By: Howard, Rose, Guerra H.B. No. 2333

A BILL TO BE ENTITLED

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1	AN ACT
2	relating to the establishment of the home nursing visitation for
3	newborn caregivers competitive grant program.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Chapter 32, Health and Safety Code, is amended by
6	adding Subchapter G to read as follows:
7	SUBCHAPTER G. HOME NURSING VISITATION FOR NEWBORN CAREGIVERS GRANT
8	PROGRAM
9	Sec. 32.201. DEFINITIONS. In this subchapter:
10	(1) "Commissioner" means the commissioner of the
11	Department of Family and Protective Services.
12	(2) "Department" means the Department of Family and
13	Protective Services.
14	(3) "Program" means the home nursing visitation for
15	newborn caregivers grant program established under this
16	subchapter.
17	(4) "Service provider" means an entity that offers
18	free of charge home nursing visits for newborn caregivers.
19	Sec. 32.202. ESTABLISHMENT OF PROGRAM; RULES. (a) The
20	department shall establish and administer within the department's

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prevention and early intervention services division a competitive

grant program through which the department awards grants to

eligible service providers to provide or expand home nursing

visitation services for newborn caregivers.

- 1 (b) The department shall award grants under the program to
- 2 eligible service providers in a manner that ensures the grant
- 3 recipients:
- 4 (1) operate in multiple communities geographically
- 5 distributed throughout this state;
- 6 (2) have the capacity to offer home nursing visitation
- 7 services to all newborn caregivers within a defined service area,
- 8 including a birthing hospital service area, a municipality, or a
- 9 county; and
- 10 (3) commit to providing ongoing services to ultimately
- 11 serve the communities' entire newborn population and provide the
- 12 maximum possible health impact on that population.
- 13 (c) The commissioner shall adopt rules as necessary to
- 14 implement this subchapter.
- Sec. 32.203. SERVICE REQUIREMENTS. Home nursing visitation
- 16 services funded by a grant awarded under this subchapter must:
- 17 <u>(1) be offered free of charge to all newborn</u>
- 18 caregivers, including foster and adoptive families, within the
- 19 grant recipient's defined service area;
- 20 (2) be voluntary and may not impose negative
- 21 consequences on a newborn caregiver that chooses not to
- 22 participate;
- 23 (3) be provided by registered nurses in the newborn
- 24 caregiver's home whenever possible, using telehealth services when
- 25 necessary and feasible;
- 26 (4) include an evidence-based assessment of the
- 27 physical, social, and emotional factors affecting the health and

1	safety of the newborn caregiver's family;
2	(5) include at least one registered nurse visit to the
3	newborn caregiver not later than six weeks postpartum or six weeks
4	after the newborn is discharged from a newborn intensive care unit,
5	with the opportunity to receive not more than three registered
6	nurse visits as determined by the nurse's professional judgment;
7	(6) provide to a newborn caregiver information and
8	referrals tailored to the caregiver's needs, as identified by a
9	home nursing visit, and support the caregiver in navigating needed
10	services;
11	(7) include a follow-up call to the newborn caregiver
12	not later than three months after the last home nursing visit to
13	assess success in referrals and family satisfaction and to close
14	the case;
15	(8) strictly adhere to an evidence-based service
16	delivery model selected by the department in accordance with
17	criteria set by the United States Department of Health and Human
18	Services for an early childhood home visiting service delivery
19	model, including any clinical, programmatic, and data collection
20	requirements under the model;
21	(9) strive to improve outcomes in one or more of the
22	<pre>following categories:</pre>
23	(A) reduction of child abuse and neglect;
24	(B) child health;
25	(C) maternal health;
26	(D) reduction of family violence;
27	(E) child development;

1	(F) family economic self-sufficiency;
2	(G) completion of maternal follow-up and
3	well-child visits with health care providers;
4	(H) appropriate use of a health care facility's
5	<pre>emergency department; and</pre>
6	(I) increased positive parenting practices;
7	(10) require the home nursing visits to:
8	(A) be offered in partnership with the newborn
9	caregiver's attending obstetrician or gynecologist, maternal
10	health provider, or birthing hospital, if applicable; and
11	(B) begin not later than six weeks postpartum or
12	six weeks after a newborn is discharged from a newborn intensive
13	<pre>care unit; and</pre>
14	(11) continue for a period of at least two years.
15	Sec. 32.204. APPLICATION REQUIREMENTS. (a) A public or
16	private entity, including a county, municipality, or other
17	political subdivision of this state, may apply for a grant under
18	this subchapter.
19	(b) To apply for a grant, an applicant must submit a written
20	application to the department on a form prescribed by commissioner
21	rule in accordance with this section.
22	(c) The application form must:
23	(1) require the applicant to provide:
24	(A) information on the number of births by
25	hospital located in the defined service area in which the applicant
26	proposes to operate; and
27	(B) a description of existing services available

2 (2) describe the processes the department uses to 3 continually monitor and evaluate grant recipients under Section 32.208, including the grant recipient's obligations to: 4 5 (A) collect and provide information requested by 6 the department; and 7 (B) adhere to the evidence-based model selected 8 by the department; 9 (3) require the applicant to outline the applicant's 10 plan to collaborate and strengthen relationships with health care and social service providers to ensure the applicant's ability to 11 12 effectively connect newborn caregivers and the caregivers' 13 families to other community services when needed; and 14 (4) describe the applicant's plan for enrolling 15 newborn caregivers, including the applicant's partnerships with birthing hospitals and local maternal health care and pediatric 16 17 health care providers. Sec. 32.205. GRANT AWARD REQUIREMENTS. In determining 18 19 whether to award a grant to an applicant under this subchapter, the department shall consider the applicant's demonstrated capacity to 20 provide home nursing visitation services to newborn caregivers in 21 22 the defined service area in which the applicant proposes to provide services, which may be determined by considering: 23 24 (1) the applicant's ability to: (A) participate in continued monitoring and 25 26 performance evaluations under Section 32.208, including the

to newborn caregivers in the community;

