

By: Manuel

H.B. No. 4666

Substitute the following for H.B. No. 4666:

By: Hull

C.S.H.B. No. 4666

A BILL TO BE ENTITLED

AN ACT

relating to certain reports required to be prepared or submitted by
or in collaboration with the Health and Human Services Commission.

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

SECTION 1. The heading to Section 523.0154, Government
Code, is amended to read as follows:

Sec. 523.0154. DATA ANALYSIS UNIT; ANNUAL REPORTS
~~[QUARTERLY UPDATE]~~.

SECTION 2. Section 523.0154(d), Government Code, is amended
to read as follows:

(d) Not later than December 1 of each year ~~[the 30th day
following the end of each calendar quarter]~~, the data analysis unit
shall provide:

(1) a report ~~[an update]~~ on the unit's activities and
findings to the governor, the lieutenant governor, the Legislative
Budget Board, the speaker of the house of representatives, the
chair of the Senate Finance Committee, the chair of the House
Appropriations Committee, and the chairs of the standing committees
of the senate and house of representatives having jurisdiction over
Medicaid; and

(2) a report of any anomalies identified by the unit
under Subsection (a)(3) to the commission's office of the inspector
general.

SECTION 3. The heading to Section 532.0453, Government

Code, is amended to read as follows:

Sec. 532.0453. CONTINUED IMPLEMENTATION OF CERTAIN INTERVENTIONS AND BEST PRACTICES BY PROVIDERS; BIENNIAL [~~SEMIANNUAL~~] REPORT.

SECTION 4. Section 532.0453(b), Government Code, is amended to read as follows:

(b) Each even-numbered year, the [~~The~~] commission shall [~~semiannually~~] prepare and submit to the legislature a report that contains a summary of the commission's efforts under this section and Section 532.0451(b).

SECTION 5. Section 542.0054, Government Code, is amended to read as follows:

Sec. 542.0054. BIENNIAL [~~ANNUAL~~] REPORT ON IMPLEMENTATION.

(a) Not later than September 30 of each even-numbered year, the commission, in collaboration with the advisory committee, shall prepare and submit to the legislature a report that includes:

(1) an assessment of the implementation of the system required by this chapter, including appropriate information regarding the provision of acute care services and long-term services and supports to individuals with an intellectual or developmental disability under Medicaid;

(2) recommendations regarding implementation of and improvements to the system redesign, including recommendations regarding appropriate statutory changes to facilitate the implementation; and

(3) an assessment of the effect of the system on:

(A) access to long-term services and supports;

1 (B) the quality of acute care services and
2 long-term services and supports;

3 (C) meaningful outcomes for Medicaid recipients
4 using person-centered planning, individualized budgeting, and
5 self-determination, including an individual's inclusion in the
6 community;

7 (D) the integration of service coordination of
8 acute care services and long-term services and supports;

9 (E) the efficiency and use of funding;

10 (F) the placement of individuals in housing that
11 is the least restrictive setting appropriate to an individual's
12 needs;

13 (G) employment assistance and customized,
14 integrated, competitive employment options; and

15 (H) the number and types of fair hearing and
16 appeals processes in accordance with federal law.

17 (b) This section expires on the second anniversary of the
18 date the commission completes implementation of the transition
19 required under Section 542.0201.

20 SECTION 6. Sections 542.0119(a) and (b), Government Code,
21 are amended to read as follows:

22 (a) The commission, in collaboration with the advisory
23 committee and pilot program work group, shall review and evaluate
24 the progress and outcomes of the pilot program and submit, as part
25 of the [~~annual~~] report required under Section 542.0054, a report on
26 the pilot program's status that includes recommendations for
27 improving the pilot program.

1 (b) Not later than September 1, 2026, the commission, in
2 collaboration with the advisory committee and pilot program work
3 group, shall prepare and submit to the legislature a written report
4 that evaluates the pilot program based on a comprehensive
5 analysis. The analysis must:

6 (1) assess the effect of the pilot program on:

7 (A) access to and quality of long-term services
8 and supports;

9 (B) informed choice and meaningful outcomes
10 using person-centered planning, flexible consumer-directed
11 services, individualized budgeting, and self-determination,
12 including a pilot program participant's inclusion in the community;

13 (C) the integration of service coordination of
14 acute care services and long-term services and supports;

15 (D) employment assistance and customized,
16 integrated, competitive employment options;

17 (E) the number, types, and dispositions of fair
18 hearings and appeals in accordance with federal and state law;

