**BILL ANALYSIS**

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| Senate Research Center | H.B. 133 |
| 87R168 KKR-D | By: Rose et al. (Kolkhorst) |
|  | Health & Human Services |
|  | 5/17/2021 |
|  | Engrossed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Concerns have been raised over data provided in the 2020 Texas Maternal Mortality and Morbidity Review Committee and Department of State Health Services Joint Biennial Report indicating that nearly 40 percent of maternal death cases in Texas reviewed in 2013 were pregnancy-related and that a majority of those deaths could have been prevented. Over the last several years, policy makers, researchers, and the public have focused a considerable amount of attention on the number of Texas women dying due to health issues arising during pregnancy or in the postpartum period. One factor that may be contributing to these deaths is a lack of comprehensive health coverage for many postpartum women.

H.B. 133 seeks to address this issue by providing for the continuation of Medicaid coverage to a woman who is eligible for Medicaid for Pregnant Women for a period of not less than 12 months following the date the woman delivers or experiences an involuntary miscarriage.

H.B. 133 amends current law relating to the Medicaid eligibility of certain women after a pregnancy.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 32.024, Human Resources Code, by adding Subsection (l-1) to require the Health and Human Services Commission to continue to provide medical assistance to a woman who is eligible for medical assistance for pregnant women for a period of not less than 12 months following the date the woman delivers or experiences an involuntary miscarriage.

SECTION 2. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes a delay of implementation until such a waiver or authorization is granted.

SECTION 3. Effective date: September 1, 2021.