

BILL ANALYSIS

C.S.H.B. 3231
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County Affairs
Committee Report (Substituted)

BACKGROUND AND PURPOSE

The Bexar County Hospital District's health care provider participation program is set to expire December 31, 2023, and needs to be extended. This program allows for the collection of payments from nonpublic hospitals that are deposited into a local provider participation fund to fund intergovernmental transfers, uniform rate enhancement payments for nonpublic hospitals in the Medicaid managed care service area, and payments to nonpublic hospitals or Medicaid managed care organizations that are dedicated for payment to hospitals. Intergovernmental transfers are used by the Health and Human Services Commission as the nonfederal share to draw down Medicaid supplemental payments. By extending the district's program, the district can continue to collect payments from nonpublic hospitals to help continue to alleviate payments for Medicaid related services and make sure that costs can be mutually covered. C.S.H.B. 3231 seeks to address this issue by postponing the expiration of the district's authority to administer and operate a program from December 31, 2023, to December 31, 2027.

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

C.S.H.B. 3231 amends the Health and Safety Code to postpone the expiration of the Bexar County Hospital District's authority to administer and operate a health care provider participation program, and the expiration of provisions governing the program, from December 31, 2023, to December 31, 2027.

C.S.H.B. 3231 authorizes the district to impose and collect interest and penalties on delinquent mandatory payments assessed under the program in any amount that does not exceed the maximum amount authorized for other delinquent payments owed to the district.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2023.

COMPARISON OF INTRODUCED AND SUBSTITUTE

While C.S.H.B. 3231 may differ from the introduced in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

Whereas the introduced authorized a qualifying local government to impose and collect interest charges and penalties on delinquent mandatory payments authorized under the program in amounts up to the maximum authorized for any other delinquent payment required to be made to the district, the substitute instead authorizes the district to impose and collect interest and penalties on delinquent mandatory payments assessed under the program in any amount that does not exceed the maximum amount authorized for other delinquent payments owed to the district.

The substitute omits provisions present in the introduced relating to the program that did the following:

- revised provisions relating to institutional health care provider reporting and the local provider participation fund;
- revised provisions relating to mandatory payments, including changing the nature of a mandatory payment from a mandatory payment that is assessed on net patient revenue to a mandatory payment that is assessed on an assessment basis; and
- defined "assessment basis."