## **BILL ANALYSIS**

Senate Research Center 82R3953 SJM-D

S.B. 575 By: Van de Putte Health & Human Services 4/7/2011 As Filed

## AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

The Medicaid Women's Health Program (WHP) was established by S.B. 747 (Carona), 79th Legislature, Regular Session, 2005, and began on January 1, 2007. WHP provides basic health screenings and family planning services to uninsured women between the ages of 18 and 44 whose income is below 185 percent of the federal poverty level, the level at which they would be eligible for Medicaid coverage if they were pregnant. The program does not cover abortions and will end on September 1, 2011, if it is not renewed.

In 2009, Texas Medicaid paid for 162,916 births costing approximately \$2.7 billion for the coverage of both pregnancy and first-year infants. With Medicaid waivers similar to WHP, the federal government provides a 90/10 match, with Texas only funding 10 percent as opposed to Medicaid which is a 60/40 match with Texas funding 40 percent of services. The Health and Human Services Commission (HHSC) estimated that 5,725 births have been either delayed or avoided as a result of WHP, saving the state approximately \$15.8 million in General Revenue Funds and \$42.4 million in All Funds.

According to HHSC, public health researchers conclude that the states with an income-based waiver have the greatest impact, in terms of both serving the greatest number of persons in need and reducing pregnancy related Medicaid costs. The WHP bases eligibility on net family income below 185 percent of the federal poverty level solely to women ages 18 to 44. In 2009, close to 2,386 Texas women under the age of 18 had a second or subsequent Medicaid-funded birth, costing the state \$5,193 per birth.

This bill expands eligibility for WHP to income-eligible teenage females who have previously given birth on Medicaid, to income-eligible males, and to income-eligible adult women. The bill implements an outreach program to inform potential participants of the preventive health and family planning program. This bill reflects the recommendations published in the Legislative Budget Board report to the legislature entitled *Government Effectiveness and Efficiency*.

Expanding eligibility for WHP will have a net saving for the 2012-2013 biennium of \$3.8 million in General Revenue Funds. The proposed outreach program could be accomplished with existing resources.

As proposed, S.B. 575 amends current law relating to the expansion of the Women's Health Program demonstration project and implementation of related outreach activities.

## **RULEMAKING AUTHORITY**

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

## **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends the heading to Section 32.0248, Human Resources Code, to read as follows:

Sec. 32.0248. DEMONSTRATION PROJECT FOR PREVENTIVE HEALTH SERVICES.

- SECTION 2. Amends Section 32.0248, Human Resources Code, by amending Subsections (a), (b), (c), (e), (g), and (i) and adding Subsections (b-1) and (b-2), as follows:
  - (a) Requires the Health and Human Services Commission (HHSC) to operate a demonstration project, rather than establish a five-year demonstration project, through the medical assistance program to expand access to preventative health and family planning services. Authorizes a person, rather than a woman, eligible to participate in the demonstration project to receive certain listed appropriate preventative health and planning services. Replaces references to woman with person. Deletes existing text relating to eligibility under Subsection (b).
  - (b) Provides that a person is eligible to participate in the demonstration project if the person, rather than the woman is at least 18 years of age:
    - (1) has a net family income that is at or below 185 percent of the federal poverty level and is at least 18 years of age, or is younger than 18 years of age and has given birth while receiving benefits under the medical assistance program;
    - (2) is a woman who is at 18 years of age and participates in or receives benefits under any of the following: the medical assistance program; the financial assistance program under Chapter 31 (Financial Service and Assistance Programs); the nutritional assistance program under Chapter 33 (Nutritional Assistance Programs); the Supplemental Food Program for Women, Infants and Children, or another program administered by the state that requires documentation of income; and restricts eligibility to persons with income equal to or less than the income eligibility guidelines applicable to the medical assistance program;
    - (3) is a woman who is at least 18 years of age and is presumed eligible for one of the programs listed in Subdivision (2) pending completion of that program's eligibility processes;
    - (4) is a woman who is at least 18 years of age and is a member of a family that contains at least one person who participates in or receives benefits under one of the programs listed in Subdivision (2); or
    - (5) is a woman who is not pregnant but who, if she were to become pregnant, would have a net family income on the birth of the child that is at or below 185 percent of the federal poverty level.
  - (b-1) Requires HHSC to identify women potentially eligible for participation in the demonstration project following pregnancies for which the women received benefits through the medical assistance program and assist those women in establishing eligibility for the demonstration project immediately after their eligibility for postpartum coverage under the medical assistance program terminates.
  - (b-2) Requires HHSC to modify any applicable administrative procedures to ensure that to the extent possible a woman described by Subsection (b-1) maintains continuous eligibility for any services provided by both the medical assistance program and the demonstration project during the transition for participation in the medical assistance program to participation in the demonstration project.
  - (c) Makes a conforming change.
  - (e) Makes conforming changes.
  - (g) Requires HHSC, not later than December 1 of each even-numbered year, to submit a report to the legislature regarding HHSC's operation of the demonstration project, rather than progress in establishing and operating the demonstration project.

- (i) Provides that this section expires September 1, 2014, rather than September 1, 2011.
- SECTION 3. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.02481, as follows:
  - Sec. 32.02481. PREVENTIVE HEALTH PROGRAM OUTREACH. (a) Defines, in this section, "preventive health and family planning program."
    - (b) Requires HHSC to develop and implement an outreach program to assist women described by Section 32.0248(b-1) in establishing eligibility for the preventive health and family planning program. Requires HHSC, as part of the outreach program, to:
      - (1) perform an initial screening to determine eligibility for the preventive health and family planning program; and
      - (2) ensure that a woman described by Section 32.0248(b-1) receives information regarding benefits available through the preventive health and family planning program, notification of potential eligibility, an application form for the preventive health and family planning program, information on where and how to receive application assistance, and a list, updated on a quarterly basis, of preventive health and family planning program providers in the woman's county of residence.
    - (c) Authorizes that information required under Subsection (b)(2) be included in other mailings regularly sent to recipients, including a letter informing a recipient of the recipient's eligibility for medical assistance.
    - (d) Authorizes a hospital or health plan participating in the outreach program that contracts with an entity that provides information and services to participants in the medical assistance program to modify the information and services provided by that entity to ensure that potentially eligible women are provided the information and services required under this section.
    - (e) Requires that the outreach program include monitoring, evaluation, and reporting. Requires HHSC to use information provided by hospitals or health plans participating in the outreach program to report to the legislature regarding:
      - (1) the costs and benefits of establishing the outreach program; and
      - (2) problems encountered during the implementation and operation of the outreach program and recommendations for solutions.
- SECTION 4. Provides that the change in law made by this Act applies to a person who receives medical assistance under Chapter 32, Human Resources Code, on or after the effective date of this Act, regardless of the date on which eligibility for the medical assistance was determined.
- SECTION 5. Requires a state agency, if necessary for implementation of a provision of Section 32.0248, Human Resources Code, as amended by this Act, to request an amendment to the existing waiver or other authorization from a federal agency, and authorizes delay of implementation until such an amendment to the waiver or other authorization is granted.

SECTION 6. Effective date: August 31, 2011.