

By: Davis of Harris

H.B. No. 1111

A BILL TO BE ENTITLED

AN ACT

relating to maternal and newborn health care.

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

SECTION 1. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.02163 to read as follows:

Sec. 531.02163. STUDY ON PROVIDING CERTAIN MATERNAL CARE MEDICAID SERVICES THROUGH TELEMEDICINE MEDICAL SERVICES AND TELEHEALTH SERVICES. (a) Not later than September 1, 2020, the commission shall conduct a study on the benefits and costs of permitting reimbursement under Medicaid for prenatal and postpartum care delivered through telemedicine medical services and telehealth services.

(b) This section expires September 1, 2021.

SECTION 2. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.0996 to read as follows:

Sec. 531.0996. PREGNANCY MEDICAL HOME PILOT PROGRAM. (a) The commission shall develop a pilot program to establish pregnancy medical homes that provide coordinated evidence-based maternity care management to women who reside in a pilot program area and are recipients of Medicaid through a Medicaid managed care model or arrangement under Chapter 533. The commission shall implement the pilot program in:

(1) at least two counties with populations of more than two million; and

1 (2) at least one rural county with high rates of
2 maternal mortality and morbidity as determined by the commission in
3 consultation with the Maternal Mortality and Morbidity Task Force
4 established under Chapter 34, Health and Safety Code.

5 (b) In implementing the pilot program, the commission shall
6 ensure each pregnancy medical home provides a maternity management
7 team that:

8 (1) consists of health care providers, including
9 obstetricians, gynecologists, family physicians, physician
10 assistants, certified nurse midwives, nurse practitioners, and
11 social workers, who provide health care services at the same
12 location;

13 (2) conducts a risk assessment of each pilot program
14 participant on her entry into the program to determine the risk
15 classification for her pregnancy;

16 (3) based on the assessment conducted under
17 Subdivision (2), establishes an individual pregnancy care plan for
18 each participant; and

19 (4) follows each participant throughout her pregnancy
20 to reduce poor birth outcomes.

21 (c) The commission may incorporate as a component of the
22 pilot program financial incentives for health care providers who
23 participate in a maternity management team.

24 (d) Not later than January 1, 2021, the commission shall
25 submit to the legislature a report on the pilot program. The report
26 must include:

27 (1) an evaluation of the pilot program's success in

1 reducing poor birth outcomes; and

2 (2) a recommendation on whether the pilot program
3 should continue, be expanded, or be terminated.

4 (e) The executive commissioner may adopt rules to implement
5 this section.

6 (f) This section expires September 1, 2023.

7 SECTION 3. Section 33.004(f), Health and Safety Code, is
8 amended to read as follows:

9 (f) The executive commissioner by rule shall ~~[may]~~
10 establish the amounts charged for newborn screening fees, including
11 fees assessed for follow-up services, tracking confirmatory
12 testing, and diagnosis. In adopting rules under this subsection,
13 the executive commissioner shall ensure that amounts charged for
14 newborn screening fees are sufficient to cover the costs of
15 performing the screening.

16 SECTION 4. Chapter 33, Health and Safety Code, is amended by
17 adding Subchapter D to read as follows:

18 SUBCHAPTER D. NEWBORN SCREENING PRESERVATION ACCOUNT

19 Sec. 33.051. DEFINITION. In this subchapter, "account"
20 means the newborn screening preservation account established under
21 Section 33.052.

22 Sec. 33.052. CREATION OF ACCOUNT. (a) The newborn
23 screening preservation account is a dedicated account in the
24 general revenue fund. The account is created solely for the
25 perpetual care and preservation of newborn screening in this state.

26 (b) Money in the account may be appropriated only to the
27 department and only for the purpose of carrying out the newborn

1 screening program established under this chapter.

2 (c) On September 30 of each year, the comptroller shall
3 transfer to the account any unexpended and unencumbered money from
4 Medicaid reimbursements collected by the department for newborn
5 screening services during the preceding state fiscal year.

