTE |
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| SECTION 1. Section 533.005, Government Code, is amended. | SECTION 1. Same as introduced version. |
| SECTION 2. Section 62.1551, Health and Safety Code, is amended. | SECTION 2. Same as introduced version. |
| SECTION 3. Section 32.024(gg), Human Resources Code, is amended. | SECTION 3. Same as introduced version. |
| SECTION 4. Subchapter I, Chapter 843, Insurance Code, is amended by adding Section 843.3125 to read as follows:Sec. 843.3125. CONTRACTS WITH ADVANCED PRACTICE REGISTERED NURSES. (a) A health maintenance organization may contract directly with an advanced practice registered nurse to provide health care services on behalf of the health maintenance organization regardless of whether the physician supervising the advanced practice registered nurse provides health care services for the health maintenance organization.(b) This section may not be construed as authorizing a health maintenance organization to supervise or control the practice of medicine as prohibited by Subtitle B, Title 3, Occupations Code. | No equivalent provision. |
| SECTION 5. Subchapter B, Chapter 1301, Insurance Code, is amended by adding Section 1301.0525 to read as follows:Sec. 1301.0525. DESIGNATION OF ADVANCED PRACTICE REGISTERED NURSES AS PREFERRED PROVIDERS. (a) An insurer offering a preferred provider benefit plan may designate an advanced practice registered nurse as a preferred provider regardless of whether the physician supervising the advanced practice registered nurse is a preferred provider.(b) This section may not be construed as authorizing an insurer to supervise or control the practice of medicine as prohibited by Subtitle B, Title 3, Occupations Code. | No equivalent provision. |
| SECTION 6. 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 4. Same as introduced version. |
| SECTION 7. This Act takes effect September 1, 2017. | SECTION 5. Same as introduced version. |

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