

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

SECTION 1. It is the intent of the legislature to improve health outcomes for pregnant women and their children through the case management for children and pregnant women program. In recognizing that nonmedical factors impact health outcomes, this legislation, in part, authorizes Medicaid to provide case management services for nonmedical needs that will improve health outcomes for pregnant women and their children.

SECTION 2. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.024183 to read as follows:

Sec. 531.024183. STANDARDIZED SCREENING QUESTIONS FOR ASSESSING NONMEDICAL HEALTH-RELATED NEEDS OF CERTAIN PREGNANT WOMEN; INFORMED CONSENT. (a) In this section, "alternatives to abortion program" means the program established by the commission to enhance and increase resources that promote childbirth for women facing unplanned pregnancy, or a successor program.

(b) The commission shall adopt standardized screening questions designed to screen for, identify, and aggregate data regarding the nonmedical health-related needs of pregnant women eligible for benefits under a public benefits program administered by the commission or another health and human services agency, including:

(1) Medicaid; and

(2) the alternatives to abortion program.

(c) Subject to Subsection (d), the standardized screening questions must be used by Medicaid managed care

SENATE VERSION (CS)

SECTION 1. Same as House version.

SECTION 2. Same as House version.

CONFERENCE

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

SENATE VERSION (CS)

CONFERENCE

organizations and providers participating in the alternatives to abortion program.

(d) A managed care organization or provider participating in a public benefits program described by Subsection (b), including the alternatives to abortion program, may not perform a screening of a pregnant woman using the standardized screening questions required by this section unless the organization or provider:

(1) informs the woman:

(A) about the type of data that will be collected during the screening and the purposes for which the data will be used; and

(B) that the collected data will become part of the woman's medical record or service plan; and

(2) obtains the woman's informed consent to perform the screening.

(e) A managed care organization or provider participating in a public benefits program described by Subsection (b), including the alternatives to abortion program, must provide to the commission, in the form and manner prescribed by the commission, data the organization or provider collects using the standardized screening questions required by this section.

(f) Not later than December 1 of each even-numbered year, the commission shall prepare and submit to the legislature a report that, using de-identified information, summarizes the data collected and provided to the commission under Subsection (e) during the previous biennium. In accordance with Section 531.014, the commission may consolidate the report required under this subsection with any other report to the legislature required under this chapter or another law that relates to the same subject matter.

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

SECTION 3. Chapter 531, Government Code, is amended by adding Subchapter Q to read as follows:

SUBCHAPTER Q. CASE MANAGEMENT SERVICES FOR CERTAIN PREGNANT WOMEN

Sec. 531.651. DEFINITIONS. In this subchapter:

(1) "Case management for children and pregnant women program" means the "children and pregnant women program," as defined by Section 533.002555.

(2) "Nonmedical health-related needs screening" means a screening performed using the standardized screening questions required under Section 531.024183.

(3) "Program services" means case management services provided under the case management for children and pregnant women program, including assistance provided to a Medicaid managed care organization in coordinating the provision of benefits to a recipient enrolled in the organization's managed care plan in a manner that is consistent with the recipient's plan of care.

Sec. 531.652. MEDICAID MANAGED CARE ORGANIZATION SERVICE COORDINATION BENEFITS NOT AFFECTED. The provision of program services to a recipient does not preempt or otherwise affect a Medicaid managed care organization's obligation to provide service coordination benefits to the recipient.

Sec. 531.653. CASE MANAGEMENT FOR CHILDREN AND PREGNANT WOMEN PROGRAM: PROVIDER QUALIFICATIONS. Program services may be provided only by a provider who completes the standardized case management training required by the commission under Section 531.654 and who is:

SENATE VERSION (CS)

SECTION 3. Same as House version.

CONFERENCE

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

SENATE VERSION (CS)

CONFERENCE

(1) an advanced practice nurse who holds a license, other than a provisional or temporary license, under Chapter 301, Occupations Code;

(2) a registered nurse who holds a license, other than a provisional or temporary license, under Chapter 301, Occupations Code, and:

(A) completed a baccalaureate degree program in nursing;  
or

(B) completed an associate degree program in nursing and has:

(i) at least two years of cumulative paid full-time work experience; or

(ii) at least two years of cumulative, supervised full-time educational internship or practicum experience obtained in the last 10 years that included assessing the psychosocial and health needs of and making community referrals of:

(a) children who are 21 years of age or younger; or

(b) pregnant women;

(3) a social worker who holds a license, other than a provisional or temporary license, under Chapter 505, Occupations Code, appropriate for the individual's practice, including the practice of independent social work;

(4) a community health worker as defined by Section 48.001, Health and Safety Code, who is certified by the Department of State Health Services; or

(5) a doula who is certified by a recognized national certification program, as determined by the commission, unless the doula qualifies as a certified community health worker under Subdivision (4).

