

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 25, 2017

TO: Honorable Joe Straus, Speaker of the House, House of Representatives

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB3295 by Klick (Relating to the delivery of certain Medicaid services to persons with an intellectual or developmental disability.), **As Passed 2nd House**

The fiscal implications of the bill cannot be determined at this time because no information is available on the cost or savings associated with the managed care programs affected by the provisions of the bill. It is assumed any cost associated with reporting requirements could be absorbed.

The bill would delay the conclusion of pilot programs implemented pursuant to Government Code, Chapter 534, Subchapter C from September 1, 2018 to September 1, 2019. The bill would delay the transition of Texas Home Living waiver participants into a managed care program by two years from September 1, 2018 to September 1, 2020.

Under the provisions of the bill, pilot programs could continue to operate in fiscal year 2019. Because the pilot programs have not yet been implemented, any cost or savings associated with them cannot be determined. Under the provisions of the bill, any cost or savings could presumably be experienced for up to an additional year (fiscal year 2019) depending on how long they continued to operate. Pilot programs may operate for up to 24 months and it is not known how long they would continue to operate in fiscal year 2019.

The fiscal impact of delaying the transition of Texas Home Living waiver participants into managed care cannot be determined. The fiscal impact of moving participants into managed care is unknown at this time and would be dependent on assumptions made by the Health and Human Services Commission during the rate-setting process. There are costs associated with capitation, including new administrative costs and payment of the Health Insurance Provider Fee pursuant to the federal Affordable Care Act. Whether those costs would be offset by medical savings and increased premium tax revenue is unknown at this time. Under the provisions of the bill, any fiscal impact from moving participants into managed care would be delayed by two years. If there were a cost associated with the transition into managed care, there would be a savings in fiscal years 2019 and 2020 from delaying that cost. If there were a savings associated with the transition into managed care, there would be a cost in fiscal years 2019 and 2020 from delaying that savings.

HHSC would be required to study or evaluate (1) issues related to utilization of consumer directed services for certain Medicaid enrollees and the feasibility of creating a Medicaid community attendant registry and (2) certain factors related to providing dental services to Medicaid adults with disabilities. HHSC would be required to submit reports related to these studies to certain entities no later than December 1, 2018. It is assumed that the costs associated with conducting the required studies can be absorbed within HHSC's existing resources.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission

LBB Staff: UP, KCA, LR, TBo