

SENATE AMENDMENTS

2nd Printing

By: Davis of Harris, Thompson of Harris,
Price, Zerwas, Coleman, et al.

H.B. No. 2466

A BILL TO BE ENTITLED

AN ACT

relating to coverage for certain services related to maternal
depression under the Medicaid and child health plan programs.

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

SECTION 1. Subchapter D, Chapter 62, Health and Safety
Code, is amended by adding Section 62.1511 to read as follows:

Sec. 62.1511. COVERAGE FOR MATERNAL DEPRESSION SCREENING.

(a) In this section, "maternal depression" means depression of any
severity with postpartum onset.

(b) The covered services under the child health plan must
include a maternal depression screening for an enrollee's mother,
regardless of whether the mother is also an enrollee, that is
performed during a covered well-child or other office visit for the
enrollee that occurs before the enrollee's first birthday.

(c) The executive commissioner shall adopt rules necessary
to implement this section. The rules must be based on:

(1) clinical and empirical evidence concerning
maternal depression; and

(2) information provided by relevant physicians and
behavioral health organizations.

(d) The commission shall seek, accept, and spend any federal
funds that are available for the purposes of this section,
including priority funding authorized by Section 317L-1 of the
Public Health Service Act (42 U.S.C. Section 201 et seq.), as added

1 by the 21st Century Cures Act (Pub. L. No. 114-255).

2 SECTION 2. Subchapter B, Chapter 32, Human Resources Code,
3 is amended by adding Section 32.0561 to read as follows:

4 Sec. 32.0561. MATERNAL DEPRESSION SCREENING. (a) In this
5 section, "maternal depression" means depression of any severity
6 with postpartum onset.

7 (b) The commission shall provide medical assistance
8 reimbursement for a maternal depression screening for a recipient's
9 mother, regardless of whether the mother is also a recipient, that
10 is performed during a covered examination for the recipient under
11 the Texas Health Steps Comprehensive Care Program that occurs
12 before the recipient's first birthday.

13 (c) The executive commissioner shall adopt rules necessary
14 to implement this section. The rules must be based on:

15 (1) clinical and empirical evidence concerning
16 maternal depression; and

17 (2) information provided by relevant physicians and
18 behavioral health organizations.

19 (d) The commission shall seek, accept, and spend any federal
20 funds that are available for the purposes of this section,
21 including priority funding authorized by Section 317L-1 of the
22 Public Health Service Act (42 U.S.C. Section 201 et seq.), as added
23 by the 21st Century Cures Act (Pub. L. No. 114-255).

24 SECTION 3. If before implementing any provision of this Act
25 a state agency determines that a waiver or authorization from a
26 federal agency is necessary for implementation of that provision,
27 the agency affected by the provision shall request the waiver or

1 authorization and may delay implementing that provision until the
2 waiver or authorization is granted.

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

ADOPTED

MAY 23 2017

FLOOR AMENDMENT NO. 1

Atalay Shaw
Secretary of the Senate

BY: *Joan Huffman*

1 Amend H.B. No. 2466 (senate committee printing) by adding
2 the following appropriately numbered SECTION to the bill and
3 renumbering subsequent SECTIONS of the bill accordingly:

4 SECTION __. (a) Section 32.025, Human Resources Code, is
5 amended by adding Subsection (g) to read as follows:

6 (g) The application form adopted under this section must
7 include:

8 (1) for an applicant who is pregnant, a question
9 regarding whether the pregnancy is the woman's first gestational
10 pregnancy; and

11 (2) a question regarding the applicant's preferences
12 for being contacted, as follows:

13 "If you are determined eligible for benefits,
14 your managed care organization or health plan provider may
15 contact you by telephone, text message, or e-mail about health
16 care matters, including reminders for appointments and
17 information about immunizations or well check visits. All
18 preferred methods of contact listed on this application will be
19 shared with your managed care organization or health plan
20 provider. Please indicate below your preferred methods of
21 contact in order of preference, with the number 1 being the most
22 preferable method:

