

BILL ANALYSIS

C.S.H.B. 2062
By: Guerra
Human Services
Committee Report (Substituted)

BACKGROUND AND PURPOSE

It has been noted that the use of home telemonitoring services has proven to be a cost-effective way to treat chronically ill patients by allowing health care professionals to receive the latest patient data without forcing these patients to travel to a health care facility. These services have also been reported to help patients in medically underserved areas of Texas by increasing access to care. C.S.H.B. 2062 seeks to ensure that these services remain available to Medicaid recipients.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 2062 repeals Section 531.02176, Government Code, which prohibits the Health and Human Services Commission from providing Medicaid reimbursement for the provision of home telemonitoring services on or after September 1, 2019.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 2062 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute does not include a requirement for the statewide program permitting Medicaid reimbursement for home telemonitoring services to provide reimbursement for those services in the event of an unsuccessful data transmission if the service provider attempts to communicate with the patient by telephone or in person. The substitute does not include a prohibition against a service provider being reimbursed for communicating with a patient by telephone or in person to establish such a successful transmission.

The substitute does not include an authorization for the home telemonitoring reimbursement program to provide that those services are available to certain pediatric patients with chronic or complex medical needs.