

By: Kolkhorst

S.B. No. 750

A BILL TO BE ENTITLED

AN ACT

relating to maternal and newborn health care and the quality of services provided to women in this state under certain health care programs.

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

SECTION 1. Subchapter C, Chapter 61, Education Code, is amended by adding Section 61.05123 to read as follows:

Sec. 61.05123. GUIDELINES FOR MATERNAL AND NEONATAL MEDICAL RESIDENCY TRAINING PROGRAMS. (a) The board shall develop best practice guidelines for maternal and neonatal medical residency training programs.

(b) The board shall publish the guidelines developed under Subsection (a) on the board's Internet website.

SECTION 2. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.0738 to read as follows:

Sec. 531.0738. APPLICATION FOR FUNDING TO IMPLEMENT MODEL OF CARE FOR CERTAIN MEDICAID RECIPIENTS. (a) The commission shall apply to the Centers for Medicare and Medicaid Services to receive any federal money available to implement a model of care that improves the quality and accessibility of care for:

(1) pregnant women with opioid use disorder enrolled in Medicaid during the prenatal and postpartum periods; and

(2) their children after birth.

(b) This section expires September 1, 2021.

1 SECTION 3. Chapter 32, Health and Safety Code, is amended by
2 adding Subchapters E and F to read as follows:

3 SUBCHAPTER E. ENHANCED PRENATAL AND POSTPARTUM CARE SERVICES

4 Sec. 32.101. ENHANCEMENT PROGRAM FOR PRENATAL CARE SERVICES
5 FOR CERTAIN WOMEN. The commission, in collaboration with managed
6 care organizations that contract with the commission under Chapter
7 533, Government Code, shall develop and implement a cost-effective,
8 evidence-based program to deliver enhanced prenatal care services
9 to high-risk pregnant women covered under the medical assistance
10 program.

11 Sec. 32.102. EVALUATION AND ENHANCEMENT OF POSTPARTUM CARE
12 SERVICES FOR CERTAIN WOMEN. (a) In this section, "Healthy Texas
13 Women program" means a program operated by the commission that is
14 substantially similar to the demonstration project operated under
15 former Section 32.0248, Human Resources Code, and that is intended
16 to expand access to preventive health and family planning services
17 for women in this state.

18 (b) The commission shall evaluate postpartum care services
19 provided to women enrolled in the Healthy Texas Women program after
20 the first 60 days of the postpartum period.

21 (c) Based on the commission's evaluation under Subsection
22 (b), the commission shall develop an enhanced, cost-effective, and
23 limited postpartum care services package for women enrolled in the
24 Healthy Texas Women program to be provided after the first 60 days
25 of the postpartum period.

26 SUBCHAPTER F. DELIVERY AND IMPROVEMENT OF MATERNAL HEALTH CARE

27 SERVICES INVOLVING MANAGED CARE ORGANIZATIONS

1 Sec. 32.151. DEFINITION. In this subchapter, "Healthy
2 Texas Women program" means a program operated by the commission
3 that is substantially similar to the demonstration project operated
4 under former Section 32.0248, Human Resources Code, and that is
5 intended to expand access to preventive health and family planning
6 services for women in this state.

7 Sec. 32.152. COORDINATION OF TRANSITION OF CARE.

8 (a) Subject to the eligibility requirements of the Healthy Texas
9 Women program, a managed care organization that contracts with the
10 commission under Chapter 533, Government Code, to provide health
11 care services under the medical assistance program shall coordinate
12 the transition of care from the medical assistance program to the
13 Healthy Texas Women program for women who will lose eligibility for
14 benefits under the medical assistance program.

15 (b) When possible, the commission shall seek to provide
16 continuity of care during the transition described by Subsection
17 (a) between health care providers in the provider network of a
18 managed care organization described by that subsection and health
19 care providers participating in the Healthy Texas Women program.

