HOUSE RESEARCH ORGANIZATION	bill analysis	5/8/97	HB 1939 Coleman (CSHB 1939 by Berlanga)	
SUBJECT:	Medicaid coverage of certain nutrition therapies			
COMMITTEE:	Public Health — committee substitute recommended			
VOTE:	6 ayes — Berlanga, Hirschi, Coleman, Glaze, Janek, Maxey			
	0 nays			
	2 absent — Davila, Delisi			
WITNESSES:	For — Carolyn Parker, Texas AIDS Network; Joanne Parker, Ross Products			
	Against — None			
	On — Joe Branton, Texas Department of Health			
DIGEST:	CSHB 1939 would require Medicaid program coverage for medically necessary enteral nutrition therapy and related services ordered by a physician for the nutritional management of an illness, injury, disorder or other condition as prescribed by the board of health. The coverage would subject to the availability of funds appropriated by the Legislature.			
	Enteral nutrition therapy would mean a medical nutritional product that provides complete and balanced nutrition that is provided orally or by tube feeding to a malnourished person who cannot maintain weight or strength due to a pathology.			
	The bill would take effect September 1, 1997, and a state agency would have to obtain federal authorization, if necessary, before implementation and could delay implementation until authorization is granted.			
SUPPORTERS SAY:	CSHB 1939 would make sure appropriate and necessary nourishment is provided to low-income patients with severe medical problems that make feeding difficult. Texas is one of only three states that do not provide Medicaid coverage for medicinal nutritional products.			
	Early nutritional intervention improves the health status of medically compromised patients, and will save the state money in the long run.			

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	Nutritional intervention reduces the risk of complications from illnesses or medical conditions and, as a result, lowers the cost of treatment of these individuals.	
	This bill would not make an appropriation; it would simply provide legislative direction to fund enteral nutrition therapies if additional funds become available for appropriation. This bill would be viewed in context of all appropriation requests and state priorities and therefore would not take away funds from any other state activities.	
OPPONENTS SAY:	No apparent opposition.	
NOTES:	The committee substitute changed the original version of the bill by requiring nutrition services to be provided by a licensed dietician and removing references to parenteral and restorative feedings and nutritional counseling services.	
	According to the fiscal note, implementing the provisions in the bill could cost \$5.4 million for fiscal 1998-99 and about the same amount in fiscal 2000-2001.	