

AN ACT

relating to Medicaid and child health plan program coverage and reimbursement for childhood cranial remolding orthosis.

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

SECTION 1. Subchapter D, Chapter 62, Health and Safety Code, is amended by adding Section 62.1512 to read as follows:

Sec. 62.1512. COVERAGE FOR CHILDHOOD CRANIAL REMOLDING ORTHOSIS. (a) In this section, "cranial remolding orthosis" has the meaning assigned by Section 32.03126, Human Resources Code.

(b) The child health plan must cover in full the cost of a cranial remolding orthosis for an enrollee in the same manner that Medicaid coverage is provided for that treatment under Section 32.03126, Human Resources Code.

SECTION 2. Subchapter B, Chapter 32, Human Resources Code, is amended by adding Section 32.03126 to read as follows:

Sec. 32.03126. REIMBURSEMENT FOR CHILDHOOD CRANIAL REMOLDING ORTHOSIS. (a) In this section, "cranial remolding orthosis" means a custom-fitted or custom-fabricated medical device that is applied to the head to correct a deformity, improve function, or relieve symptoms of a structural cranial disease.

(b) The commission shall ensure medical assistance reimbursement is provided to cover in full the cost of a cranial remolding orthosis for a child who is a medical assistance recipient and has been diagnosed with:

1 (1) craniosynostosis; or

2 (2) plagiocephaly or brachycephaly if the child:

3 (A) is not less than three months of age and not
4 more than 18 months of age;

5 (B) has had documented failure to respond to
6 conservative therapy for at least two months; and

7 (C) has one of the following sets of measurements
8 or indications:

9 (i) asymmetrical appearance confirmed by a
10 right/left discrepancy of greater than six millimeters in a
11 craniofacial anthropometric measurement; or

12 (ii) brachycephalic or dolichocephalic
13 disproportion in the comparison of head length to head width
14 confirmed by a cephalic index of two standard deviations above or
15 below mean.

16 (c) The coverage required under this section may not be less
17 favorable than the coverage required for other orthotics under the
18 medical assistance program.

19 SECTION 3. If before implementing any provision of this Act
20 a state agency determines that a waiver or authorization from a
21 federal agency is necessary for implementation of that provision,
22 the agency affected by the provision shall request the waiver or
23 authorization and may delay implementing that provision until the
24 waiver or authorization is granted.

25 SECTION 4. This Act takes effect September 1, 2025.

President of the Senate

Speaker of the House

I certify that H.B. No. 426 was passed by the House on May 7, 2025, by the following vote: Yeas 108, Nays 40, 1 present, not voting.

Chief Clerk of the House

I certify that H.B. No. 426 was passed by the Senate on May 28, 2025, by the following vote: Yeas 27, Nays 4.

Secretary of the Senate

APPROVED: _____

Date

Governor