20 Sec. 32.153. POSTPARTUM DEPRESSION TREATMENT NETWORK.

21 Using money from an available source designated by the commission,
22 the commission, in collaboration with managed care organizations
23 that contract with the commission under Chapter 533, Government
24 Code, to provide health care services under the medical assistance
25 program and providers participating in the Healthy Texas Women
26 program, shall develop and implement a postpartum depression
27 treatment network for women enrolled in the medical assistance or

1 Healthy Texas Women program.

2 Sec. 32.154. STATEWIDE INITIATIVES TO IMPROVE QUALITY OF
3 MATERNAL HEALTH CARE. (a) The commission shall develop statewide
4 initiatives to improve the quality of maternal health care services
5 for women in this state. Each managed care organization that
6 contracts with the commission to provide health care services in
7 this state shall incorporate the initiatives in the organization's
8 managed care plans.

9 (b) A managed care organization required to incorporate the
10 initiatives in the organization's managed care plans under
11 Subsection (a) may incorporate any additional initiatives to
12 improve the quality of maternal health care services for women
13 receiving health care services through the organization.

14 Sec. 32.155. TRAINING ON SOCIAL DETERMINANTS OF HEALTH AND
15 USE OF COMMUNITY RESOURCES; REPORT. (a) In this section, "social
16 determinants of health" means the environmental conditions in which
17 an individual lives that affect the individual's health and quality
18 of life.

19 (b) The executive commissioner by rule shall require each
20 managed care organization that contracts with the commission to
21 provide health care services in this state to employ specialized
22 staff who are trained on social determinants of health and to use
23 available community resources to address maternal health care
24 disparities that exist for minority women and other high-risk
25 populations of women designated by the commission.

26 (c) Not later than September 1 of each even-numbered year,
27 the commission shall prepare and submit a report to the legislature

1 that outlines the efforts made by managed care organizations to
2 address maternal health care disparities under Subsection (b).

3 Sec. 32.156. ENROLLMENT OF CERTAIN PARTICIPANTS IN MANAGED
4 CARE. The commission shall immediately enroll a pregnant woman in a
5 managed care plan offered by a managed care organization providing
6 services under the program for which the woman is eligible instead
7 of initially providing prenatal care services to the woman on a
8 fee-for-service basis.

9 SECTION 4. The heading to Chapter 34, Health and Safety
10 Code, is amended to read as follows:

11 CHAPTER 34. TEXAS MATERNAL MORTALITY AND MORBIDITY REVIEW
12 COMMITTEE [~~TASK FORCE~~]

13 SECTION 5. Section 34.001, Health and Safety Code, is
14 amended by adding Subdivision (12-a) to read as follows:

15 (12-a) "Review committee" means the Texas Maternal
16 Mortality and Morbidity Review Committee.

17 SECTION 6. Sections 34.002, 34.003, 34.004, and 34.005,
18 Health and Safety Code, are amended to read as follows:

19 Sec. 34.002. TEXAS MATERNAL MORTALITY AND MORBIDITY REVIEW
20 COMMITTEE [~~TASK FORCE~~]. (a) The Texas Maternal Mortality and
21 Morbidity Review Committee [~~Task Force~~] is administered by the
22 department.

23 (b) The review committee [~~task force~~] is a
24 multidisciplinary advisory committee within the department and is
25 composed of the following 17 members:

26 (1) 15 members appointed by the commissioner as
27 follows:

- 1 (A) four physicians specializing in obstetrics,
2 at least one of whom is a maternal fetal medicine specialist;
3 (B) one certified nurse-midwife;
4 (C) one registered nurse;
5 (D) one nurse specializing in labor and delivery;
6 (E) one physician specializing in family
7 practice;
8 (F) one physician specializing in psychiatry;
9 (G) one physician specializing in pathology;
10 (H) one epidemiologist, biostatistician, or
11 researcher of pregnancy-related deaths;
12 (I) one social worker or social service provider;
13 (J) one community advocate in a relevant field;
14 (K) one medical examiner or coroner responsible
15 for recording deaths; and
16 (L) one physician specializing in critical care;
17 (2) a representative of the department's family and
18 community health programs; and
19 (3) the state epidemiologist for the department or the
20 epidemiologist's designee.

