

House Bill 2466
Senate Amendments
Section-by-Section Analysis

HOUSE VERSION

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

No equivalent provision.

SENATE VERSION (IE)

SECTION 1. Same as House version.

CONFERENCE

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

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

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

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pregnancy; and

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

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

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

Telephone number: _____

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

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

Cellular telephone number: _____

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

(3) By e-mail? Yes No

E-mail address: _____

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

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

[FA1]

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

Sec. 32.0561. MATERNAL DEPRESSION SCREENING.

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

(b) The commission shall provide medical assistance reimbursement for a maternal depression screening for a recipient's mother, regardless of whether the mother is also a recipient, that is performed during a covered examination for the recipient under the Texas Health Steps Comprehensive Care Program that occurs before the recipient'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 by the 21st Century Cures Act (Pub. L. No. 114-255).

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, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SENATE VERSION (IE)

SECTION 2. Same as House version.

SECTION 3. Same as House version.

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

SENATE VERSION (IE)

SECTION 4. Same as House version.

CONFERENCE