

By: Raymond

H.B. No. 1470

A BILL TO BE ENTITLED

AN ACT

1  
2 relating to allowing the parents or guardians of certain medically  
3 dependent children to opt out of the STAR Kids managed care program  
4 under Medicaid.

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

6 SECTION 1. Section 533.0025(b), Government Code, is amended  
7 to read as follows:

8 (b) Except as otherwise provided by this section and Section  
9 533.002531 and notwithstanding any other law, the commission shall  
10 provide Medicaid acute care services through the most  
11 cost-effective model of Medicaid capitated managed care as  
12 determined by the commission. The commission shall require  
13 mandatory participation in a Medicaid capitated managed care  
14 program for all persons eligible for Medicaid acute care benefits,  
15 but may implement alternative models or arrangements, including a  
16 traditional fee-for-service arrangement, if the commission  
17 determines the alternative would be more cost-effective or  
18 efficient.

19 SECTION 2. Sections 533.00253(b) and (d), Government Code,  
20 are amended to read as follows:

21 (b) Except as provided by Section 533.002531 and subject  
22 [Subject] to Section 533.0025, the commission shall operate~~[, in~~  
23 ~~consultation with the Children's Policy Council established under~~  
24 ~~Section 22.035, Human Resources Code, establish]~~ a mandatory STAR

1 Kids capitated managed care program tailored to provide Medicaid  
2 benefits to children with disabilities. The managed care program  
3 [~~developed~~] under this section must:

4 (1) provide Medicaid benefits that are customized to  
5 meet the health care needs of recipients under the program through a  
6 defined system of care;

7 (2) better coordinate care of recipients under the  
8 program;

9 (3) improve the health outcomes of recipients;

10 (4) improve recipients' access to health care  
11 services;

12 (5) achieve cost containment and cost efficiency;

13 (6) reduce the administrative complexity of  
14 delivering Medicaid benefits;

15 (7) reduce the incidence of unnecessary  
16 institutionalizations and potentially preventable events by  
17 ensuring the availability of appropriate services and care  
18 management;

19 (8) require a health home; and

20 (9) coordinate and collaborate with long-term care  
21 service providers and long-term care management providers, if  
22 recipients are receiving long-term services and supports outside of  
23 the managed care organization.

24 (d) The commission shall provide Medicaid benefits through  
25 the STAR Kids managed care program operated [~~established~~] under  
26 this section to children who are receiving benefits under the  
27 medically dependent children (MDCP) waiver program, except that the

1 parent or guardian of a medically dependent child may opt the child  
2 out of receiving benefits through the STAR Kids managed care  
3 program in accordance with Section 533.002531. The commission  
4 shall ensure that the STAR Kids managed care program provides all of  
5 the benefits provided under the medically dependent children (MDCP)  
6 waiver program to the extent necessary to implement this  
7 subsection.

8 SECTION 3. Subchapter A, Chapter 533, Government Code, is  
9 amended by adding Section 533.002531 to read as follows:

10 Sec. 533.002531. STAR KIDS MANAGED CARE PROGRAM: OPT-OUT  
11 ALTERNATIVE. (a) The commission shall provide a process by which  
12 the parent or guardian of a child receiving benefits under the  
13 medically dependent children (MDCP) waiver program may opt the  
14 medically dependent child out of receiving benefits through the  
15 STAR Kids managed care program operated under Section 533.00253 and  
16 elect instead to have the child receive benefits through a  
17 traditional fee-for-service arrangement. The commission shall  
18 ensure that any transition in the delivery of benefits to a child  
19 under this section is completed in a manner that protects  
20 continuity of care.

21 (b) The parent or guardian of a medically dependent child  
22 who opts the child out of receiving benefits through the STAR Kids  
23 managed care program may not opt to return the child to receiving  
24 benefits through the STAR Kids managed care program or any other  
25 capitated managed care model for a period of at least two years.

26 (c) If a parent or guardian of a medically dependent child  
27 opts the child out of receiving benefits through the STAR Kids

1 managed care program, the commission shall monitor:

2 (1) whether, after the child transitioned to the  
3 traditional fee-for-service arrangement, the child's:

4 (A) utilization of benefits increased; and

5 (B) wellness improved; and

6 (2) the satisfaction of the child's parent or guardian  
7 with the provision of benefits under the fee-for-service  
8 arrangement.

9 (d) To the same extent required under Section 533.00253(e),  
10 the commission shall ensure that there is a plan for transitioning  
11 the provision of Medicaid benefits to recipients 21 years of age or  
12 older from the fee-for-service arrangement provided under this  
13 section to the STAR + PLUS Medicaid managed care program that  
14 protects continuity of care. The plan must ensure that the  
15 coordination begins when the recipient reaches 18 years of age.

16 SECTION 4. If before implementing any provision of this Act  
17 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 5. This Act takes effect September 1, 2019.