

By: Johnson

S.B. No. 651

A BILL TO BE ENTITLED

AN ACT

relating to a pilot project to improve health care outcomes and reduce costs under Medicaid by providing participating recipients with enhanced case management and other services to address certain social determinants of health.

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

SECTION 1. Chapter 533, Government Code, is amended by adding Subchapter F to read as follows:

SUBCHAPTER F. PILOT PROJECT TO ADDRESS CERTAIN SOCIAL DETERMINANTS OF HEALTH

Sec. 533.101. DEFINITIONS. In this subchapter:

(1) "Pilot project" means the pilot project established under Section 533.102.

(2) "Project participant" means an individual who participates in the pilot project.

(2) "Social determinants of health" means the environmental conditions in which an individual lives that affect the individual's health and quality of life.

Sec. 533.102. PILOT PROJECT FOR PROVIDING ENHANCED CASE MANAGEMENT AND OTHER SERVICES TO ADDRESS SOCIAL DETERMINANTS OF HEALTH. (a) The executive commissioner shall seek a waiver under Section 1115 of the federal Social Security Act (42 U.S.C. Section 1315) to the state Medicaid plan to develop and implement a five-year pilot project to improve the health care outcomes of

1 Medicaid recipients and reduce associated health care costs by
2 providing enhanced case management and other coordinated,
3 evidence-based, nonmedical intervention services designed to
4 directly address recipient needs related to the following social
5 determinants of health:

- 6 (1) housing instability;
- 7 (2) food insecurity;
- 8 (3) transportation insecurity;
- 9 (4) interpersonal violence; and
- 10 (5) toxic stress.

11 (b) The commission shall develop and implement the pilot
12 project with the assistance and involvement of Medicaid managed
13 care organizations, public or private stakeholders, and other
14 persons the commission determines appropriate.

15 (c) A pilot project established under this section shall be
16 conducted in one or more regions of this state as selected by the
17 commission.

18 Sec. 533.103. BENEFITS: CASE MANAGEMENT AND INTERVENTION
19 SERVICES. (a) The pilot project must assign a case manager to each
20 project participant. The case manager will determine, authorize,
21 and coordinate individualized nonmedical intervention services for
22 participants that directly address and improve the participants'
23 quality of life respecting one or more of the social determinants of
24 health described by Section 533.102.

25 (b) The commission shall prescribe the nonmedical
26 intervention services that may be provided to project participants,
27 which may include:

1 (1) the following services to address housing
2 instability:

3 (A) tenancy support and sustaining services;

4 (B) housing quality and safety improvement
5 services;

6 (C) legal assistance with connecting
7 participants to community resources to address legal issues, other
8 than providing legal representation or paying for legal
9 representation;

10 (D) one-time financial assistance to secure
11 housing; and

12 (E) short-term post-hospitalization housing;

13 (2) the following services to address food insecurity:

14 (A) assistance applying for benefits under the
15 supplemental nutrition assistance program or the federal special
16 supplemental nutrition program for women, infants, and children
17 administered by 42 U.S.C. Section 1786;

18 (B) assistance accessing school-based meal
19 programs;

20 (C) assistance locating and accessing food banks
21 or community-based summer and after-school food programs;

22 (D) nutrition counseling; and

23 (E) financial assistance for targeted nutritious
24 food or meal delivery services for individuals with medically
25 related special dietary needs if funding cannot be obtained through
26 other sources;

27 (3) the following services to address transportation

1 insecurity:

2 (A) educational assistance to gain access to
3 public and private forms of transportation, including
4 ride-sharing; and

5 (B) financial assistance for public
6 transportation or, if public transportation is not available,
7 private transportation to support participants' ability to access
8 pilot project services; and

9 (4) the following services to address interpersonal
10 violence and toxic stress:

11 (A) assistance with locating and accessing
12 community-based social services and mental health agencies with
13 expertise in addressing interpersonal violence;

14 (B) assistance with locating and accessing
15 high-quality child-care and after-school programs;

16 (C) assistance with locating and accessing
17 community engagement activities;

18 (D) navigational services focused on identifying
19 and improving existing factors posing a risk to the safety and
20 health of victims transitioning from traumatic situations,
21 including:

22 (i) obtaining a new phone number or mailing
23 address;

24 (ii) securing immediate shelter and
25 long-term housing;

26 (iii) making school arrangements to
27 minimize disruption of school schedules; and

1 (iv) connecting participants to
2 medical-legal partnerships to address overlap between health care
3 and legal needs;

4 (E) legal assistance for interpersonal
5 violence-related issues, including assistance securing a
6 protection order, other than providing legal representation or
7 paying for legal representation;

8 (F) assistance accessing evidence-based
9 parenting support; and

10 (G) assistance accessing evidence-based
11 maternal, infant, and early home visiting services.

12 Sec. 533.104. PARTICIPANT ELIGIBILITY. An individual is
13 eligible to participate in the pilot project if the individual:

14 (1) is a Medicaid recipient and receives benefits
15 through a Medicaid managed care model or arrangement under this
16 chapter;

17 (2) resides in a region in which the pilot project is
18 implemented; and

19 (3) meets other eligibility criteria established by
20 the commission for project participation, including:

21 (A) having or being at a higher risk than the
22 general population of developing a chronic or serious health
23 condition; and

24 (B) experiencing at least one of the social
25 determinants of health described by Section 533.102.

26 Sec. 533.105. RULES. The executive commissioner may adopt
27 rules to implement this subchapter.

1 Sec. 533.106. REPORT. Not later than September 1 of each
2 even-numbered year, the commission shall submit to the legislature
3 a report on the pilot project. The report must include:

4 (1) an evaluation of the pilot project's success in
5 reducing or eliminating poor health outcomes and reducing
6 associated health care costs; and

7 (2) a recommendation on whether the pilot project
8 should be continued, expanded, or terminated.

9 Sec. 533.107. EXPIRATION. This subchapter expires
10 September 1, 2027.

11 SECTION 2. As soon as practicable after the effective date
12 of this Act, the executive commissioner of the Health and Human
13 Services Commission shall apply for and actively pursue a waiver
14 under Section 1115 of the federal Social Security Act (42 U.S.C.
15 Section 1315) to the state Medicaid plan from the federal Centers
16 for Medicare and Medicaid Services or any other federal agency to
17 implement Subchapter F, Chapter 533, Government Code, as added by
18 this Act. The commission may delay implementing Subchapter F,
19 Chapter 533, Government Code, as added by this Act, until the waiver
20 applied for under this section is granted.

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