

By: Bonnen of Galveston

H.B. No. 3634

A BILL TO BE ENTITLED

AN ACT

relating to the amendment of the Texas Health Care Transformation and Quality Improvement Program waiver.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Chapter 531, Government Code, is amended by adding Subchapter N-1 to read as follows:

SUBCHAPTER N-1. TEXAS HEALTH CARE TRANSFORMATION AND QUALITY IMPROVEMENT PROGRAM WAIVER

Sec. 531.521. AMENDMENT OF TEXAS HEALTH CARE TRANSFORMATION AND QUALITY IMPROVEMENT PROGRAM WAIVER. Notwithstanding any other law, the commission shall seek to amend the Texas Health Care Transformation and Quality Improvement Program waiver issued under Section 1115 of the federal Social Security Act (42 U.S.C. Section 1315) to:

(1) reinstate the eligibility criteria for Medicaid that existed on December 31, 2013, including by reinstating income limits and asset test requirements that existed on that date, eliminating income disregards that have been implemented since that date, and discontinuing the use of the modified adjusted gross income (MAGI) income eligibility methodology;

(2) ensure that the eligibility certification period for Medicaid is six months;

(3) prohibit recipients enrolled in a Medicaid managed care plan from enrolling in a different Medicaid managed care plan

1 at any time during the 6-month period after the date of enrollment
2 in the plan without cause, to the extent not prohibited by federal
3 law;

4 (4) reinstate the eligibility criteria for the child
5 health plan program that existed immediately before the effective
6 date of Chapter 1353 (H.B. 109), Acts of the 80th Legislature,
7 Regular Session, 2007, including by reinstating asset test
8 requirements that existed immediately before that date,
9 eliminating income disregards that have been implemented since that
10 date, and discontinuing the use of the modified adjusted gross
11 income (MAGI) income eligibility methodology;

12 (5) ensure that the eligibility certification period
13 for the child health plan program is six months;

14 (6) require Medicaid recipients and child health plan
15 program enrollees to participate in a health insurance premium
16 payment reimbursement program if the employer-sponsored coverage
17 available to the recipient or enrollee meets benchmarks established
18 by the commission;

19 (7) authorize the commission to establish a system in
20 which employers may pay all or part of the share of a premium
21 required to be paid by a recipient or enrollee described by
22 Subdivision (6);

23 (8) require Medicaid recipients to pay copayments for
24 services provided under Medicaid to the same extent copayments for
25 the same or similar services are required under the child health
26 plan program;

27 (9) authorize the imposition of fees on Medicaid

1 recipients and child health plan program enrollees for missed
2 health care appointments that are more comparable to those imposed
3 in the private market;

4 (10) require adult Medicaid recipients to sign a
5 personal responsibility agreement similar to the agreement
6 required for adult recipients of financial assistance benefits
7 under Section 31.0031, Human Resources Code;

8 (11) ensure that the commission has broad authority to
9 evaluate new and innovative payment and service delivery models for
10 Medicaid by implementing pilot programs to test those models,
11 including pilot programs to evaluate the direct primary care
12 payment model, bundled payment models, and the delivery of services
13 through accountable care organizations, without the need to seek
14 additional waivers or authorizations for implementation of those
15 pilot programs; and

16 (12) operate Medicaid under a block grant funding
17 system based on population and cost growth trends.

18 SECTION 2. Chapter 537, Government Code, is repealed.

19 SECTION 3. Not later than October 1, 2017, the Health and
20 Human Services Commission shall apply to the federal Centers for
21 Medicare and Medicaid Services to amend the Texas Health Care
22 Transformation and Quality Improvement Program waiver issued under
23 Section 1115 of the federal Social Security Act (42 U.S.C. Section
24 1315), as required by Subchapter N-1, Government Code, as added by
25 this Act.

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