By: Guerra

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	A BILL TO BE ENTITLED
1	AN ACT
2	relating to the use of home telemonitoring services under Medicaid.
3	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
4	SECTION 1. Section 531.02164, Government Code, is amended
5	by amending Subsection (c) and adding Subsections (c-1) and (c-2) $% \left($
6	to read as follows:
7	(c) The program required under this section must:
8	(1) provide that home telemonitoring services are
9	available only to <u>a person</u> [persons] who:
10	(A) <u>is</u> [are] diagnosed with one or more of the
11	following conditions:
12	<pre>(i) pregnancy;</pre>
13	(ii) diabetes;
14	(iii) heart disease;
15	(iv) cancer;
16	(v) chronic obstructive pulmonary disease;
17	(vi) hypertension;
18	(vii) congestive heart failure;
19	(viii) mental illness or serious emotional
20	disturbance;
21	(ix) asthma;
22	<pre>(x) myocardial infarction; [or]</pre>
23	(xi) stroke; <u>or</u> [and]
24	(xii) another condition for which the

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commission makes an evidence-based determination that monitoring 1 through the use of home telemonitoring services is cost-effective 2 and feasible; and 3 4 (B) exhibits [exhibit] two or more of the 5 following risk factors: 6 (i) two or more hospitalizations in the 7 prior 12-month period; 8 (ii) frequent or recurrent emergency room 9 admissions; (iii) 10 а documented history of poor adherence to ordered medication regimens; 11 (iv) a documented history of falls in the 12 prior six-month period; 13 14 (v) limited or absent informal support 15 systems; 16 (vi) living alone or being home alone for 17 extended periods of time; and 18 (vii) a documented history of care access 19 challenges; 20 (2) ensure that clinical information gathered by a 21 home and community support services agency or hospital while providing home telemonitoring services is shared with the patient's 22 23 physician; [and] 24 (3) ensure that the program does not duplicate disease 25 management program services provided under Section 32.057, Human 26 Resources Code; and 27 (4) provide reimbursement for home telemonitoring

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services in the event of an unsuccessful data transmission if the 1 provider of the services attempts to communicate with the patient 2 by telephone or in person to establish a successful data 3 transmission. 4 5 (c-1) Notwithstanding Subsection (c)(1), the program required under this section must also provide that home 6 7 telemonitoring services are available to a pediatric patient with chronic or complex med<u>ical needs who:</u> 8 9 (1) is being concurrently treated by at least three medical specialists; 10 (2) is medically dependent on technology; 11 12 (3) is diagnosed with end-stage solid organ disease; 13 or 14 (4) requires mechanical ventilation. 15 (c-2) A provider that is reimbursed under Subsection (c)(4) for home telemonitoring services provided to a patient may not also 16 17 be reimbursed for communicating with the patient by telephone or in person to establish a successful data transmission as described by 18 19 Subsection (c)(4). SECTION 2. Section 531.02176, Government Code, is repealed. 20 21 SECTION 3. As soon as practicable after the effective date of this Act, the executive commissioner of the Health and Human 22 Services Commission shall adopt necessary rules to implement the 23 24 changes in law made by this Act. 25 SECTION 4. 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.

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4 SECTION 5. This Act takes effect September 1, 2017.