21 (c) In appointing members to the review committee [~~task~~
22 ~~force~~], the commissioner shall:

- 23 (1) include members:
24 (A) working in and representing communities that
25 are diverse with regard to race, ethnicity, immigration status, and
26 English proficiency; and
27 (B) from differing geographic regions in the

1 state, including both rural and urban areas;

2 (2) endeavor to include members who are working in and
3 representing communities that are affected by pregnancy-related
4 deaths and severe maternal morbidity and by a lack of access to
5 relevant perinatal and intrapartum care services; and

6 (3) ensure that the composition of the review
7 committee [~~task force~~] reflects the racial, ethnic, and linguistic
8 diversity of this state.

9 (d) The commissioner shall appoint from among the review
10 committee [~~task force~~] members a presiding officer.

11 (e) A member of the review committee [~~task force~~] appointed
12 under Subsection (b)(1) is not entitled to compensation for service
13 on the review committee [~~task force~~] or reimbursement for travel or
14 other expenses incurred by the member while conducting the business
15 of the review committee [~~task force~~].

16 (f) In carrying out its duties, the review committee [~~task~~
17 ~~force~~] may use technology, including teleconferencing or
18 videoconferencing, to eliminate travel expenses.

19 Sec. 34.003. TERMS; VACANCY. (a) Review committee [~~Task~~
20 ~~force~~] members appointed by the commissioner serve staggered
21 six-year terms, with the terms of four or five members, as
22 appropriate, expiring February 1 of each odd-numbered year.

23 (b) A review committee [~~task force~~] member may serve more
24 than one term.

25 (c) A vacancy on the review committee [~~task force~~] shall be
26 filled for the unexpired term in the same manner as the original
27 appointment.

1 Sec. 34.004. MEETINGS. (a) The review committee [~~task~~
2 ~~force~~] shall meet at least quarterly. The review committee [~~task~~
3 ~~force~~] may meet at other times at the call of the commissioner.

4 (b) Meetings of the review committee [~~task-force~~] are
5 subject to Chapter 551, Government Code, except that the review
6 committee [~~task-force~~] shall conduct a closed meeting to review
7 cases under Section 34.007.

8 (c) The review committee [~~task-force~~] shall:

9 (1) allow for public comment during at least one
10 public meeting each year;

11 (2) present in open session recommendations made under
12 Section 34.005 to help reduce the incidence of pregnancy-related
13 deaths and severe maternal morbidity in this state; and

14 (3) post public notice for meetings conducted for the
15 sole purpose of reviewing cases for selection under Section 34.007.

16 Sec. 34.005. DUTIES OF REVIEW COMMITTEE [~~TASK FORCE~~]. The
17 review committee [~~task-force~~] shall:

18 (1) study and review:

19 (A) cases of pregnancy-related deaths;

20 (B) trends, rates, or disparities in
21 pregnancy-related deaths and severe maternal morbidity;

22 (C) health conditions and factors that
23 disproportionately affect the most at-risk population as
24 determined in the joint biennial report required under Section
25 34.015; and

26 (D) best practices and programs operating in
27 other states that have reduced rates of pregnancy-related deaths;

1 (2) compare rates of pregnancy-related deaths based on
2 the socioeconomic status of the mother;

3 (3) determine the feasibility of the review committee
4 [~~task force~~] studying cases of severe maternal morbidity; and

5 (4) in consultation with the Perinatal Advisory
6 Council, make recommendations to help reduce the incidence of
7 pregnancy-related deaths and severe maternal morbidity in this
8 state.

9 SECTION 7. Section 34.0055(a), Health and Safety Code, is
10 amended to read as follows:

11 (a) Using existing resources, the commission, in
12 consultation with the review committee [~~task force~~], shall:

13 (1) make available to physicians and other persons
14 licensed or certified to conduct a substance use screening and
15 domestic violence screening of pregnant women information that
16 includes:

17 (A) guidance regarding best practices for
18 verbally screening a pregnant woman for substance use and verbally
19 screening a pregnant woman for domestic violence using a validated
20 screening tool; and

21 (B) a list of substance use treatment resources
22 and domestic violence prevention and intervention resources in each
23 geographic region of this state; and

24 (2) review and promote the use of educational
25 materials on the consequences of opioid drug use and on domestic
26 violence prevention and intervention during pregnancy.

