Amend **CSHB 26** (senate committee report) by adding the following appropriately numbered SECTION to the bill and renumbering the SECTIONS of the bill accordingly:

SECTION ____. Subchapter F, Chapter 540, Government Code, is amended by adding Section 540.02721 to read as follows:

Sec. 540.02721. PILOT PROGRAM TO PROVIDE ADDITIONAL NUTRITION SUPPORT SERVICES TO CERTAIN PREGNANT RECIPIENTS IN LIEU OF STATE MEDICAID PLAN SERVICES. (a) In this section:

(1) "Participant" means a recipient who participates in the pilot program.

(2) "Pilot program" means the pilot program established by the commission under authority of this section.

(3) "Medically tailored meal" means a meal designed by a registered dietician as part of a treatment plan to improve an individual's health outcomes and chronic disease management.

(b) The commission may establish a pilot program under which Medicaid managed care organizations are authorized to offer and provide nutrition support services in lieu of services specified in the state Medicaid plan to a recipient who is:

(1) pregnant; and

(2) diagnosed with a chronic health condition or disease that may contribute to a high-risk pregnancy or birth complications, including:

(A) gestational diabetes;

(B) hypertension; and

(C) obesity.

(c) Notwithstanding Section 540.0272, a Medicaid managed care organization may offer the following services under the pilot program in lieu of services specified in the state Medicaid plan:

(1) nutrition counseling and instruction services authorized under Section 540.0272;

(2) medically tailored meals, provided the meals are provided with nutrition counseling and instruction services authorized under Section 540.0272; and

(3) other evidence-based nutrition support services designed to improve maternal and infant health outcomes, as determined by the commission. (d) The commission shall collect and analyze data on the impact to maternal and infant health outcomes that nutrition support services have on pilot program participants. The data the commission collects and analyzes must include:

(1) the rate by which pilot program participants comply with a medically tailored meal plan or other nutrition support services provided under the pilot program;

(2) health outcomes associated with each participant's
pregnancy;

(3) the impact of nutrition support services on a participant's chronic health condition or disease-related symptoms; and

(4) newborn and infant health outcomes for children born to participants.

(e) As soon as practicable after the termination of the pilot program, the commission shall prepare and submit to the legislature a written report that includes:

(1) a summary of the pilot program outcomes, including a summary of the data the commission collects and analyzes under <u>Subsection (d); and</u>

(2) recommendations for legislative or other action.

(f) The pilot program, if established, terminates August 31, 2030.

(g) This section expires September 1, 2031.