

By: Rose, Jones of Harris, Plesa, et al.

H.B. No. 2802

A BILL TO BE ENTITLED

AN ACT

relating to the Medicaid application form and communication with  
Medicaid recipients.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 533.008, Government Code, is amended by  
amending Subsection (c) and adding Subsection (d) to read as  
follows:

(c) The executive commissioner shall adopt and publish  
guidelines for Medicaid managed care organizations regarding how  
organizations may communicate by telephone, text message, or e-mail  
with recipients enrolled in the organization's managed care plan  
using the contact information provided in a recipient's application  
for Medicaid benefits under Section 32.025(g)(2), Human Resources  
Code, including updated information provided to the organization in  
accordance with Section 32.025(h), Human Resources Code.

(d) In adopting the guidelines under Subsection (c) for a  
recipient enrolled in a Medicaid managed care organization's  
managed care plan who provides to the organization the recipient's  
contact information through any method other than the recipient's  
Medicaid application, the commission:

(1) must allow the organization to communicate with  
the recipient through any electronic means, including telephone,  
text message, and e-mail, regarding eligibility, enrollment, and  
other health care matters; and

1           (2) may not require the organization to submit the  
2 recipient's contact preference information to the commission.

3           SECTION 2. Section 32.025(g), Human Resources Code, is  
4 amended to read as follows:

5           (g) The application form, including a renewal form, adopted  
6 under this section must include:

7           (1) for an applicant who is pregnant, a question  
8 regarding whether the pregnancy is the woman's first gestational  
9 pregnancy;

10           (2) for all applicants, a question regarding the  
11 applicant's preferences for being contacted by a managed care  
12 organization or health plan provider [~~that provides the applicant~~  
13 ~~with the option to be contacted~~] by telephone, text message, or  
14 e-mail about eligibility, enrollment, and other health care  
15 matters, including reminders for appointments and information  
16 about immunizations or well check visits; and

17           (3) language that:

18           (A) notifies the applicant that, if determined  
19 eligible for benefits, all preferred contact methods listed on the  
20 application and renewal forms will be shared with the applicant's  
21 managed care organization or health plan provider;

22           (B) notifies [~~allows~~] the applicant that the  
23 applicant may opt out of [~~to consent to~~] being contacted by  
24 telephone, text message, or e-mail [~~through the preferred contact~~  
25 ~~methods~~] by notifying the applicant's managed care organization or  
26 health plan provider; and

27           (C) explains the security risks of electronic

1 communication.

2           SECTION 3. Not later than January 1, 2024, the executive  
3 commissioner of the Health and Human Services Commission shall  
4 adopt revised communication guidelines for Medicaid managed care  
5 organizations that conform to the requirements of Section 533.008,  
6 Government Code, as amended by this Act, and a revised application  
7 form for medical assistance benefits that conforms to the  
8 requirements of Section 32.025(g), Human Resources Code, as amended  
9 by this Act.

10           SECTION 4. If before implementing any provision of this Act  
11 a state agency determines that a waiver or authorization from a  
12 federal agency is necessary for implementation of that provision,  
13 the agency affected by the provision shall request the waiver or  
14 authorization and may delay implementing that provision until the  
15 waiver or authorization is granted.

16           SECTION 5. This Act takes effect September 1, 2023.