

By: Frank

H.B. No. 3396

A BILL TO BE ENTITLED

AN ACT

relating to the authority of certain medical consenters to assume financial responsibility for certain out-of-network medical care provided to children in foster care.

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

SECTION 1. Chapter 266, Family Code, is amended by adding Section 266.0043 to read as follows:

Sec. 266.0043. ASSUMPTION OF FINANCIAL RESPONSIBILITY BY MEDICAL CONSENTERS. (a) In this section:

(1) "Health care provider" means an individual who is licensed, certified, or otherwise authorized to provide health care services in this state.

(2) "Managed care plan" has the meaning assigned by Section 540.0001, Government Code.

(3) "Medicaid" and "Medicaid managed care organization" have the meanings assigned by Section 521.0001, Government Code.

(4) "Medicaid managed care plan" means a managed care plan offered by a Medicaid managed care organization.

(5) "Medical consenter" means a person authorized to consent to medical care for a foster child under Section 266.004(b).

(6) "Out-of-network provider" means a health care provider who is not included in the provider network of the Medicaid

1 managed care plan in which a foster child is enrolled.

2 (b) Notwithstanding any other law, a medical consentor
3 other than the department may assume financial responsibility for
4 medical care, including behavioral health services, provided to a
5 foster child by an out-of-network provider engaged by the medical
6 consenter on behalf of the child.

7 (c) The department is not liable for the cost of medical
8 care described by Subsection (b).

9 (d) This section may not be construed to limit or restrict a
10 foster child's access to Medicaid benefits, including in-network
11 benefits provided under the Medicaid managed care program.

12 (e) Not later than the 10th business day after the date
13 medical care for which a medical consentor assumes financial
14 responsibility under this section is provided, the medical
15 consenter shall notify, in the form and manner prescribed by the
16 department, the child's caseworker of the provision of that care.
17 The department shall ensure the child's health passport includes
18 records of the medical care provided under this section.

19 SECTION 2. Subchapter Q, Chapter 540, Government Code, as
20 effective April 1, 2025, is amended by adding Section 540.0807 to
21 read as follows:

22 Sec. 540.0807. ACCESS TO CARE PAID FOR BY CERTAIN MEDICAL
23 CONSENTERS. (a) A Medicaid managed care organization may not take
24 adverse action to prevent or discourage a recipient from accessing
25 health care and related services and benefits in accordance with
26 Section 266.0043, Family Code.

27 (b) A STAR Health program managed care contract between a

1 Medicaid managed care organization and the commission must require
2 that the organization comply with Subsection (a).

3 (c) This section may not be construed to confer liability on
4 a Medicaid managed care organization for the cost of health care and
5 related services and benefits described by Section 266.0043(b),
6 Family Code.

7 SECTION 3. If before implementing any provision of this Act
8 a state agency determines that a waiver or authorization from a
9 federal agency is necessary for implementation of that provision,
10 the agency affected by the provision shall request the waiver or
11 authorization and may delay implementing that provision until the
12 waiver or authorization is granted.

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