23 (1) By telephone (if contacted by cellular telephone,
24 the call may be autodialed or prerecorded, and your carrier's
25 usage rates may apply)? Yes No

26 Telephone number: _____

27 Order of preference: 1 2 3 (circle a number)

28 (2) By text message (a free autodialed service, but
29 your carrier may charge message and data rates)? Yes No

1 Cellular telephone number:_____

2 Order of preference: 1 2 3 (circle a number)

3 (3) By e-mail? Yes No

4 E-mail address:_____

5 Order of preference: 1 2 3 (circle a number)".

6 (b) Not later than January 1, 2018, the executive
7 commissioner of the Health and Human Services Commission shall
8 adopt a revised application form for medical assistance benefits
9 that conforms to the requirements of Section 32.025(g), Human
10 Resources Code, as added by this section.

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 23, 2017

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

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2466 by Davis, Sarah (Relating to coverage for certain services related to maternal depression under the Medicaid and child health plan programs.), **As Passed 2nd House**

<p>No significant fiscal implication to the State is anticipated.</p>
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The bill would require the Health and Human Services Commission (HHSC) to include a maternal depression screening as a covered service provided to the mothers of enrollees in Medicaid or the Children's Health Insurance Program (CHIP), up to the enrollee's first birthday. HHSC would be required to seek, accept, and spend any federal funds available for these purposes, including funding authorized by the 21st Century Cures Act.

HHSC would incur one-time costs for modifications to the Texas Integrated Eligibility Redesign System (TIERS) and the Medicaid Management Information System in fiscal year 2018. It is assumed those costs can be absorbed within HHSC's existing resources.

It is assumed that system changes and other administrative changes would delay client services impact until fiscal year 2019. Based on birth data from calendar year 2014 (399,482 births), of which 53.2 percent were covered by Medicaid, it is assumed that approximately 212,524 women would be eligible for the services required by the bill. Based on the language of the bill, it is assumed that all eligible women would be permitted to receive one screening in the 12-month postpartum period. If all eligible women received a postpartum depression screening, at a reimbursement rate of \$10.28 per screening (based on the reimbursement rate used in other states), the estimated increase to Medicaid client services would be \$2.2 million in All Funds, including \$0.9 million in General Revenue Funds, each year. It is assumed that a portion of the eligible women would receive the screening in the first two months of postpartum coverage currently covered in the Medicaid program and that some women would opt not to receive the screening. Additionally, the reimbursement rate could vary depending on the rate ultimately adopted by HHSC. While the cost could be significant, based on these factors it is assumed that all client services costs associated with the provisions of the bill can be absorbed within HHSC's existing resources.

The number of women giving birth to children eligible for CHIP is relatively small and the cost of providing a mental health screening using the same assumptions as above for Medicaid would not be anticipated to be significant.

Federal Funds available through the 21st Century Cures Act, if awarded to Texas, could not be used to offset the client services costs identified above. They could be used to provide training to health care providers about the availability of screening services, which could affect the number

of women receiving services. The amount of Federal Funds that might be available through the 21st Century Cures Act or from another source, and expended to implement the provisions of the bill, cannot be determined at this time.

The bill would amend the Human Resource Code to change the application for Medicaid benefits to include certain information for pregnant applicants. It is assumed duties and responsibilities associated with amending the application for Medicaid benefits could be accomplished by utilizing 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, RGU, TBo

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 10, 2017

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

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2466 by Davis, Sarah (Relating to coverage for certain services related to maternal depression under the Medicaid and child health plan programs.), **As Engrossed**

No significant fiscal implication to the State is anticipated.

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Source Agencies: 529 Health and Human Services Commission

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

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

April 3, 2017

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

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2466 by Davis, Sarah (Relating to coverage for certain services related to maternal depression under the Medicaid and child health plan programs.), **As Introduced**

No significant fiscal implication to the State is anticipated.

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