**BILL ANALYSIS**

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| Senate Research Center | C.S.H.B. 1486 |
| 85R29396 JG-F | By: Price et al. (Schwertner) |
|  | Health & Human Services |
|  | 5/15/2017 |
|  | Committee Report (Substituted) |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Interested parties note that peer specialists assist individuals experiencing mental health or substance use disorders by helping the individuals focus on recovery, wellness, self-direction, responsibility, and independent living. The parties also note that, without a defined scope of services, the services peer specialists provide are not reimbursable under the Medicaid program in certain settings. H.B. 1486 seeks to address this issue by requiring the Health and Human Services Commission to provide for peer specialists and services. (Original Author's / Sponsor's Statement of Intent)

C.S.H.B. 1486 amends current law relating to peer specialists, peer services, and the provision of those services under the medical assistance program.

**RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Section 531.0999, Government Code) of this bill.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0999, as follows:

Sec. 531.0999. PEER SPECIALISTS. (a) Requires the Health and Human Services Commission (HHSC), with input from mental health and substance use peer specialists and the work group described by Subsection (b), to develop and the executive commissioner of HHSC (executive commissioner) to adopt:

(1)  rules that establish training requirements for peer specialists so that they are able to provide services to persons with mental illness or services to persons with substance use conditions;

(2)  rules that establish certification and supervision requirements for peer specialists;

(3)  rules that define the scope of services that peer specialists may provide;

(4)  rules that distinguish peer services from other services that a person is required to hold a license to provide; and

(5)  any other rules necessary to protect the health and safety of persons receiving peer services.

(b) Requires HHSC to establish a stakeholder work group to provide input for the adoption of rules under Subsection (a). Provides that the work group is composed of certain stakeholders appointed by the executive commissioner.

(c) Requires the executive commissioner to appoint one member of the work group to serve as presiding officer.

(d) Requires the work group to meet once every month.

(e) Provides that the work group is automatically abolished on the adoption of rules under Subsection (a).

(f) Prohibits the executive commissioner from adopting rules under Subsection (a) that preclude the provision of mental health rehabilitative services under 25 T.A.C. Chapter 416, Subchapter A, as that subchapter existed on January 1, 2017.

(g) Requires the executive commissioner, if the executive commissioner has not adopted rules by September 1, 2018, to submit on that date a written report to the governor, the lieutenant governor, the speaker of the house of representatives, the chair of the Senate Health and Human Services Committee, and the chair of the House Public Health Committee explaining why the rules have not yet been adopted. Provides that this subsection expires September 1, 2019.

SECTION 2. Amends Section 32.024, Human Resources Code, by adding Subsection (kk), as follows:

(kk) Requires HHSC in its rules and standards governing the scope of services provided under the medical assistance program to include peer services provided by certified peer specialists to the extent permitted by federal law.

SECTION 3. Requires the executive commissioner, as soon as practicable after the effective date of this Act, to adopt the rules required by Section 531.0999(a), Government Code, as added by this Act, and appoint the members of the stakeholder work group established by Section 531.0999(b), Government Code, as added by this Act.

SECTION 4. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such a waiver or authorization is granted.

SECTION 5. (a) Effective date, except as provided by Subsection (b): upon passage or September 1, 2017.

(b) Provides that this Act takes effect only if the 85th Legislature appropriates money specifically for the purpose of implementing this Act. Provides that if the legislature does not appropriate money specifically for that purpose, this Act does not take effect.