

BILL ANALYSIS

H.B. 2802
By: Rose
Human Services
Committee Report (Unamended)

BACKGROUND AND PURPOSE

The Texas Association of Health Plans (TAHP) has recommended making it easier for Medicaid beneficiaries to receive important health information via text from their Medicaid managed care organization (MCO) or health plan provider by revising state law to create an "opt-out" option for contact from their MCO or health plan provider via telephone, text message, or email on matters regarding eligibility, enrollment, and other health care matters. State law currently allows this contact on an "opt-in" basis. TAHP recommends this change to make the application process easier and to improve applicant knowledge of important health care information or enrollment deadlines that are easily overlooked or misunderstood. H.B. 2802 seeks to implement this recommendation.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 2802 amends the Human Resources Code to make communication by a Medicaid managed care organization (MCO) or health plan provider via telephone, text message, or email to Medicaid recipients about health care matters the default by replacing the requirement for a Medicaid application form to include language allowing the applicant to opt in to that communication through the preferred contact methods with a requirement for the form to include language notifying the applicant of their authority to opt out of being contacted via those methods. The bill specifies that Medicaid eligibility and enrollment are included among the health care matters for which communication preferences may be indicated on the form.

H.B. 2802 amends the Government Code to include telephone communication among the forms of communication between Medicaid MCOs and Medicaid recipients for which the executive commissioner of the Health and Human Services Commission (HHSC) must adopt and publish guidelines. The bill requires HHSC, in adopting those communication guidelines for a Medicaid recipient enrolled in an MCO's plan who provides their contact information to the MCO through any method other than their Medicaid application, to allow the MCO to communicate with the recipient through any electronic means, including telephone, text message, and email, regarding eligibility, enrollment, and other health care matters. The bill prohibits HHSC, in adopting the guidelines for those recipients, from requiring the MCO to submit the recipient's contact preference information to HHSC.

H.B. 2802 requires the executive commissioner of HHSC, not later than January 1, 2024, to adopt revised communication guidelines for Medicaid MCOs and a revised Medicaid application form that conform to the bill's provisions. The bill provides for the delayed implementation of any provision for which an applicable state agency determines a federal waiver or authorization is necessary for implementation until the waiver or authorization is requested and granted.

EFFECTIVE DATE

September 1, 2023.