

BILL ANALYSIS

H.B. 5274
By: Bucy
Human Services
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Most Medicaid and CHIP services in Texas are delivered through contracts with managed care organizations (MCOs), which are entities that function similarly to health plans to cover the costs of health care services. Expedited credentialing for these MCOs, which was introduced in 2015, allows providers to serve Medicaid recipients on a provisional basis while their credentialing application is pending. Once the applicant provider submits the required information, the provider will be reimbursed as if they were in the MCO's network, similar to a private health plan.

The current credentialing process for a variety of health care and therapy services can be lengthy and burdensome, and each day that it takes to credential a provider is another day that a person in need cannot access care. Though there is already an expedited credentialing process in place, the Health and Human Services Commission has not added any new providers to the list of those eligible for expedited credentialing since the last review in 2017. This means that this list has not been updated to reflect the current needs of the community. Examples of providers that could be added to this list include applied behavior analysts, speech therapists, occupational therapists, among others necessary services.

H.B. 5274 seeks to address this issue by directing the Health and Human Services Commission to annually, or as new programs are added, review the list of providers eligible for expedited credentialing and to add new providers as needed.

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. 5274 amends the Government Code to update the provision requiring the Health and Human Services Commission (HHSC) to identify the types of providers for which an expedited credentialing process must be established and implemented for purposes of the state's Medicaid managed care program to make it an ongoing requirement. The bill requires HHSC, at the time HHSC establishes a new Medicaid program and not less frequently than annually, to conduct a review and identify the types of providers for which such a program must be established and implemented. 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.