

BILL ANALYSIS

C.S.S.B. 1149
By: Kolkhorst
Human Services
Committee Report (Substituted)

BACKGROUND AND PURPOSE

During the 86th Legislature, legislation was enacted directing the development and implementation of strategies to ensure the continuity of care for women who transition from Medicaid to the Healthy Texas Women program. Furthermore, under current law, case management services provided for Medicaid recipients under the children and pregnant women program are administered by the Department of State Health Services (DSHS). There have been calls to transition those case management services provided by DSHS to a Medicaid managed care model. C.S.S.B. 1149 seeks to provide for that transition and also to provide for the transition of Healthy Texas Women program services to a managed care program. The bill additionally requires information to be provided to certain women participating in the Healthy Texas Women program about eligibility requirements for and enrollment in a federally subsidized health benefit plan.

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 rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 3 of this bill.

ANALYSIS

C.S.S.B. 1149 amends the Government Code to require the Health and Human Services Commission (HHSC) to transition to a Medicaid managed care model for case management services provided to Medicaid recipients under the children and pregnant women program provided by the Department of State Health Services, as identified by the bill. The bill requires HHSC, in transitioning those services, to ensure the following:

- the provision of case management services through the managed care plan in which the recipient is enrolled to a recipient who receives benefits under the children and pregnant women program; and
- a seamless transition in case management for such recipients, in which case management services provided under the program are not interrupted.

C.S.S.B. 1149 amends the Health and Safety Code to remove provisions relating to assessing the provision of Healthy Texas Women program services through Medicaid managed care. The bill requires HHSC instead to contract with Medicaid managed care organizations (MCOs) to provide those services and to do the following in implementing that requirement:

- consult with the state Medicaid managed care advisory committee before contracting with MCOs to provide the services;

- identify barriers that prevent women from obtaining the services and seek opportunities to mitigate those barriers; and
- designate program service providers as significant traditional providers until at least the third anniversary of the date HHSC initially contracts with MCOs to provide the services.

C.S.S.B. 1149 requires HHSC and each MCO participating in the Healthy Texas Women program to provide a written notice containing information about eligibility requirements for and enrollment in a health benefit plan for which an enrollee receives a premium subsidy under the federal Patient Protection and Affordable Care Act based on family income to a woman who meets the following criteria:

- is enrolled in the Healthy Texas Women program; and
- has a household income that is more than 100 percent but not more than 200 percent of the federal poverty level.

The bill requires HHSC, in consultation with the Texas Department of Insurance, to develop the form and content of the notice, which must include the following:

- the latest information written in clear and easily understood language on available options for obtaining such a subsidized health benefit plan; and
- resources for receiving assistance in applying for and enrolling in that health benefit plan.

C.S.S.B. 1149 adds temporary provisions set to expire September 1, 2023, requiring HHSC, not later than January 1, 2023, to assess the feasibility, cost-effectiveness, and benefits of automatic enrollment in managed care for women who become pregnant while receiving services through the Healthy Texas Women program. The assessment must examine whether automatically enrolling those women leads to the delivery of prenatal care and services earlier in the women's pregnancies.

C.S.S.B. 1149 requires the executive commissioner of HHSC to adopt rules necessary to implement the bill's provisions. Implementation of a provision of the bill by HHSC is mandatory only if a specific legislative appropriation is made for that purpose.

EFFECTIVE DATE

September 1, 2021.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 1149 may differ from the engrossed in minor or nonsubstantive ways, the following summarizes the substantial differences between the engrossed and committee substitute versions of the bill.

The substitute includes requirements that did not appear in the engrossed for HHSC, in contracting with MCOs for the provision of Healthy Texas Women program services, to do the following:

- consult with the state Medicaid managed care advisory committee before contracting with the MCOs;
- identify and seek opportunities to mitigate barriers that prevent women from obtaining the services; and
- designate program service providers as significant traditional providers for a specified initial period.