

By: Howard

H.B. No. 4117

A BILL TO BE ENTITLED

AN ACT

relating to the development of a strategic plan for home and community-based services provided under Medicaid and the child health plan program and the establishment of an advisory committee on home and community-based services.

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

SECTION 1. Chapter 526, Government Code, as effective April 1, 2025, is amended by adding Subchapter R to read as follows:

SUBCHAPTER R. HOME AND COMMUNITY-BASED SERVICES

Sec. 526.0851. DEFINITIONS. In this subchapter:

(1) "Home and community-based services" means person-centered care that addresses the needs of an individual with functional limitations who needs assistance with daily living, is delivered to the individual in the individual's home or community, and enables the individual to remain in the individual's home or community, including:

(A) acute care and long-term services and supports;

(B) services and supports for an individual's physical, emotional, mental, social, and vocational needs; and

(C) any other services necessary to enable an individual to remain in the individual's home or community.

(2) "Home and community support services agency" means a person licensed under Chapter 142, Health and Safety Code, who

provides for pay or other consideration home health, hospice, or personal assistance services as those terms are defined by Section 142.001, Health and Safety Code, in a client's residence, an independent living environment, or another appropriate location.

Sec. 526.0852. STRATEGIC PLAN; REPORT. (a) The commission shall develop and, subject to Subsection (c), implement a strategic plan to ensure that Medicaid recipients and child health plan program enrollees in this state have access to home and community-based services provided by a home and community support services agency.

(b) The strategic plan must include:

(1) a proposal for developing a viable rate methodology for each home and community-based service provided by a home and community support services agency that will ensure access to the service;

(2) an assessment of the unmet needs for home and community-based services of Medicaid recipients and child health plan program enrollees;

(3) access to care standards for services provided by a home and community support services agency specific to each home and community-based services program under Medicaid and the child health plan program, which may include standards based on:

(A) the amount of delivered units of service as a percentage of authorized units of service;

(B) the number of in-network home and community support services agencies;

(C) the types of services provided;

1 (D) the geographic areas served;

2 (E) vacancy rates; and

3 (F) the capacity to provide services;

4 (4) an assessment of the potential costs, including
5 costs to the state, associated with the lack of adequate access to
6 home and community-based services in this state, including an
7 analysis of:

8 (A) any projected long-term savings from
9 providing timely access to home and community-based services;

10 (B) the costs associated with providing services
11 in an institutional or hospital setting, as compared to providing
12 services in a home or community-based setting; and

13 (C) the potential immediate and long-term costs
14 associated with a lack of access to services in a timely manner; and

15 (5) set dates for achieving the goals identified in
16 the strategic plan.

17 (b-1) Not later than January 1, 2026, the commission shall
18 submit the strategic plan developed under Subsection (b) to the
19 Legislative Budget Board for approval. The board must review and
20 provide the commission with comments on the plan before determining
21 whether to approve the plan. This subsection expires September 1,
22 2027.

23 (c) The commission may not implement the proposal described
24 by Subsection (b)(1) until the Legislative Budget Board approves
25 the strategic plan.

26 (d) Not later than November 1 of each even-numbered year,
27 the commission shall submit a report on the commission's

development and implementation of the strategic plan to:

(1) the legislature;

(2) the governor; and

(3) the Legislative Budget Board.

Sec. 526.0853. ADVISORY COMMITTEE. (a) In this section, "advisory committee" means the home and community-based services advisory committee established under this section.

(b) The commission shall establish the home and community-based services advisory committee as an advisory committee or a subcommittee of the medical care advisory committee established under Section 32.022, Human Resources Code, to:

(1) advise the commission on:

(A) developing a viable long-term payment methodology for services provided by home and community support services agencies; and

(B) addressing issues relating to home and community-based services;

(2) develop a sustainable strategy to support home and community-based services;

(3) make recommendations for cost savings in program areas, including:

(A) program integrity;

(B) reductions in hospitalizations;

(C) prior authorization of services; and

(D) care coordination efforts; and

(4) review and offer comments on the strategic plan described by Section 526.0852.

1 (c) The advisory committee is composed of the following
2 members appointed by the executive commissioner:

3 (1) one member who is an ex officio nonvoting
4 representative of the commission; and

5 (2) an odd number, not to exceed 15, of voting members
6 as follows:

7 (A) representatives of:

8 (i) at least one association representing
9 managed care organizations;

10 (ii) at least one association representing
11 home and community support services agencies;

12 (iii) at least two associations or
13 coalitions representing Medicaid recipients who receive home and
14 community-based services in this state;

15 (iv) at least one rural home and community
16 support services agency providing services to Medicaid recipients
17 who receive home and community-based services;

18 (v) at least one statewide home and
19 community support services agency providing services to Medicaid
20 recipients who receive home and community-based services; and

21 (vi) another discipline involving
22 expertise in financing Medicaid home and community-based services;

23 (B) at least one person who is the parent of and
24 caregiver to a child who receives home and community-based services
25 as a Medicaid recipient or child health plan program enrollee;

26 (C) at least one person who is a recipient of home
27 and community-based services under Medicaid;

1 (D) at least one person who provides financial
2 management services; and

3 (E) at least one person who provides electronic
4 visit verification services.

5 (d) A member of the advisory committee serves without
6 compensation.

7 (e) The advisory committee is abolished and this section
8 expires September 1, 2029.

9 SECTION 2. As soon as practicable after the effective date
10 of this Act, the executive commissioner of the Health and Human
11 Services Commission shall appoint the members of the home and
12 community-based services advisory committee established under
13 Subchapter R, Chapter 526, Government Code, as added by this Act.

14 SECTION 3. This Act takes effect September 1, 2025.