By: Rose H.B. No. 2802

A BILL TO BE ENTITLED

1 AN ACT

2 relating to the Medicaid application form and communication with

- 3 Medicaid recipients.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 5 SECTION 1. Section 533.008, Government Code, is amended by
- 6 amending Subsection (c) and adding Subsection (d) to read as
- 7 follows:
- 8 (c) The executive commissioner shall adopt and publish
- 9 quidelines for Medicaid managed care organizations regarding how
- 10 organizations may communicate by telephone, text message, or e-mail
- 11 with recipients enrolled in the organization's managed care plan
- 12 using the contact information provided in a recipient's application
- 13 for Medicaid benefits under Section 32.025(g)(2), Human Resources
- 14 Code, including updated information provided to the organization in
- 15 accordance with Section 32.025(h), Human Resources Code.
- 16 (d) In adopting the guidelines under Subsection (c) for a
- 17 recipient enrolled in a Medicaid managed care organization's
- 18 managed care plan who provides to the organization the recipient's
- 19 contact information through any method other than the recipient's
- 20 Medicaid application, the commission:
- 21 (1) must allow the organization to communicate with
- 22 the recipient through any electronic means, including telephone,
- 23 text message, and e-mail, regarding eligibility, enrollment, and
- 24 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(q), 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 <u>eligibility</u>, <u>enrollment</u>, and <u>other</u> 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) <u>notifies</u> [allows] the applicant <u>that the</u>
- 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
- (C) explains the security risks of electronic

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