BILL ANALYSIS

H.B. 4648 By: Burrows County Affairs Committee Report (Unamended)

BACKGROUND AND PURPOSE

It has been noted that hospitals in Lubbock County provide a great amount of uncompensated care and that a health care provider participation program in the county would allow local providers to access more funds to help ensure access to care and reduce the level of uncompensated care in the community. H.B. 4648 seeks to provide for such a program.

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

H.B. 4648 amends the Health and Safety Code to provide for a health care provider participation program for the Lubbock County Hospital District of Lubbock County, Texas. The bill authorizes the district's board of hospital managers to authorize the district to participate in the program on the affirmative vote of a majority of the board. The bill authorizes the board to authorize the collection of a mandatory payment from an institutional health care provider located in the district under the program; provides for certain institutional health care provider reporting; defines, among other terms, "institutional health care provider" as a nonpublic hospital located in the district that provides inpatient hospital services; and sets out the bill's purpose. The bill requires the board, subject to the approval of the program to Lubbock County and authorizes the commissioners court to adopt rules relating to the administration of the program.

H.B. 4648 provides for an annual public hearing on the amounts of any mandatory payments that the board intends to require during the year and how the revenue derived from those payments is to be spent. The bill provides for the creation, composition, and use of a local provider participation fund.

H.B. 4648 provides for the amount, assessment, and collection of a mandatory payment. The bill authorizes the board to provide by rule for an alternative provision or procedure that conforms to the requirements of the federal Centers for Medicare and Medicaid Services to the extent any provision or procedure under the bill's provisions causes a mandatory payment to be ineligible for federal matching funds and sets out provisions relating to such rules.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2019.