

# SENATE AMENDMENTS

2<sup>nd</sup> Printing

By: Coleman

H.B. No. 1629

A BILL TO BE ENTITLED

AN ACT

relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.

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

SECTION 1. Section 536.003, Government Code, is amended by adding Subsections (f) and (g) to read as follows:

(f) The commission, in coordination with the Department of State Health Services, shall develop and implement a quality-based outcome measure for the child health plan program and Medicaid to annually measure the percentage of child health plan program enrollees or Medicaid recipients with HIV infection, regardless of age, whose most recent viral load test indicates a viral load of less than 200 copies per milliliter of blood.

(g) In this section, "HIV" has the meaning assigned by Section 81.101, Health and Safety Code.

SECTION 2. As soon as practicable after the effective date of this Act, the Health and Human Services Commission and the Department of State Health Services shall develop and implement the quality-based outcome measure required by Section 536.003(f), Government Code, as added by this Act.

SECTION 3. 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,

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.

4       SECTION 4. This Act takes effect immediately if it receives  
5 a vote of two-thirds of all the members elected to each house, as  
6 provided by Section 39, Article III, Texas Constitution. If this  
7 Act does not receive the vote necessary for immediate effect, this  
8 Act takes effect September 1, 2017.

ADOPTED

MAY 24 2017

By: Zaffirini

Atty. Gen. H.B. No. 1629  
Secretary of the Senate

Substitute the following for H.B. No. 1629:

By: Phil Burton

C.S. H.B. No. 1629

A BILL TO BE ENTITLED

1 AN ACT

2 relating to the development of a quality-based outcome measure for  
3 the child health plan program and Medicaid regarding certain  
4 persons with HIV.

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

6 SECTION 1. Section 536.003, Government Code, is amended by  
7 adding Subsections (f), (g), and (h) to read as follows:

8 (f) The commission, in coordination with the Department of  
9 State Health Services, shall develop and implement a quality-based  
10 outcome measure for the child health plan program and Medicaid to  
11 annually measure the percentage of child health plan program  
12 enrollees or Medicaid recipients with HIV infection, regardless of  
13 age, whose most recent viral load test indicates a viral load of  
14 less than 200 copies per milliliter of blood.

15 (g) The commission shall include aggregate, nonidentifying  
16 data collected using the quality-based outcome measure described by  
17 Subsection (f) in the annual report required by Section 536.008 and  
18 may include the data in any other report required by this chapter.  
19 The commission shall determine the appropriateness of including the  
20 quality-based outcome measure described by Subsection (f) in the  
21 quality-based payments and payment systems developed under  
22 Sections 536.004 and 536.051.

23 (h) In this section, "HIV" has the meaning assigned by  
24 Section 81.101, Health and Safety Code.

1           SECTION 2. As soon as practicable after the effective date  
2 of this Act, the Health and Human Services Commission and the  
3 Department of State Health Services shall develop and implement the  
4 quality-based outcome measure required by Section 536.003(f),  
5 Government Code, as added by this Act.

6           SECTION 3. If before implementing any provision of this Act  
7 a state agency determines that a waiver or authorization from a  
8 federal agency is necessary for implementation of that provision,  
9 the agency affected by the provision shall request the waiver or  
10 authorization and may delay implementing that provision until the  
11 waiver or authorization is granted.

12          SECTION 4. This Act takes effect immediately if it receives  
13 a vote of two-thirds of all the members elected to each house, as  
14 provided by Section 39, Article III, Texas Constitution. If this  
15 Act does not receive the vote necessary for immediate effect, this  
16 Act takes effect September 1, 2017.

**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: HB1629** by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Passed 2nd House**

<b>No significant fiscal implication to the State is anticipated.</b>
---

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection. HHSC would be required to include the quality-based outcome measure data in the annual report required by Government Code §536.008 and would be permitted to include the data in other reports required by Chapter 536 of Government Code. HHSC would be required to determine the appropriateness of including the quality-based outcome measure in the quality-based payment and payment systems.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

**Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 529 Health and Human Services Commission, 537 State Health Services, Department of

**LBB Staff:** UP, SD, KCA, LR, RGU

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION**

**May 18, 2017**

**TO:** Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB1629** by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.),  
**Committee Report 2nd House, Substituted**

<b>No significant fiscal implication to the State is anticipated.</b>
---

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection. HHSC would be required to include the quality-based outcome measure data in the annual report required by Government Code §536.008 and would be permitted to include the data in other reports required by Chapter 536 of Government Code. HHSC would be required to determine the appropriateness of including the quality-based outcome measure in the quality-based payment and payment systems.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

**Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 529 Health and Human Services Commission, 537 State Health Services,  
Department of

**LBB Staff:** UP, KCA, LR, RGU

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION**

**May 9, 2017**

**TO:** Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB1629** by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Engrossed**

<b>No significant fiscal implication to the State is anticipated.</b>
---

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

**Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 529 Health and Human Services Commission, 537 State Health Services, Department of

**LBB Staff:** UP, KCA, LR, RGU

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION**

**March 18, 2017**

**TO:** Honorable Four Price, Chair, House Committee on Public Health

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB1629** by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Introduced**

<b>No significant fiscal implication to the State is anticipated.</b>
---

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

**Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 529 Health and Human Services Commission, 537 State Health Services, Department of

**LBB Staff:** UP, KCA, LR, RGU