19 (F) increasing the use and flexibility of the
20 consumer direction model;

21 (G) increasing the use of alternatives to
22 guardianship, including supported decision-making agreements as
23 defined by Section [1357.002](#), Estates Code;

24 (H) achieving the best and most cost-effective
25 funding use based on a pilot program participant's needs and
26 preferences; and

27 (I) attendant recruitment and retention;

1 (2) analyze the experiences and outcomes of the
2 following systems changes:

3 (A) the comprehensive assessment instrument
4 described by Section [533A.0335](#), Health and Safety Code;

5 (B) the 21st Century Cures Act (Pub. L.
6 No. 114-255);

7 (C) implementation of the federal rule adopted by
8 the Centers for Medicare and Medicaid Services and published at 79
9 Fed. Reg. 2948 (January 16, 2014) related to the provision of
10 long-term services and supports through a home and community-based
11 services (HCS) waiver program under Section 1915(c), 1915(i), or
12 1915(k) of the Social Security Act (42 U.S.C. Section 1396n(c),
13 (i), or (k));

14 (D) the provision of basic attendant and
15 habilitation services under Section [542.0152](#); and

16 (E) the benefits of providing STAR+PLUS Medicaid
17 managed care services to individuals based on functional needs;

18 (3) include feedback on the pilot program based on the
19 personal experiences of:

20 (A) individuals with an intellectual or
21 developmental disability and individuals with similar functional
22 needs who were pilot program participants;

23 (B) families of and other persons actively
24 involved in the lives of individuals described by Paragraph (A);
25 and

26 (C) comprehensive long-term services and
27 supports providers who delivered services under the pilot program;

1 (4) be incorporated in the [~~annual~~] report required
2 under Section 542.0054; and

3 (5) include recommendations on:

4 (A) a system of programs and services for the
5 legislature's consideration;

6 (B) necessary statutory changes; and

7 (C) whether to implement the pilot program
8 statewide under the STAR+PLUS Medicaid managed care program for
9 eligible individuals.

10 SECTION 7. Section 542.0151(b), Government Code, is amended
11 to read as follows:

12 (b) The commission, in collaboration with the advisory
13 committee, shall analyze the outcomes of providing acute care
14 Medicaid benefits to individuals with an intellectual or
15 developmental disability under a model described by Subsection
16 (a). The analysis must:

17 (1) include an assessment of the effects of the
18 delivery model on:

19 (A) access to and quality of acute care services;
20 and

21 (B) the number and types of fair hearing and
22 appeals processes in accordance with federal law;

23 (2) be incorporated into the [~~annual~~] report to the
24 legislature required under Section 542.0054; and

25 (3) include recommendations for delivery model
26 improvements and implementation for the legislature's
27 consideration, including recommendations for needed statutory

1 changes.

2 SECTION 8. Section 543A.0003(a), Government Code, is
3 amended to read as follows:

4 (a) The commission shall include aggregate, nonidentifying
5 data collected using the quality-based outcome measure described by
6 Section 543A.0002(b) in the ~~[annual]~~ report required by Section
7 543A.0008. The commission may include the data in any other report
8 required by this chapter.

9 SECTION 9. The heading of Section 543A.0008, Government
10 Code, is amended to read as follows:

11 Sec. 543A.0008. BIENNIAL ~~[ANNUAL]~~ REPORT.

12 SECTION 10. Section 543A.0008(a), Government Code, is
13 amended to read as follows:

14 (a) The commission shall submit to the legislature and make
15 available to the public in each even-numbered year a ~~[an annual]~~
16 report on:

17 (1) the quality-based outcome and process measures
18 developed under Sections ~~[Section]~~ 543A.0002 and 543A.0003,
19 including measures based on each potentially preventable event; and

20 (2) the progress of implementing quality-based
21 payment systems under Section 543A.0004 and other payment
22 initiatives under this chapter.

23 SECTION 11. If before implementing any provision of this
24 Act a state agency determines that a waiver or authorization from a
25 federal agency is necessary for implementation of that provision,
26 the agency affected by the provision shall request the waiver or
27 authorization and may delay implementing that provision until the

1 waiver or authorization is granted.

2 SECTION 12. This Act takes effect immediately if it
3 receives a vote of two-thirds of all the members elected to each
4 house, as provided by Section 39, Article III, Texas Constitution.
5 If this Act does not receive the vote necessary for immediate
6 effect, this Act takes effect September 1, 2025.