

SUBJECT: Revising Medicaid application and communication guidelines

COMMITTEE: Human Services — favorable, without amendment

VOTE: 8 ayes — Frank, Rose, Campos, Hull, Klick, Manuel, Noble, Shaheen

 0 nays

 1 absent — Ramos

WITNESSES: For — Jessica Lynch, Texas Association of Health Plans (*Registered, but did not testify*; Marisa Finley, Baylor Scott & White Health; Timothy Ottinger, CHI St. Lukes Health; Stacy Wilson, Children’s Hospital Association of Texas; Michael Dole, Driscoll Health System; Elisa Hernandez, El Paso Health; Anne Dunkelberg, Every Texan; Lindsay Lanagan, Legacy Community Health; Christine Yanas, Methodist Healthcare Ministries; Eric Glenn, Superior Health Plan; Charles Miller, Texas 2036; Kay Ghahremani, Texas Association of Community Health Plans; Meredith Cooke, Texas Children’s Health Plan; Isabel Casas, Leela Rice, Texas Council of Community Centers; Marcus Mitias, Texas Health Resources; Cameron Duncan, Texas Hospital Association; Joshua Houston, Texas Impact; Clayton Travis, Texas Pediatric Society; Ashley Harris, United Ways of Texas; and six individuals)

 Against — None

 On — Hilary Davis, Health and Human Services Commission

DIGEST: HB 2802 would allow Medicaid managed care organizations to communicate by any electronic means, including telephone, text message, and email, with recipients who have provided their contact information through any method other than the Medicaid application regarding eligibility, enrollment, and other health care matters. Managed care organizations could not be required to submit recipients’ contact preferences to HHSC.

The bill also would revise requirements for the Medicaid application by removing the option to consent to being contacted by a managed care organization or health plan provider. The application would be required to include language that notified the applicant that the applicant could opt out of being contacted by telephone, text message, or email by notifying the applicant's managed care organization or health plan provider.

If a state agency determined that a waiver or authorization from a federal agency was necessary to implement the bill, the agency would be required to request the waiver and could delay implementation until the waiver or authorization was granted.

The bill would take effect September 1, 2023. The executive commissioner of HHSC would be required to adopt revised communication guidelines and a revised Medicaid application by January 1, 2024.

**SUPPORTERS
SAY:**

HB 2802 would make it easier for managed care organizations to text Medicaid recipients about important health information. Cell phones are the most common communication device, and text messaging could make communication easier, enhance the delivery of services, and improve access to health care.

Additionally, the current opt-in option on the Medicaid application can be confusing since it requires authorization in multiple places. Switching to an opt-out option would streamline the application while still requiring consent and retaining protections from unwanted communications. HB 2802 would be especially helpful while HHSC is redetermining the eligibility of all Medicaid recipients after the end of the continuous coverage requirement related to the COVID-19 pandemic.

**CRITICS
SAY:**

No concerns identified.