6 (d) The account is composed of:

7 (1) money transferred to the account under Subsection
8 (c);

9 (2) newborn screening fees collected by the department
10 under this chapter;

11 (3) gifts, grants, donations, and legislative
12 appropriations; and

13 (4) interest earned on the investment of money in the
14 account.

15 (e) Section 403.0956, Government Code, does not apply to the
16 account.

17 (f) The department administers the account. The department
18 may solicit and receive gifts, grants, and donations from any
19 source for the benefit of the account.

20 Sec. 33.053. DEDICATED USE. (a) The department may use any
21 money remaining in the account after paying the costs of operating
22 the newborn screening program established under this chapter only
23 to:

24 (1) pay for capital assets, improvements, equipment,
25 and renovations for the laboratory established by the department to
26 ensure the continuous operation of the newborn screening program;
27 and

1 (2) pay for necessary renovations, construction,
2 capital assets, equipment, supplies, staff, and training
3 associated with providing additional newborn screening tests not
4 offered under this chapter before September 1, 2019, including the
5 operational costs incurred during the first year of implementing
6 the additional tests.

7 (b) The department may not use money from the account for
8 the department's general operating expenses.

9 Sec. 33.054. REPORT. If the department requires an
10 additional newborn screening test under Subchapter B the costs of
11 which are funded with money appropriated from the newborn screening
12 preservation account, the department shall, not later than December
13 31 of the first even-numbered year following the addition of the
14 test, prepare and submit a written report regarding the actions
15 taken by the department to fund and implement the test during the
16 preceding two years to:

17 (1) the governor;
18 (2) the lieutenant governor;
19 (3) the speaker of the house of representatives; and
20 (4) each standing committee of the legislature having
21 primary jurisdiction over the department.

22 SECTION 5. Chapter 34, Health and Safety Code, is amended by
23 adding Sections 34.0158 and 34.0159 to read as follows:

24 Sec. 34.0158. REPORT ON ACTIONS TO ADDRESS MATERNAL
25 MORTALITY RATES. Not later than December 1 of each even-numbered
26 year, the commission shall submit to the governor, the lieutenant
27 governor, the speaker of the house of representatives, the

1 Legislative Budget Board, and the appropriate standing committees
2 of the legislature a written report summarizing the actions taken
3 to address maternal morbidity and reduce maternal mortality rates.
4 The report must include information from programs and initiatives
5 created to address maternal morbidity and reduce maternal mortality
6 rates in this state, including:

- 7 (1) Medicaid;
- 8 (2) the children's health insurance program, including
9 the perinatal program;
- 10 (3) the Healthy Texas Women program;
- 11 (4) the Family Planning Program;
- 12 (5) this state's program under the Maternal and Child
13 Health Services Block Grant Act (42 U.S.C. Section 701 et seq.);
- 14 (6) the Perinatal Advisory Council;
- 15 (7) state health plans; and
- 16 (8) the Healthy Texas Babies program.

17 Sec. 34.0159. PROGRAM EVALUATIONS. The commission, in
18 collaboration with the task force and other interested parties,
19 shall:

- 20 (1) explore options for expanding the pilot program
21 for pregnancy medical homes established under Section 531.0996,
22 Government Code;
- 23 (2) explore methods for increasing the benefits
24 provided under Medicaid, including specialty care and
25 prescriptions, for women at greater risk of a high-risk pregnancy
26 or premature delivery;
- 27 (3) evaluate the impact of supplemental payments made

1 to obstetrics providers for pregnancy risk assessments on
2 increasing access to maternal health services;

3 (4) evaluate a waiver to fund managed care
4 organization payments for case management and care coordination
5 services for women at high risk of severe maternal morbidity on
6 conclusion of their eligibility for Medicaid;

7 (5) evaluate the average time required for pregnant
8 women to complete the Medicaid enrollment process;

9 (6) evaluate the use of Medicare codes for Medicaid
10 care coordination;

11 (7) study the impact of programs funded from the Teen
12 Pregnancy Prevention Program federal grant and evaluate whether the
13 state should continue funding the programs; and

14 (8) evaluate the use of telemedicine medical services
15 for women during pregnancy and the postpartum period.