27 SECTION 8. Section 34.006, Health and Safety Code, is

1 amended to read as follows:

2 Sec. 34.006. CONSULTATIONS AND AGREEMENTS WITH OUTSIDE
3 PARTIES. (a) The department and review committee [~~task force~~] may
4 consult with any relevant experts and stakeholders, including:

- 5 (1) anesthesiologists;
- 6 (2) intensivists or critical care physicians;
- 7 (3) nutritionists;
- 8 (4) substance abuse treatment specialists;
- 9 (5) hospital staff or employees;
- 10 (6) representatives of the state Medicaid program;
- 11 (7) paramedics or other emergency medical response
12 personnel;
- 13 (8) hospital-based risk management specialists;
- 14 (9) representatives of local health departments and
15 public health districts in this state;
- 16 (10) public health experts;
- 17 (11) government representatives or officials; and
- 18 (12) law enforcement officials.

19 (b) In gathering information, the department and review
20 committee [~~task force~~] may consult with representatives of any
21 relevant state professional associations and organizations,
22 including:

- 23 (1) District XI of the American Congress of
24 Obstetricians and Gynecologists;
- 25 (2) the Texas Association of Obstetricians and
26 Gynecologists;
- 27 (3) the Texas Nurses Association;

1 (4) the Texas Section of the Association of Women's
2 Health, Obstetric and Neonatal Nurses;

3 (5) the Texas Academy of Family Physicians;

4 (6) the Texas Pediatric Society;

5 (7) the Consortium of Texas Certified Nurse-Midwives;

6 (8) the Association of Texas Midwives;

7 (9) the Texas Hospital Association;

8 (10) the Texas Medical Association; and

9 (11) the Texas Public Health Association.

10 (c) In consulting with individuals or organizations under
11 Subsection (a) or (b), a member of the review committee [~~task force~~]
12 or employee of the department may not disclose any identifying
13 information of a patient or health care provider.

14 (d) The department on behalf of the review committee [~~task~~
15 ~~force~~] may enter into agreements with institutions of higher
16 education or other organizations consistent with the duties of the
17 department or review committee [~~task force~~] under this chapter.

18 SECTION 9. Sections 34.007(a) and (c), Health and Safety
19 Code, are amended to read as follows:

20 (a) The department shall determine a statistically
21 significant number of cases of pregnancy-related deaths for review.
22 The department shall either randomly select cases or select all
23 cases for the review committee [~~task force~~] to review under this
24 subsection to reflect a cross-section of pregnancy-related deaths
25 in this state.

26 (c) If feasible, the department may select cases of severe
27 maternal morbidity for review. In selecting cases under this

1 subsection, the department shall randomly select cases for the
2 review committee [~~task force~~] to review to reflect trends
3 identified under Subsection (b).

4 SECTION 10. Sections 34.008(a) and (b), Health and Safety
5 Code, are amended to read as follows:

6 (a) On selecting a case of pregnancy-related death or severe
7 maternal morbidity for review, the department shall, in accordance
8 with this section, obtain information relevant to the case to
9 enable the review committee [~~task force~~] to review the case. The
10 department shall provide the information to the review committee
11 [~~task force~~].

12 (b) The information provided to the review committee [~~task~~
13 ~~force~~] may not include identifying information of a patient or
14 health care provider, including:

15 (1) the name, address, or date of birth of the patient
16 or a member of the patient's family; or

17 (2) the name or specific location of a health care
18 provider that treated the patient.

19 SECTION 11. Sections 34.009(c), (d), (e), and (h), Health
20 and Safety Code, are amended to read as follows:

21 (c) Review committee [~~Task force~~] work product or
22 information obtained by the department under this chapter,
23 including information contained in an electronic database
24 established and maintained under Section 34.012, or any other
25 document or record, is confidential. This subsection does not
26 prevent the review committee [~~task force~~] or department from
27 releasing information described by Subsection (d) or (e) or from

1 submitting the report required by Section 34.015.

2 (d) Information is not confidential under this section if
3 the information is general information that cannot be connected
4 with any specific individual, case, or health care provider, such
5 as:

6 (1) total expenditures made for specified purposes;

7 (2) the number of families served by particular health
8 care providers or agencies;

9 (3) aggregated data on social and economic conditions;

10 (4) medical data and information related to health
11 care services that do not include any identifying information
12 relating to a patient or the patient's family;

13 (5) information, including the source, value, and
14 purpose, related to gifts, grants, or donations to or for use by the
15 review committee [~~task force~~]; and

16 (6) other statistical information.

