

1-1 By: Kolkhorst S.B. No. 1149
 1-2 (In the Senate - Filed March 8, 2021; March 18, 2021, read
 1-3 first time and referred to Committee on Health & Human Services;
 1-4 April 29, 2021, reported adversely, with favorable Committee
 1-5 Substitute by the following vote: Yeas 9, Nays 0; April 29, 2021,
 1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13	X			
1-14	X			
1-15	X			
1-16	X			
1-17	X			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 1149 By: Hall

1-19 A BILL TO BE ENTITLED
 1-20 AN ACT

1-21 relating to the transition of case management for children and
 1-22 pregnant women program services and Healthy Texas Women program
 1-23 services to a managed care program.

1-24 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-25 SECTION 1. Subchapter A, Chapter 533, Government Code, is
 1-26 amended by adding Section 533.002555 to read as follows:

1-27 Sec. 533.002555. TRANSITION OF CASE MANAGEMENT FOR CHILDREN
 1-28 AND PREGNANT WOMEN PROGRAM RECIPIENTS TO MANAGED CARE PROGRAM. (a)

1-29 In this section, "children and pregnant women program" means the
 1-30 benefits program provided under Medicaid and administered by the
 1-31 Department of State Health Services that provides case management
 1-32 services to children who have a health condition or health risk and
 1-33 pregnant women who have a high-risk condition.

1-34 (b) The commission shall transition to a Medicaid managed
 1-35 care model for case management services provided to recipients
 1-36 under the children and pregnant women program. In transitioning
 1-37 services under this section, the commission shall ensure a
 1-38 recipient is provided case management services through the managed
 1-39 care plan in which the recipient is enrolled.

1-40 (c) In implementing this section, the commission shall
 1-41 ensure:

1-42 (1) a seamless transition in case management for
 1-43 recipients receiving benefits under the children and pregnant women
 1-44 program; and

1-45 (2) case management services provided under the
 1-46 program are not interrupted.

1-47 SECTION 2. Subchapter F, Chapter 32, Health and Safety
 1-48 Code, is amended by amending Section 32.152 and adding Sections
 1-49 32.156 and 32.157 to read as follows:

1-50 Sec. 32.152. ~~[ASSESSING]~~ PROVISION OF HEALTHY TEXAS WOMEN
 1-51 PROGRAM SERVICES THROUGH MANAGED CARE. ~~[(a)]~~ The commission shall
 1-52 contract ~~[assess:~~

1-53 ~~[(1) the feasibility and cost-effectiveness of~~
 1-54 ~~contracting] with Medicaid managed care organizations to provide~~
 1-55 ~~Healthy Texas Women program services [through managed care in one~~
 1-56 ~~or more health care service regions in this state if the Healthy~~
 1-57 ~~Texas Women Section 1115 Demonstration Waiver is approved; and~~

1-58 ~~[(2) the potential impact of that delivery model on~~
 1-59 ~~women receiving services under the program].~~

1-60 ~~[(b) This section expires September 1, 2021.]~~

2-1 Sec. 32.156. INFORMATION ABOUT AVAILABILITY OF SUBSIDIZED
2-2 HEALTH INSURANCE COVERAGE. (a) The commission and each managed
2-3 care organization participating in the Healthy Texas Women program
2-4 shall provide a written notice containing information about
2-5 eligibility requirements for and enrollment in a health benefit
2-6 plan for which an enrollee receives a premium subsidy under the
2-7 Patient Protection and Affordable Care Act (Pub. L. No. 111-148),
2-8 based on family income, to a woman who:

2-9 (1) is enrolled in the Healthy Texas Women program;
2-10 and

2-11 (2) has a household income that is more than 100
2-12 percent but not more than 200 percent of the federal poverty level.

2-13 (b) The commission, in consultation with the Texas
2-14 Department of Insurance, shall develop the form and content of the
2-15 notice required under this section. The notice must include:

2-16 (1) the latest information written in clear and easily
2-17 understood language on available options for obtaining a subsidized
2-18 health benefit plan described by Subsection (a); and

2-19 (2) resources for receiving assistance applying for
2-20 and enrolling in that health benefit plan.

2-21 Sec. 32.157. ASSESSING AUTOMATIC ENROLLMENT OF CERTAIN
2-22 WOMEN IN MANAGED CARE. (a) Not later than January 1, 2023, the
2-23 commission shall assess the feasibility, cost-effectiveness, and
2-24 benefits of automatically enrolling in managed care the women who
2-25 become pregnant while receiving services through the Healthy Texas
2-26 Women program. The assessment must examine whether automatically
2-27 enrolling those women leads to the delivery of prenatal care and
2-28 services earlier in the women's pregnancies.

2-29 (b) This section expires September 1, 2023.

2-30 SECTION 3. As soon as practicable after the effective date
2-31 of this Act, the executive commissioner of the Health and Human
2-32 Services Commission shall adopt rules necessary to implement the
2-33 changes in law made by this Act.

2-34 SECTION 4. If before implementing any provision of this Act
2-35 a state agency determines that a waiver or authorization from a
2-36 federal agency is necessary for implementation of that provision,
2-37 the agency affected by the provision shall request the waiver or
2-38 authorization and may delay implementing that provision until the
2-39 waiver or authorization is granted.

2-40 SECTION 5. The Health and Human Services Commission is
2-41 required to implement a provision of this Act only if the
2-42 legislature appropriates money specifically for that purpose. If
2-43 the legislature does not appropriate money specifically for that
2-44 purpose, the Health and Human Services Commission may, but is not
2-45 required to, implement a provision of this Act using other
2-46 appropriations available for that purpose.

2-47 SECTION 6. This Act takes effect September 1, 2021.

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