

BILL ANALYSIS

Senate Research Center
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H.B. 5155
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Health & Human Services
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

In 2023, the opioid epidemic claimed the lives of nearly 3,000 Texans. Substance use disorder (SUD), including mental health conditions, also plays a significant role in maternal mortality. According to the 2024 Texas Maternal Mortality and Morbidity Task Force and Department of State Health Services Joint Biennial Report, SUD contributed to seven percent of maternal deaths in 2020. National trends also show that pregnant women are dying from drug use. Nationally, the trend is similar: a Journal of American Medical Association (JAMA) study found drug overdose among pregnant and postpartum women increased by about 81 percent from 2017 to 2020 in this population.

To confront maternal mortality in Texas, the 85th Legislature passed S.B. 17 (Kolkhorst), mandating improvements in data collection on maternal health, identifying causes of maternal mortality rates, and developing targeted strategies to address them. Building on this effort, the 86th Legislature passed S.B. 750 (Kolkhorst), further strengthening the state's response to maternal health challenges. Last session, H.B. 12 (Rose; SP: Kolkhorst) extended Medicaid coverage for pregnant women to 12 months.

Following HHSC's report, Texas required the Health and Human Services Commission (HHSC) to apply to the Center for Medicare and Medicaid Services (CMS) to implement a new care model to improve the quality and accessibility of care for pregnant women with opioid use disorder. As a result, Texas was selected to participate in a five-year Maternal Opioid Misuse (MOM) model demonstration in 2020. Despite the first two-years occurring during the COVID-19 pandemic, Texas received over \$3 million in federal funding and enrolled over 110 women in the program.

H.B. 5155 continues Texas' participation in the Maternal Opioid Misuse model.

H.B. 5155 amends current law relating to the continuation of the maternal opioid misuse model of care for certain Medicaid recipients.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter A, Chapter 547, Government Code, by adding Section 547.0007, as follows:

Sec. 547.0007. MATERNAL OPIOID MISUSE MODEL OF CARE. (a) Defines "maternal opioid misuse model of care."

(b) Requires the Health and Human Services Commission (HHSC), to the extent money is available to HHSC for that purpose, to continue implementing the maternal opioid misuse model of care.

(c) Authorizes money in the opioid abatement account established under Section 403.505 (Opioid Abatement Account) to be appropriated to HHSC for the purpose of carrying out this section.

(d) Provides that this section expires September 1, 2029.

SECTION 2. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes a delay of implementation until such a waiver or authorization is granted.

SECTION 3. Provides that HHSC is required to implement Section 547.0007, Government Code, as added by this Act, only if the legislature appropriates money specifically for that purpose. Provides that, if the legislature does not appropriate money specifically for that purpose, HHSC is authorized, but is not required, to implement that section using other money available to HHSC for that purpose.

SECTION 4. Effective date: September 1, 2025.