RESOLUTION

BE IT RESOLVED by the House of Representatives of the State of Texas, 87th Legislature, Regular Session, 2021, That House Rule 13, Section 9(a), be suspended in part as provided by House Rule 13, Section 9(f), to enable the conference committee appointed to resolve the differences on House Bill 2658 (the Medicaid program, including the administration and operation of the Medicaid managed care program) to consider and take action on the following matter:

8 House Rule 13, Section 9(a)(4), is suspended to permit the 9 committee to add text on a matter not included in either the house 10 or senate version of the bill by adding the following new SECTION to 11 the bill:

SECTION 8. Section 32.0261, Human Resources Code, is amended to read as follows:

14 Sec. 32.0261. CONTINUOUS ELIGIBILITY. <u>(a) This section</u> 15 <u>applies only to a child younger than 19 years of age who is</u> 16 <u>determined eligible for medical assistance under this chapter.</u>

17 (b) The executive commissioner shall adopt rules in accordance with 42 U.S.C. Section 1396a(e)(12), as amended, to 18 provide for two consecutive periods of [a period of continuous] 19 between each certification and 20 eligibility for а child 21 recertification of the child's eligibility, subject to Subsections (f) and (h) [under 19 years of age who is determined to be eligible 22 23 for medical assistance under this chapter].

24 (c) The first of the two consecutive periods of eligibility

described by Subsection (b) must be continuous in accordance with 1 Subsection (d). The second of the two consecutive periods of 2 eligibility is not continuous and may be affected by changes in a 3 child's household income, regardless of whether those changes 4 occurred or whether the commission became aware of the changes 5 during the first or second of the two consecutive periods of 6 7 eligibility. (d) A [The rules shall provide that the] child remains 8 eligible for medical assistance during the first of the two 9 consecutive periods of eligibility, without additional review by 10 the commission and regardless of changes in the child's household 11 12 [resources or] income, until [the earlier of: [(1)] the end of the six-month period following the 13 14 date on which the child's eligibility was determined, except as 15 provided by Subsections (f)(1) and (h) [; or 16 [(2) the child's 19th birthday]. 17 (e) During the sixth month following the date on which a child's eligibility for medical assistance is certified or 18 recertified, the commission shall, in a manner that complies with 19 federal law, including verification plan requirements under 42 20 C.F.R. Section 435.945(j), review the child's household income 21 using electronic income data available to the commission. The 22 commission may conduct this review only once during the child's two 23 24 consecutive periods of eligibility. Based on the review: 25 (1) the commission shall, if the review indicates that 26 the child's household income does not exceed the maximum income for

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eligibility for the medical assistance program, provide for a

1 second consecutive period of eligibility for the child until the 2 child's required annual recertification, except as provided by 3 Subsection (h) and subject to Subsection (c); or 4 (2) the commission may, if the review indicates that 5 the child's household income exceeds the maximum income for eligibility for the medical assistance program, request additional 6 7 documentation to verify the child's household income in a manner 8 that complies with federal law. (f) If, after reviewing a child's household income under 9 10 Subsection (e), the commission determines that the household income exceeds the maximum income for eligibility for the medical 11 12 assistance program, the commission shall continue to provide medical assistance to the child until: 13 14 (1) the commission provides the child's parent or 15 guardian with a period of not less than 30 days to provide documentation demonstrating that the child's household income does 16 17 not exceed the maximum income for eligibility; and (2) the child's parent or guardian fails to provide the 18 19 documentation during the period described by Subdivision (1). (g) If a child's parent or guardian provides to the 20 commission within the period described by Subsection (f) 21 documentation demonstrating that the child's household income does 22 not exceed the maximum income for eligibility for the medical 23 24 assistance program, the commission shall provide for a second consecutive period of eligibility for the child until the child's 25 26 required annual recertification, except as provided by Subsection 27 (h) and subject to Subsection (c).

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1 (h) Notwithstanding any other period prescribed by this
2 section, a child's eligibility for medical assistance ends on the
3 child's 19th birthday.

4 (i) The commission may not recertify a child's eligibility
5 for medical assistance more frequently than every 12 months as
6 required by federal law.

7 (j) If a child's parent or guardian fails to provide to the commission within the period described by Subsection (f) 8 documentation demonstrating that the child's household income does 9 not exceed the maximum income for eligibility for the medical 10 assistance program, the commission shall provide the child's parent 11 or guardian with written notice of termination following that 12 period. The notice must include a statement that the child may be 13 14 eligible for enrollment in the child health plan under Chapter 62, 15 Health and Safety Code.

16 (k) In developing the notice, the commission shall consult 17 with health care providers, children's health care advocates, 18 family members of children enrolled in the medical assistance 19 program, and other stakeholders to determine the most user-friendly 20 method to provide the notice to a child's parent or guardian.

21 (1) The executive commissioner may adopt rules as necessary 22 to implement this section.

Explanation: This addition is necessary to provide for continuous eligibility and a periodic eligibility review for a child for Medicaid.

Frank

Speaker of the House

I certify that H.R. No. 1994 was adopted by the House on May 30, 2021, by the following vote: Yeas 138, Nays 0, 2 present, not voting.

Chief Clerk of the House