**BILL ANALYSIS**

|  |  |
| --- | --- |
| Senate Research Center | H.B. 1063 |
| 86R23826 JG-D | By: Price et al. (Buckingham) |
|  | Health & Human Services |
|  | 5/12/2019 |
|  | Engrossed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

H.B. 1063 seeks to improve patient outcomes and contain healthcare costs through the use of telemonitoring. The bill accomplishes this goal by repealing the expiration of the Medicaid telemonitoring reimbursement program. The bill would require the Medicaid telemonitoring program to provide home telemonitoring services to certain pediatric patients who were diagnosed with end-stage solid organ disease, had received an organ transplant, or required mechanical ventilation.

The Health and Human Services Commission (HHSC) would have to adopt rules for such a change by December 1, 2019. Under the bill's provisions, HHSC would be required to include in its existing biennial reporting the cost savings to Medicaid of telemedicine, telehealth, and home telemonitoring services.

H.B. 1063 amends current law relating to telemedicine medical, telehealth, and home telemonitoring services under Medicaid.

**RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 4 of this bill.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 531.0216(f), Government Code, as follows:

(f) Requires the Health and Human Services Commission (HHSC), not later than December 1 of each even-numbered year, to report to the speaker of the house of representatives and the lieutenant governor on the effects of telemedicine medical services, telehealth services, and home telemonitoring services on Medicaid in the state, including the number of physicians, health professionals, and licensed health care facilities using telemedicine medical services, telehealth services, or home telemonitoring services, the geographic and demographic disposition of the physicians and health professionals, the number of patients receiving telemedicine medical services, telehealth services, and home telemonitoring services, the types of services being provided, the cost of utilization, and the cost savings of telemedicine medical services, telehealth services, and home telemonitoring services to Medicaid, rather than the cost of utilization of telemedicine medical services, telehealth services, and home telemonitoring services to Medicaid.

SECTION 2. Amends Section 531.02164, Government Code, by adding Subsection (c-1), as follows:

(c-1) Requires the program required under this section (Medicaid Services Provided Through Home Telemonitoring Services), notwithstanding Subsection (c)(1) (relating to requiring the program required to provide that home telemonitoring services are available only to certain persons), to also provide that home telemonitoring services are available to pediatric persons who:

(1) are diagnosed with end-stage solid organ disease;

(2) have received an organ transplant; or

(3) require mechanical ventilation.

SECTION 3. Repealer: Section 531.02176 (Expiration of Medicaid Reimbursement For Provision of Home Telemonitoring Services), Government Code.

SECTION 4. Requires the executive commissioner of HHSC to adopt the rules necessary to implement Section 531.02164(c-1), Government Code, as added by this Act, not later than December 1, 2019.

SECTION 5. Requires a state agency affected by any provision of this Act, if before implementing the provision the agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, to request the waiver or authorization and authorizes the agency to delay implementing that provision until the waiver or authorization is granted.

SECTION 6. Effective date: September 1, 2019.