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applicant's ability to collect and provide information requested by

1 the department; 2 (B) comply with program standards; and (C) develop broad-based community support and 3 leverage philanthropic support to implement or expand home nursing 4 5 visitation services for newborn caregivers; and 6 (2) the applicant's history of developing and 7 sustaining innovative, quality home nursing visitation services for newborn caregivers that meet the needs of families and 8 communities. 9 10 Sec. 32.206. WRITTEN AGREEMENT WITH GRANT RECIPIENT REQUIRED. Before awarding a grant under this subchapter, the 11 12 department shall enter into a written agreement with each applicant to be awarded a grant that requires the grant recipient to repay 13 this state, in accordance with terms specified in the agreement, 14 15 if: (1) the department determines the grant recipient has 16 17 not complied with the minimum standards and reporting requirements prescribed by this subchapter or rules adopted under this 18 19 subchapter or with any other applicable rules or standards prescribed by the commissioner or the department; or 20 21 (2) the grant recipient fails to use the grant money for the purposes for which the grant was awarded, in accordance with 22 <u>Section 32.207.</u> 23 24 Sec. 32.207. USE OF GRANT MONEY. Grant money awarded under

this subchapter may be used only to cover costs related to the grant

recipient administering, implementing, or expanding home nursing

visitation services for newborn caregivers, including costs

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- 1 related to:
- 2 (1) administering the home nursing visitation
- 3 services;
- 4 (2) training and managing registered nurses and other
- 5 staff who participate in providing the home nursing visitation
- 6 services;
- 7 (3) paying the salaries and expenses of registered
- 8 nurses and other required staff members who are essential to
- 9 delivering the home nursing visitation services;
- 10 (4) paying for facilities and equipment for providing
- 11 the home nursing visitation services; and
- 12 (5) paying for technical assistance to ensure a grant
- 13 recipient adheres to the evidence-based model selected by the
- 14 department.
- 15 Sec. 32.208. GRANT RECIPIENT MONITORING AND EVALUATION;
- 16 ANNUAL REPORT. (a) The department shall:
- 17 (1) adopt performance indicators designed to measure a
- 18 grant recipient's performance with respect to the program standards
- 19 adopted by commissioner rule that align with the evidence-based
- 20 model selected by the department; and
- 21 (2) use the performance indicators to continuously
- 22 <u>monitor and formally evaluate at least a</u>nnually the performance of
- 23 each grant recipient.
- (b) Not later than December 1 of each year, the department
- 25 shall prepare and submit a written report to the standing
- 26 committees of the legislature with primary jurisdiction over the
- 27 department regarding the performance of each grant recipient during

- 1 the preceding state fiscal year with respect to providing program
- 2 services and improving outcomes for newborns and their families.
- 3 Sec. 32.209. COMPETITIVE GRANT PROGRAM FUNDING. (a) The
- 4 department shall seek and apply for any available federal and state
- 5 money, including money available for Medicaid or the Children's
- 6 Health Insurance Program (CHIP), to assist in financing the
- 7 program.
- 8 (b) The department shall consult, collaborate, and
- 9 coordinate with health benefit plan issuers in this state,
- 10 including Medicaid managed care organizations, to identify
- 11 existing incentives and reimbursement strategies that could expand
- 12 the program.
- 13 (c) The department may solicit and accept gifts, grants, and
- 14 donations to operate the program.
- 15 SECTION 2. (a) As soon as practicable after the effective
- 16 date of this Act, the Department of Family and Protective Services
- 17 shall apply for any available federal money to finance the grant
- 18 program established by Subchapter G, Chapter 32, Health and Safety
- 19 Code, as added by this Act. If federal money is not available for
- 20 that purpose and notwithstanding any provision of this Act, the
- 21 department shall delay implementation of Subchapter G, Chapter 32,
- 22 Health and Safety Code, as added by this Act, until federal money
- 23 becomes available.
- 24 (b) Not later than September 1, 2022, the Department of
- 25 Family and Protective Services shall establish and implement the
- 26 grant program established by Subchapter G, Chapter 32, Health and
- 27 Safety Code, as added by this Act.

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- 1 (c) Not later than September 1, 2022, the commissioner of
- 2 the Department of Family and Protective Services shall adopt rules
- 3 necessary to implement Subchapter G, Chapter 32, Health and Safety
- 4 Code, as added by this Act.
- 5 (d) Not later than December 1, 2022, the Department of
- 6 Family and Protective Services shall submit a written report to the
- 7 standing committees of the legislature with primary jurisdiction
- 8 over the department regarding the implementation and status of the
- 9 grant program described by Subchapter G, Chapter 32, Health and
- 10 Safety Code, as added by this Act.
- 11 (e) Not later than December 1, 2023, the Department of
- 12 Family and Protective Services shall submit the initial report
- 13 required by Section 32.208, Health and Safety Code, as added by this
- 14 Act.
- SECTION 3. This Act takes effect September 1, 2021.