

BILL ANALYSIS

S.B. 2193
By: LaMantia
Health Care Reform, Select
Committee Report (Unamended)

BACKGROUND AND PURPOSE

The cost of providing health coverage is the number one problem facing many small business owners according to findings from both the National Federation of Independent Business and the Commonwealth Fund. An Urban Institute study estimates two-thirds of uninsured Texans are in working families. Direct primary care is a model of providing health care services in which the care is paid for by a monthly flat membership fee per patient and the patient receives unrestricted access to the physician. The Mercatus Center suggests that this care model incentivizes preventative and holistic care, which can be better for the patient's health and lower costs. Federally qualified health centers (FQHCs) provide a wide array of primary and preventive care services, and working Texas families could benefit from a program in which they receive direct primary care services and other related care from an FQHC. S.B. 2193 seeks to lower the number of uninsured or underinsured Texans who lack access to quality primary care by providing for the operation and financing of a federal qualified health center primary care access program to be operated by FQHCs.

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

S.B. 2193 amends the Health and Safety Code to provide for the operation and financing of a federal qualified health center primary care access program with the stated purpose of doing the following:

- increasing access to primary care services at federally qualified health centers (FQHCs) for low-income or at-risk individuals;
- improving the health of the employees of participating employers and their families by improving access to health care;
- contributing to economic development by assisting small businesses in remaining competitive through employment of a healthy workforce and provision of health care benefits that attract employees; and
- encouraging innovative solutions for providing and funding health care services and benefits for participating employees.

S.B. 2193 authorizes an FQHC to establish and operate a primary care access program for the provision of primary care services and benefits directly to the employees of participating

employers and their dependents within the FQHC's service area. The bill requires the program, to the extent practicable, to do the following within the service area:

- reduce the number of individuals who lack access to primary care services;
- reduce the cost of primary care services for small business employers and their employees;
- promote preventive care and reduce the incidence of preventable health conditions, such as heart disease, cancer, diabetes, and low birth weight in infants;
- promote efficient and collaborative delivery of primary care services;
- serve as a model for the innovative use of health information technology; and
- provide fair payment rates for participating health care providers.

An FQHC may require that participating employees and dependents obtain primary health care services provided under such a program only from health care providers at the FQHC. The bill establishes that the FQHC operating the program is not subject to regulation by the Texas Department of Insurance (TDI) as an insurer or a health maintenance organization.

S.B. 2193 authorizes the FQHC to establish program participation criteria for employers, employees of the employer, and the employees' dependents. The FQHC may do the following:

- require participating employers and their employees to pay a share of the premium or other cost of the primary care services;
- contract with a health foundation or other nonprofit organization to support payment of the employer's or employee's share; and
- screen employees and their dependents for eligibility to enroll in other state programs and for federal subsidies in the health insurance marketplace.

The bill authorizes the FQHC to accept gifts, grants, or donations from any source to administer and finance the program. The bill requires the FQHC to actively solicit gifts, grants, and donations to fund primary care services and benefits provided under the program and to reduce the cost of program participation for employers and their employees.

S.B. 2193 requires TDI, in collaboration with the Health and Human Services Commission (HHSC), to establish and administer a grant program to award grants to FQHCs operating a primary care access program. In awarding a grant, TDI must consider whether the program will accomplish the bill's stated purposes for the program and meet the established program objectives. The bill requires TDI to establish performance objectives for a grant recipient and monitor whether the recipient meets these objectives. The bill authorizes TDI to accept gifts, grants, or donations from any source to administer and finance the grant program, in addition to money appropriated by the legislature.

S.B. 2193 requires TDI and HHSC, not later than December 1 of each even-numbered year, to jointly submit to the governor, lieutenant governor, and speaker of the house of representatives a report that does the following:

- evaluates the success of the program in accomplishing the stated purposes of the bill; and
- recommends any legislative or other action necessary to facilitate or improve the program.

EFFECTIVE DATE

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