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By:  Powell S.B. No. 1858

A BILL TO BE ENTITLED

AN ACT

relating to a study and pilot program to evaluate the provision of prenatal and well child care in a group clinical setting and authority to take related action.

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

SECTION 1.  Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.02493 to read as follows:

Sec. 531.02493.  CURRICULUM-BASED GROUP WELL CHILD CARE PILOT PROGRAM. (a) The commission shall develop and, not later than March 1, 2022, implement a pilot program to increase the rate at which recipients attend well child health care visits, developmental screenings, and immunizations by providing those services through a curriculum-based group well child care model in a clinical setting.

(b)  The commission shall operate the pilot program in one or more geographic areas of this state.

(c)  In implementing the pilot program, the commission shall:

(1)  require a Medicaid managed care organization to provide enhanced reimbursement in an amount determined by the commission to a health care provider for providing curriculum-based group well child care to recipients; and

(2)  evaluate whether the enhanced reimbursement increases the rate of children receiving well child visits, developmental screenings, and immunizations.

(d)  The commission shall operate the pilot program for two years.

(e)  Not later than September 1, 2024, the commission shall submit to the governor, the lieutenant governor, the speaker of the house of representatives, and each standing committee of the legislature having primary jurisdiction over health and human services a written report that:

(1)  summarizes the results of the pilot program; and

(2)  recommends whether the pilot program should continue, be expanded, or terminate or if the commission should permanently implement enhanced reimbursement to health care providers for providing curriculum-based group well child care in a clinical setting.

(f)  The executive commissioner may adopt rules as necessary to implement this section.

(g)  This section expires September 1, 2025.

SECTION 2.  (a) In this section:

(1)  "Commission" means the Health and Human Services Commission.

(2)  "Medicaid" means the medical assistance program established under Chapter 32, Human Resources Code.

(3)  "Medicaid managed care organization" means a managed care organization as defined by Section 533.001, Government Code, that contracts with the commission under Chapter 533, Government Code, to provide health care services to Medicaid recipients.

(b)  The commission shall conduct a study regarding the provision of curriculum-based prenatal care and curriculum-based well child care offered in a group clinical setting. The study must:

(1)  evaluate the health benefits and potential cost savings to Medicaid that would result from implementing curriculum-based group prenatal care models, including implementation of those models using virtual modalities similar to those used during the COVID-19 pandemic;

(2)  evaluate the use of procedure codes under Medicaid for curriculum-based group prenatal care in a clinical setting;

(3)  reassess the provider types authorized to provide prenatal benefits in a group clinical setting under Medicaid by identifying provider types that deliver curriculum-based group prenatal care, including federally qualified health centers, hospitals, rural health clinics, and individual health care providers; and

(4)  explore options for promoting curriculum-based group well child care models under Medicaid, including by:

(A)  assessing the need for establishing a procedure code under Medicaid for the provision of curriculum-based group well child care in a clinical setting; and

(B)  promoting value-based payment arrangements between providers and Medicaid managed care organizations.

(c)  Not later than September 1, 2022, the commission shall:

(1)  prepare and submit a report on the findings of the study conducted under Subsection (b) of this section to the standing committees of the senate and house of representatives having jurisdiction over Medicaid; and

(2)  based on the assessment under Subsection (b)(3) of this section, update the health care provider types that may provide prenatal benefits in a group clinical setting under Medicaid.

(d)  This section expires September 1, 2023.

SECTION 3.  If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 4.  This Act takes effect September 1, 2021.