17 (e) The review committee [~~task force~~] may publish
18 statistical studies and research reports based on information that
19 is confidential under this section, provided that the information:

20 (1) is published in the aggregate;

21 (2) does not identify a patient or the patient's
22 family;

23 (3) does not include any information that could be
24 used to identify a patient or the patient's family; and

25 (4) does not identify a health care provider.

26 (h) The review committee [~~task force~~] and the department
27 shall comply with all state and federal laws and rules relating to

1 the transmission of health information, including the Health
2 Insurance Portability and Accountability Act of 1996 (Pub. L.
3 No. 104-191) and rules adopted under that Act.

4 SECTION 12. Section 34.010, Health and Safety Code, is
5 amended to read as follows:

6 Sec. 34.010. SUBPOENA AND DISCOVERY. Review committee
7 [~~Task force~~] work product or information that is confidential under
8 Section 34.009 is privileged, is not subject to subpoena or
9 discovery, and may not be introduced into evidence in any
10 administrative, civil, or criminal proceeding against a patient, a
11 member of the family of a patient, or a health care provider.

12 SECTION 13. Section 34.011(a), Health and Safety Code, is
13 amended to read as follows:

14 (a) A member of the review committee [~~task force~~] or a
15 person employed by or acting in an advisory capacity to the review
16 committee [~~task force~~] and who provides information, counsel, or
17 services to the review committee [~~task force~~] is not liable for
18 damages for an action taken within the scope of the functions of the
19 review committee [~~task force~~].

20 SECTION 14. Sections 34.012(a) and (c), Health and Safety
21 Code, are amended to read as follows:

22 (a) The department may establish and maintain an electronic
23 database to track cases of pregnancy-related deaths and severe
24 maternal morbidity to assist the department and review committee
25 [~~task force~~] in performing functions under this chapter.

26 (c) The database may be accessed only by the department and
27 the review committee [~~task force~~] for the purposes described in

1 this chapter.

2 SECTION 15. Section 34.014, Health and Safety Code, is
3 amended to read as follows:

4 Sec. 34.014. FUNDING. The department may accept gifts and
5 grants from any source to fund the duties of the department and the
6 review committee [~~task force~~] under this chapter.

7 SECTION 16. Sections 34.015(a) and (b), Health and Safety
8 Code, are amended to read as follows:

9 (a) Not later than September 1 of each even-numbered year,
10 the review committee [~~task force~~] and the department shall submit a
11 joint report on the findings of the review committee [~~task force~~]
12 under this chapter to the governor, lieutenant governor, speaker of
13 the house of representatives, and appropriate committees of the
14 legislature.

15 (b) The report must include the review committee's [~~task
16 force's~~] recommendations under Section 34.005(4).

17 SECTION 17. Section 34.0155, Health and Safety Code, is
18 amended to read as follows:

19 Sec. 34.0155. REPORT ON PREGNANCY-RELATED DEATHS, SEVERE
20 MATERNAL MORBIDITY, AND POSTPARTUM DEPRESSION. The commission
21 shall:

22 (1) evaluate options for reducing pregnancy-related
23 deaths, focusing on the most prevalent causes of pregnancy-related
24 deaths as identified in the joint biennial report required under
25 Section 34.015, and for treating postpartum depression in
26 economically disadvantaged women;

27 (2) in coordination with the department and the review

1 committee [~~task force~~], identify strategies to:

2 (A) lower costs of providing medical assistance
3 under Chapter 32, Human Resources Code, related to severe maternal
4 morbidity and chronic illness; and

5 (B) improve quality outcomes related to the
6 underlying causes of severe maternal morbidity and chronic illness;
7 and

8 (3) not later than December 1 of each even-numbered
9 year, submit to the governor, the lieutenant governor, the speaker
10 of the house of representatives, the Legislative Budget Board, and
11 the appropriate standing committees of the legislature a written
12 report that includes:

13 (A) a summary of the commission's and
14 department's efforts to accomplish the tasks described by
15 Subdivisions (1) and (2); and

16 (B) a summary of the report required by Section
17 34.0156.