16 SECTION 6. Chapter 34, Health and Safety Code, is amended by
17 adding Sections 34.019, 34.020, and 34.021 to read as follows:

18 Sec. 34.019. DATA COLLECTION. The task force, under the
19 direction of the commission, shall annually collect information
20 relating to maternity care and postpartum depression in this state.
21 The information must be based on statistics for the preceding year
22 and include the:

23 (1) number of births by Medicaid recipients;

24 (2) number of births by women with health benefit plan
25 coverage;

26 (3) number of Medicaid recipients screened for
27 postpartum depression;

1 (4) number of women screened for postpartum depression
2 under health benefit plan coverage;

3 (5) number of women treated for postpartum depression
4 under health benefit plan coverage;

5 (6) number of women screened for postpartum depression
6 under the Healthy Texas Women program;

7 (7) number of women treated for postpartum depression
8 under the Healthy Texas Women program;

9 (8) number of claims for postpartum depression
10 treatment paid by the Healthy Texas Women program;

11 (9) number of claims for postpartum depression
12 treatment rejected by the Healthy Texas Women program;

13 (10) postpartum depression screening and treatment
14 billing codes and the number of claims for each billing code under
15 the Healthy Texas Women program;

16 (11) average number of days from the date of a
17 postpartum depression screening to the date the patient begins
18 treatment under Medicaid;

19 (12) average number of days from the date of a
20 postpartum depression screening to the date the patient begins
21 treatment under the Healthy Texas Women program;

22 (13) number of women who screened positive for
23 postpartum depression under Medicaid and the average number of days
24 following childbirth for the screening to occur;

25 (14) number of women who screened positive for
26 postpartum depression under health benefit plan coverage and the
27 average number of days following childbirth for the screening to

occur; and

(15) number of women who screened positive for postpartum depression under the Healthy Texas Women program and the average number of days following childbirth for the screening to occur.

Sec. 34.020. PROGRAM TO DELIVER PRENATAL AND POSTPARTUM CARE THROUGH TELEHEALTH OR TELEMEDICINE MEDICAL SERVICES IN CERTAIN COUNTIES. (a) In this section:

(1) "Postpartum care" and "prenatal care" have the meanings assigned by Section 32.002.

(2) "Telehealth service" and "telemedicine medical service" have the meanings assigned by Section 111.001, Occupations Code.

(b) The commission, in consultation with the task force, shall develop a program to deliver prenatal and postpartum care through telehealth services or telemedicine medical services to pregnant women with a low risk of experiencing pregnancy-related complications. The commission shall implement the program in:

(1) at least two counties with populations of more than two million; and

(2) at least one rural county with high rates of maternal mortality and morbidity as determined by the commission in consultation with the task force.

(c) The commission shall develop criteria for selecting participants for the program by analyzing information in the reports prepared by the task force under this chapter and the outcomes of the study conducted under Section 531.02163, Government

1 Code.

2 (d) Not later than January 1, 2021, the commission shall
3 submit to the legislature a report on the program that evaluates the
4 program's success in delivering prenatal and postpartum care
5 through telehealth services or telemedicine medical services under
6 Subsection (b).

7 Sec. 34.021. APPLICATION FOR FEDERAL GRANTS. (a) The
8 executive commissioner shall apply to the United States Department
9 of Health and Human Services for grants under the federal
10 Preventing Maternal Deaths Act of 2018 (Pub. L. No. 115-344).

11 (b) This section expires September 1, 2027.

12 SECTION 7. Chapter 1001, Health and Safety Code, is amended
13 by adding Subchapter K to read as follows:

14 SUBCHAPTER K. HIGH-RISK MATERNAL CARE COORDINATION SERVICES PILOT
15 PROGRAM

16 Sec. 1001.261. DEFINITIONS. In this subchapter:

17 (1) "Pilot program" means the high-risk maternal care
18 coordination services pilot program established under this
19 subchapter.

20 (2) "Promotora" or "community health worker" has the
21 meaning assigned by Section 48.001.

