

BILL ANALYSIS

H.B. 4559
By: Fierro
County Affairs
Committee Report (Unamended)

BACKGROUND AND PURPOSE

It has been reported that many prisoners in county jails receive mental health services and that regardless of whether a prisoner is covered by private health insurance the cost of the services is borne by taxpayers and organizations like local mental health authorities. However, even organizations fully equipped to bill for services and manage that process as part of a developed revenue cycle cannot because they lack that authority in the context of county jails. H.B. 4559 seeks to address this issue by providing for the payment of such services by an insurance issuer in order to help shift the burden of mental health costs for insured prisoners away from taxpayers and such organizations.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 4559 amends the Government Code to require the Commission on Jail Standards to adopt procedures by which a local mental health authority or other mental health services provider providing services to a prisoner in a county jail under a contract with the county may collect the following from a prisoner who receives those services and is covered by health insurance or other health benefits coverage:

- the name of the policyholder or group contract holder;
- the number of the policy or evidence of coverage;
- a copy of the health coverage membership card, if available; and
- any other information necessary for the prisoner to obtain benefits under the coverage.

The bill authorizes the authority or provider to arrange for the issuer of the health insurance policy or other health benefits coverage to pay for those services.

EFFECTIVE DATE

September 1, 2019.