

- SUBJECT:** Database of doctors, hospitals, and other Medicaid health care providers
- COMMITTEE:** Human Services — favorable, without amendment
- VOTE:** 6 ayes — Rose, S. King, Herrero, Hughes, Naishtat, Parker
0 nays
3 absent — J. Davis, Eissler, Pierson
- WITNESSES:** For — Sam Adkins, Primary Care Coalition, Texas Medical Association; (*Registered, but did not testify:* Tom Banning, Texas Academy of Family Physicians; Ed Berger, SETON Family of Hospitals; Steven Bristow, Parkland Health and Hospital System; Lauren DeWitt, The Citizens Commission on Human Rights; Anne Dunkelberg, Center for Public Policy Priorities; Cindy Gunn, Memorial Hermann Healthcare System; King Hillier, Texas Association of Public and Non-Profit Hospitals; Patricia Kolodzey, Texas Hospital Association; Carrie Kroll, Texas Pediatric Society; Gabriela Moreno, CHRISTUS Health; Vicki Perkins, CHRISTUS Santa Rosa Children’s Hospital; Michelle Romero, Texas Medical Association)

Against — None
- BACKGROUND:** Medicaid managed care organizations are required to provide participating Medicaid recipients with a directory of providers included in the recipient's managed care plan. The Health and Human Services Commission (HHSC) contracts with the Texas Medicaid and Healthcare Partnership (TMHP) to administer Medicaid claims processing and the Medicaid primary care case management services program. TMHP has begun to develop a database of Texas Medicaid providers as a part of its contract with HHSC.
- DIGEST:** HB 2042 would require the executive commissioner of the HHSC, by January 1, 2008, to adopt rules to establish and administer a searchable, web-based database of Medicaid providers. A non-exhaustive list of Medicaid providers would include doctors, dentists, pharmacists, mental health counselors, social workers, pharmacies, hospitals, and professional associations and nonprofits dealing with health care. The database would

include the provider's name, specialty, location, office hours, telephone number, languages spoken, practice limitations, services offered, waiver program participation, and whether the provider was accepting new patients.

The database would have to be searchable by provider name and by the providers participating within each managed care network. Without charge, the provider would be able to update the provider's personal information stored in the database. No fees could be charged for Medicaid recipients to access the database. The database would have to be updated at least once each month. The commissioner could oversee a contractor in the creation and maintenance of the database.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2007.

NOTES:

According to the fiscal note, HHSC reports that the development of the database that HB 2042 would require already is in progress and is within the scope of its existing contract with TMHP.