

BILL ANALYSIS

Senate Research Center

S.B. 1331
By: Moncrief
Health Services
4/23/1999
As Filed

DIGEST

With the rollout of Medicaid managed care in Texas, the state has yet to evaluate the impact of managed care on both quality of care and costs. S.B. 1331 will require that the state stop and evaluate the success and data of Texas Medicaid Managed Care programs.

PURPOSE

As proposed, S.B. 1331 requires an assessment of the effectiveness of Medicaid managed care contracts.

RULEMAKING AUTHORITY

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 2, Chapter 1262, Acts of the 75th Legislature, Regular Session 1997, by adding Subsections (i) and (j), to require the Health and Human Services Commission (commission) to assess the effectiveness of current managed care contracts, prior to the issuance of a request for application or other solicitation document for any additional contract with managed care organizations. Requires the assessment to include an evaluation of the impact of the managed care delivery system, including health maintenance organizations, prepaid health plans, and primary care case management certain issues. Requires the commission to consult with certain organizations, and political subdivisions with a constitutional or statutory obligation to provide health care for the indigent, in conducting the assessment required by Subsection (i) of this section.

SECTION 2. Requires the assessment required under Subsection (i) of this Act to be completed and a report to be submitted certain persons, not later than December 1, 2000.

SECTION 3. Emergency clause.
Effective date: upon passage.