

BILL ANALYSIS

S.B. 1829
By: Hinojosa
Human Services
Committee Report (Unamended)

BACKGROUND AND PURPOSE

The ability to communicate with Medicaid recipients is a basic and vital necessity. Modern technology offers timely and cost effective tools to maintain accurate recipient directories that contain basic contact information used by Medicaid managed care organizations (MCO) to communicate with enrolled recipients. Currently, these directories often contain inaccurate information due to many external factors such as Medicaid member turnover, address changes, and other data gathering challenges. Inaccurate contact information prevents MCOs from communicating important health care information to their recipients, which detracts from the quality of care and leads to negative outcomes. S.B. 1829 seeks to address this issue by requiring MCOs to maintain an accurate electronic directory of contact information for each recipient enrolled in a managed care plan offered by an MCO.

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

ANALYSIS

S.B. 1829 amends the Government Code to require the Health and Human Services Commission (HHSC) to do the following in accordance with a single source of truth design:

- maintain an accurate electronic directory of contact information for each recipient enrolled in a managed care plan offered by a Medicaid managed care organization (MCO), including, to the extent feasible, each recipient's home and work addresses, email address, and home, work, and mobile telephone numbers; and
- ensure that each MCO and enrollment broker participating in the Medicaid managed care program update the directory in real time.

The bill requires HHSC to seek to amend contracts entered into with MCOs under the program before the bill's effective date to require those MCOs to comply with the bill's provisions and establishes that an existing contract provision prevails to the extent of any conflict between the contract provision and the bill's provisions. The bill repeals the requirement for an MCO participating in the STAR + PLUS Medicaid managed care program or STAR Kids Medicaid managed care program to issue a provider network directory for the program in paper form to each program recipient unless the recipient opts out of receiving the directory in paper form.

S.B. 1829 repeals Section 533.0063(c), Government Code.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2021.