

By: Talarico

H.B. No. 331

A BILL TO BE ENTITLED

AN ACT

relating to establishing a universal maternal home visiting program.

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

SECTION 1. Chapter 32, Health and Safety Code, is amended by adding subsection 32.156 to read as follows:

Sec. 32.156. UNIVERSAL MATERNAL HOME VISITING. (a)

Accordingly, within 100 days the Department is directed to produce and post publicly a plan to make substantial progress annually over five years toward offering evidence-based maternal home visiting programs universally to eligible families.

(c) The plan may include (1) expansion of existing maternal home visiting programs; (2) proposed applications for federal and foundation grant funding; (3) "Pay for Success" social impact bonds; and/or (4) any other programs the Department identifies that would result in an efficient expansion of maternal home visiting service offerings. The plan should target expansion of maternal home visiting programs by at least 20% per year.

(d) The plan should detail which actions the Department can pursue on its own without additional legislative action, and, within 60 days of the plan's publication, the Department shall commence those programs.

(e) For aspects of the plan that would require additional action by the legislature, the Department shall include in the plan

1 specific requests and outlines of legislative action needed,
2 including budget requests.

3 (f) Definitions

4 (i) "maternal home visiting program" as defined in this
5 section means an evidence-based home visiting models that is proven
6 to improve child health and be cost effective, as measured by the
7 federal Home Visiting Evidence of Effectiveness (HomVEE) program.

8 (ii) "eligible families" means families who are eligible
9 for home visiting services under a service delivery model included
10 in the definition in (i).

11 (2) The authority shall design, implement and maintain a
12 voluntary statewide program to provide universal newborn nurse home
13 visiting services to all families with newborns residing in this
14 state to support healthy child development and strengthen
15 families. The authority shall design the universal newborn nurse
16 home visiting program to be flexible so as to meet the needs of the
17 communities where the program operates.

18 (3) In designing the program described in subsection (2) of
19 this section, the authority shall consult, coordinate and
20 collaborate, as necessary, with insurers that offer health benefit
21 plans in this state, hospitals, local public health authorities,
22 existing early childhood home visiting programs, community-based
23 organizations and social service providers.

24 (4) The program must provide nurse home visiting services
25 that are:

26 (a) Based on criteria established by the United States
27 Department of Health and Human Services for an evidence-based early

1 childhood home visiting service delivery model;

2 (b) Provided by registered nurses licensed in this state to
3 families caring for newborns up to the age of six months, including
4 foster and adoptive newborns;

5 (c) Provided in the family's home; and

6 (d) Aimed at improving outcomes in one or more of the
7 following domains:

8 (A) Child health;

9 (B) Child development and school readiness;

10 (C) Family economic self-sufficiency;

11 (D) Maternal health;

12 (E) Positive parenting;

13 (F) Reducing child mistreatment;

14 (G) Reducing juvenile delinquency;

15 (H) Reducing family violence; or

16 (I) Reducing crime.

17 (5) The services provided in the program must:

18 (a) Be voluntary and carry no negative consequences for a
19 family that declines to participate;

20 (b) Be offered in every community in this state;

21 (c) Include an evidence-based assessment of the physical,
22 social and emotional factors affecting the family;

23 (d) Be offered to all families with newborns residing in the
24 community where the program operates;

25 (e) Include at least one visit during a newborn's first
26 three months of life with the opportunity for the family to choose
27 up to three additional visits;

1 (f) Include a follow-up visit no later than three months
2 after the last visit; and

3 (g) Provide information and referrals to address each
4 family's identified needs.

5 (6) The authority shall collect and analyze data generated
6 by the program to assess the effectiveness of the program in meeting
7 the aims described in subsection (4)(d) of this section and shall
8 work with other state agencies to develop protocols for sharing
9 data, including the timely sharing of data with primary care
10 providers of care to the families with newborns receiving the
11 services.

12 (7) In collaboration with the Department of Insurance, the
13 authority shall adopt by rule, consistent with the provisions of
14 this section, criteria for universal newborn nurse home visiting
15 services that must be covered by health benefit plans in accordance
16 with section 2 of this Act.

17 SECTION 2. Chapter 1366, Insurance Code, is amended by
18 adding subsection 1366.060 to read as follows:

19 SECTION 1366.060. MATERNAL HOME VISITING COVERAGE. (a) A
20 health benefit plan offered in this state must reimburse the cost
21 of universal newborn nurse home visiting services as prescribed by
22 the Department of State Health Services by rule under section 1 (7)
23 of this 2019 Act.

24 (3) The coverage must be provided without any cost-sharing,
25 coinsurance or deductible applicable to the services.

26 (4) Carriers must offer the services in their health benefit
27 plans but enrollees are not required to receive the services as a

1 condition of coverage and may not be penalized or in any way
2 discouraged from declining the services.

3 (5) A carrier must notify an enrollee about the services
4 whenever an enrollee adds a newborn to coverage.

5 (6) A carrier may use in-network providers or may contract
6 with local public health authorities to provide the services.

7 (7) This section does not require a carrier to reimburse the
8 cost of the services in any specific manner. The services may be
9 reimbursed using:

10 (a) A value-based payment methodology;

11 (b) A claim invoicing process;

12 (c) Capitated payments;

13 (d) A payment methodology that takes into account the need
14 for a community-based entity providing the services to expand its
15 capacity to provide the services and address health disparities; or

16 (e) Any other methodology agreed to by the carrier and the
17 provider of the services.

18 (8) Carriers shall report to the authority, in the form and
19 manner prescribed by the authority, data regarding claims
20 submitted for services covered under this section to monitor the
21 provision of the services.

22 SECTION 3. This Act takes effect immediately if it receives
23 a vote of two-thirds of all the members elected to each house, as
24 provided by Section 39, Article III, Texas Constitution. If this
25 Act does not receive the vote necessary for immediate effect, this
26 Act takes effect September 1, 2021.