Sec. 531.654. CASE MANAGEMENT FOR CHILDREN AND PREGNANT WOMEN PROGRAM: PROVIDER TRAINING. The commission shall require that each

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

SENATE VERSION (CS)

CONFERENCE

provider of program services complete training prescribed by the commission. The training must be trauma-informed and include instruction on:

(1) social services provided by this state and local governments in this state;

(2) community assistance programs, including programs providing:

(A) nutrition and housing assistance;

(B) counseling and parenting services;

(C) substance use disorder treatment; and

(D) domestic violence assistance and shelter;

(3) domestic violence and coercive control dynamics;

(4) methods for explaining and eliciting an eligible recipient's informed consent to receive:

(A) program services screening; and

(B) any services that may be offered as a result of the screening; and

(5) procedures for:

(A) an eligible recipient to:

(i) decline program services screening; or

(ii) withdraw consent for offered services; and

(B) ensuring that the recipient is not subject to any retaliatory action for declining or discontinuing any screenings or services.

Sec. 531.655. INITIAL MEDICAL AND NONMEDICAL HEALTH-RELATED SCREENINGS OF CERTAIN RECIPIENTS. (a) A Medicaid managed care organization that provides health care services to a pregnant woman under the STAR Medicaid managed care program shall conduct an initial health needs screening and nonmedical health-related needs screening of each pregnant recipient to determine,

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

regardless of whether the recipient is considered to have a high-risk pregnancy, if the recipient:

(1) is eligible for service coordination benefits to be provided by the managed care organization; or

(2) should be referred for program services.

(b) Service coordination benefits described by Subsection (a) must include identifying and coordinating the provision of non-covered services, community supports, and other resources the Medicaid managed care organization determines will improve the recipient's health outcomes.

(c) A Medicaid managed care organization must use the results of the screenings conducted under Subsection (a) to determine if a recipient requires a more comprehensive assessment for purposes of determining whether the recipient is eligible for service coordination benefits or program services.

Sec. 531.656. SCREENING AND PROGRAM SERVICES OPTIONAL. A Medicaid managed care organization providing screenings under Section 531.655 must inform each pregnant woman who is referred for program services or for whom screening is conducted under that section that:

(1) the woman has a right to decline the screening or services or choose to discontinue the screening or services at any time; and

(2) declining or discontinuing the screening or services will not result in retaliatory action against the woman in the provision of other services.

SECTION 4. Section 32.024, Human Resources Code, is amended by adding Subsections (pp) and (qq) to read as follows:

SENATE VERSION (CS)

SECTION 4. Section 32.024, Human Resources Code, is amended by adding Subsections (pp) and (qq) to read as follows:

CONFERENCE

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

(pp) For purposes of enrollment as a provider and reimbursement under the medical assistance program, the commission shall establish a separate provider type for a community health worker who provides case management services under the case management for children and pregnant women program under Section 531.653(4), Government Code.

(qq) For purposes of enrollment as a provider and reimbursement under the medical assistance program, the commission shall establish a separate provider type for a doula who is certified by a recognized national doula certification program approved by the commission.

SECTION 5. (a) In this section:

(1) "Case management for children and pregnant women program" has the meaning assigned by Section 531.651, Government Code, as added by this Act.

(2) "Commission" means the Health and Human Services Commission.

(b) Not later than December 1, 2024, the commission shall prepare and submit to the legislature a status report on the implementation of case management services provided to pregnant women under the case management for children and pregnant women program during the preceding fiscal year. The report must include de-identified information about:

SENATE VERSION (CS)

(pp) For purposes of enrollment as a provider and reimbursement under the medical assistance program, the commission shall establish a separate provider type for a community health worker who provides case management services under the case management for children and pregnant women program under Section 531.653(4), Government Code.

(qq) For purposes of enrollment as a provider and reimbursement under the medical assistance program, the commission shall establish a separate provider type for a doula who:

(1) is certified by a recognized national doula certification program approved by the commission; and

(2) provides case management services under the case management for children and pregnant women program under Section 531.653(5), Government Code.

SECTION 5. Same as House version.

CONFERENCE

**House Bill 1575**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

- (1) the nonmedical health-related needs of the women receiving case management services;
- (2) the number and types of referrals made of women to nonmedical community assistance programs and providers; and
- (3) the birth outcomes for the women.

SECTION 6. As soon as practicable after the effective date of this Act, the Health and Human Services Commission shall:

- (1) develop the standardized screening questions as required by Section 531.024183, Government Code, as added by this Act; and
- (2) revise the commission's standardized case management training for children and pregnant women program providers to comply with Section 531.654, Government Code, as added by this Act.

SECTION 7. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 8. This Act takes effect September 1, 2023.

SENATE VERSION (CS)

SECTION 6. Same as House version.

SECTION 7. Same as House version.

SECTION 8. Same as House version.

CONFERENCE