22 Sec. 1001.262. ESTABLISHMENT OF PILOT PROGRAM; RULES. (a)
23 The department shall develop and implement a high-risk maternal
24 care coordination services pilot program in one or more geographic
25 areas in this state.

26 (b) In implementing the pilot program, the department
27 shall:

1 (1) conduct a statewide assessment of training courses
2 provided by promotoras or community health workers that target
3 women of childbearing age;

4 (2) study existing models of high-risk maternal care
5 coordination services;

6 (3) identify, adapt, or create a risk assessment tool
7 to identify pregnant women who are at a higher risk for poor
8 pregnancy, birth, or postpartum outcomes; and

9 (4) create educational materials for promotoras and
10 community health workers that include information on the:

11 (A) assessment tool described by Subdivision
12 (3); and

13 (B) best practices for high-risk maternal care.

14 (c) The executive commissioner shall adopt rules as
15 necessary to implement this subchapter and prescribe the types of
16 information to be collected during the course of the pilot program
17 and included in the report described by Section 1001.264.

18 Sec. 1001.263. DUTIES OF DEPARTMENT. (a) The department
19 shall provide to each geographic area selected for the pilot
20 program the support, resources, technical assistance, training,
21 and guidance necessary to:

22 (1) screen all or a sample of pregnant patients with
23 the assessment tool described by Section 1001.262(b)(3); and

24 (2) integrate community health worker services for
25 women with high-risk pregnancies in:

26 (A) providing patient education on
27 health-enhancing behaviors and chronic disease management and

1 prevention;

2 (B) facilitating care coordination and
3 navigation activities; and

4 (C) identifying and reducing barriers to the
5 women's access to health care.

6 (b) The department shall develop training courses to
7 prepare promotoras and community health workers in educating and
8 supporting women at high risk for serious complications during the
9 pregnancy and postpartum periods.

10 Sec. 1001.264. PILOT PROGRAM REPORT. (a) Not later than
11 December 1 of each even-numbered year, the department shall prepare
12 and submit a report on the pilot program to the executive
13 commissioner and the chairs of the standing committees of the
14 senate and the house of representatives with primary jurisdiction
15 over public health and human services. The report may be submitted
16 with the report required under Section [34.0156](#).

17 (b) The report submitted under this section must include an
18 evaluation from the commissioner of the pilot program's
19 effectiveness.

20 (c) The report submitted under this section must include a
21 recommendation from the department on whether the pilot program
22 should continue, be expanded, or be terminated.

23 Sec. 1001.265. EXPIRATION. This subchapter expires
24 September 1, 2023.

25 SECTION 8. (a) Except as provided by Subsection (b) of this
26 section, not later than December 1, 2019, the executive
27 commissioner of the Health and Human Services Commission shall

1 adopt the rules required under Section 33.004(f), Health and Safety
2 Code, as amended by this Act, and Section 1001.262(c), Health and
3 Safety Code, as added by this Act.

4 (b) Notwithstanding Subchapter K, Chapter 1001, Health and
5 Safety Code, as added by this Act, the Department of State Health
6 Services and the executive commissioner of the Health and Human
7 Services Commission are not required to comply with that subchapter
8 unless a specific appropriation for the implementation of the
9 subchapter is provided in a general appropriations act of the 86th
10 Legislature.

11 SECTION 9. As soon as practicable after the effective date
12 of this Act, the executive commissioner of the Health and Human
13 Services Commission shall apply to the United States Department of
14 Health and Human Services for grants as required by Section 34.021,
15 Health and Safety Code, as added by this Act.

16 SECTION 10. If before implementing any provision of this
17 Act a state agency determines that a waiver or authorization from a
18 federal agency is necessary for implementation of that provision,
19 the agency affected by the provision shall request the waiver or
20 authorization and may delay implementing that provision until the
21 waiver or authorization is granted.

22 SECTION 11. This Act takes effect immediately if it
23 receives a vote of two-thirds of all the members elected to each
24 house, as provided by Section 39, Article III, Texas Constitution.
25 If this Act does not receive the vote necessary for immediate
26 effect, this Act takes effect September 1, 2019.