18 SECTION 18. Section 34.0156(a), Health and Safety Code, is
19 amended to read as follows:

20 (a) Using existing resources, the department, in
21 collaboration with the review committee [~~task force~~], shall promote
22 and facilitate the use among health care providers in this state of
23 maternal health and safety informational materials, including
24 tools and procedures related to best practices in maternal health
25 and safety.

26 SECTION 19. Section 34.017(b), Health and Safety Code, is
27 amended to read as follows:

1 (b) The department may not disclose the information
2 described by Subsection (a) to the review committee [~~task force~~] or
3 any other person.

4 SECTION 20. Section 34.018, Health and Safety Code, is
5 amended to read as follows:

6 Sec. 34.018. SUNSET PROVISION. (a) The review committee
7 [~~task force~~] is subject to Chapter 325, Government Code (Texas
8 Sunset Act). Unless continued in existence as provided by that
9 chapter, the review committee [~~task force~~] is abolished and this
10 chapter expires September 1, 2027 [~~2023~~].

11 (b) The Sunset Advisory Commission shall review the review
12 committee during the two-year period preceding the date the
13 department is scheduled for abolition under Section 1001.003, but
14 the review committee is continued in existence until the date
15 provided by Subsection (a). This subsection expires September 1,
16 2025.

17 SECTION 21. Section 1001.0712(c), Health and Safety Code,
18 is amended to read as follows:

19 (c) The department, in consultation with the Texas Maternal
20 Mortality and Morbidity Review Committee [~~Task Force~~], shall
21 examine national standards regarding the collection of death
22 information and may convene a panel of experts to advise the
23 department and the review committee [~~task force~~] in developing
24 recommendations for improving the collection of accurate
25 information related to cause of death.

26 SECTION 22. Section 34.001(14), Health and Safety Code, is
27 repealed.

1 SECTION 23. (a) In this section, "Healthy Texas Women
2 program" means a program operated by the Health and Human Services
3 Commission that is substantially similar to the demonstration
4 project operated under former Section 32.0248, Human Resources
5 Code, and that is intended to expand access to preventive health and
6 family planning services for women in this state.

7 (b) If the Centers for Medicare and Medicaid Services
8 approves the waiver submitted by the executive commissioner of the
9 Health and Human Services Commission under Section 1115 of the
10 federal Social Security Act (42 U.S.C. Section 1315) for the
11 Healthy Texas Women Section 1115 Demonstration Waiver, the
12 executive commissioner shall, as soon as practicable after the
13 waiver is granted, seek an amendment to the waiver to provide
14 enhanced services under the Healthy Texas Women program.

15 SECTION 24. The Health and Human Services Commission shall
16 submit the first report required under Section 32.155(c), Health
17 and Safety Code, as added by this Act, not later than September 1,
18 2020.

19 SECTION 25. As soon as practicable after the effective date
20 of this Act:

21 (1) the Texas Higher Education Coordinating Board
22 shall develop and publish the guidelines required under Section
23 61.05123, Education Code, as added by this Act;

24 (2) the executive commissioner of the Health and Human
25 Services Commission shall adopt rules as necessary to implement the
26 changes in law made by this Act; and

27 (3) the Health and Human Services Commission shall

1 apply for any federal money available to implement the model of care
2 described by Section 531.0738, Government Code, as added by this
3 Act.

4 SECTION 26. On the effective date of this Act:

5 (1) the Maternal Mortality and Morbidity Task Force is
6 renamed the Texas Maternal Mortality and Morbidity Review
7 Committee; and

8 (2) a reference in law to the task force means the
9 review committee.

10 SECTION 27. If before implementing any provision of this
11 Act a state agency determines that a waiver or authorization from a
12 federal agency is necessary for implementation of that provision,
13 the agency affected by the provision shall request the waiver or
14 authorization and may delay implementing that provision until the
15 waiver or authorization is granted.

16 SECTION 28. This Act takes effect immediately if it
17 receives a vote of two-thirds of all the members elected to each
18 house, as provided by Section 39, Article III, Texas Constitution.
19 If this Act does not receive the vote necessary for immediate
20 effect, this Act takes effect September 1, 2019.