By: Raymond H.B. No. 4194

A BILL TO BE ENTITLED

AN ACT

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- 2 relating to the provision of home health care services under the
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 5 SECTION 1. Chapter 533, Government Code, is amended by
- 6 adding Subchapter C to read as follows:

Medicaid managed care program.

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7 <u>SUBCHAPTER C. HOME HEALTH CARE SERVICES</u>

- 8 Sec. 533.071. HOME HEALTH CARE PROVIDER RATINGS AND
- 9 STANDARDS. (a) The commission in collaboration with each managed
- 10 care organization contracted under this chapter shall develop and
- 11 implement a home health care provider rating system to rate
- 12 providers and measure quality standards for the delivery of
- 13 <u>long-term services and supports.</u>
- 14 (b) The commission shall require not less than 85 percent of
- 15 home health care services to be processed using the electronic
- 16 visit verification system.
- 17 (c) The commission shall audit home health care providers
- 18 periodically using the rating system under Subsection (a) and to
- 19 ensure compliance with Subsection (b).
- 20 Sec. 533.072. HOME HEALTH PATIENT TRANSFER AND
- 21 SOLICITATION. (a) The commission shall require each managed care
- 22 organization to implement a 15-day waiting period before a home
- 23 <u>health care attendant or employee or any recipient receiving</u>
- 24 services from the attendant or employee may transfer between home

- 1 health care providers.
- 2 (b) A recipient may not transfer between home health care
- 3 providers unless the recipient provides a legitimate reason for the
- 4 transfer and the provider from which the recipient is requesting a
- 5 transfer holds a poor rating as determined by the rating system
- 6 under Section 533.071(a).
- 7 (c) The commission shall evaluate policies and rules in
- 8 place to prevent the solicitation of home health care attendants or
- 9 employees or recipients receiving services from those attendants or
- 10 employees and shall seek to strengthen those policies and rules.
- 11 Sec. 533.073. PAYMENTS FOR HOME HEALTH CARE CLAIMS. The
- 12 commission shall require each managed care organization contracted
- 13 under this chapter to pay claims for home health care services not
- 14 later than the 10th day after the date on which the organization
- 15 <u>receives the claim.</u>
- Sec. 533.074. HOME HEALTH CARE ATTENDANT REQUIREMENTS. (a)
- 17 The commission shall develop minimum training requirements for home
- 18 health care attendants providing services under Medicaid.
- 19 (b) The commission shall develop a statewide no-hire list
- 20 for home health care attendants and include on the list the unique
- 21 identifier of an attendant who fails to meet the minimum training
- 22 requirements under Subsection (a). The no-hire list must be
- 23 accessible to managed care organizations contracted under this
- 24 chapter and home health care providers.
- 25 SECTION 2. If before implementing any provision of this Act
- 26 a state agency determines that a waiver or authorization from a
- 27 federal agency is necessary for implementation of that provision,

H.B. No. 4194

- 1 the agency affected by the provision shall request the waiver or
- 2 authorization and may delay implementing that provision until the
- 3 waiver or authorization is granted.
- 4 SECTION 3. This Act takes effect September 1, 2021.