

## **BILL ANALYSIS**

Senate Research Center

H.B. 2466  
By: Davis, Sarah et al. (Huffman)  
Health & Human Services  
7/26/2017  
Enrolled

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

A mother's health has a great impact on the development and well-being of her children. Diagnosing and treating maternal depression early is crucial to the health of infants and their families. Low income households are particularly vulnerable to not accessing treatment for maternal depression. Since a mother is very likely to attend a checkup with her child, pediatricians are in a unique position to screen for maternal depression.

H.B. 2466 builds on this relationship and promotes increased screening for postpartum depression by creating a postpartum depression screening benefit for the mothers of current Children's Health Insurance Plan and Medicaid enrollees.

H.B. 2466 also directs the Health and Human Services Commission to seek, accept, and spend federal funds available for these purposes through passage of the federal 21st Century Cures Act. (Original Author's / Sponsor's Statement of Intent)

H.B. 2466 amends current law relating to the content of an application for Medicaid and coverage for certain services related to maternal depression under the Medicaid and child health plan programs.

### **RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Section 62.1511, Health and Safety Code) and SECTION 3 (Section 32.0561, Human Resources Code) of this bill.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter D, Chapter 62, Health and Safety Code, by adding Section 62.1511, as follows:

Sec. 62.1511. COVERAGE FOR MATERNAL DEPRESSION SCREENING. (a) Defines "maternal depression."

(b) Requires that the covered services under the child health plan include a maternal depression screening for an enrollee's mother, regardless of whether the mother is also an enrollee, that is performed during a covered well-child or other office visit for the enrollee that occurs before the enrollee's first birthday.

(c) Requires the executive commissioner of the Health and Human Services Commission (executive commissioner; HHSC) to adopt rules necessary to implement this section. Requires that the rules be based on certain criteria.

(d) Requires HHSC to seek, accept, and spend any federal funds that are available for the purposes of this section, including priority funding authorized by Section 317L-1 of the Public Health Service Act (42 U.S.C. Section 201 et seq.), as added by the 21st Century Cures Act (Pub. L. No. 114-255).

SECTION 2. (a) Amends Section 32.025, Human Resources Code, by adding Subsection (g), as follows:

(g) Requires that the application form adopted under this section (Application for Medical Assistance) include:

(1) for an applicant who is pregnant, a question regarding whether the pregnancy is the woman's first gestational pregnancy; and

(2) a question regarding the applicant's preferences for being contacted. Sets forth the language of the form.

(b) Requires the executive commissioner, not later than January 1, 2018, to adopt a revised application form for medical assistance benefits that conforms to the requirements of Section 32.025(g), Human Resources Code, as added by this section.

SECTION 3. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.0561, as follows:

Sec. 32.0561. MATERNAL DEPRESSION SCREENING. (a) Defines "maternal depression."

(b) Requires HHSC to provide medical assistance reimbursement for a maternal depression screening for a recipient's mother, regardless of whether the mother is also a recipient, that is performed during a covered examination for the recipient under the Texas Health Steps Comprehensive Care Program that occurs before the recipient's first birthday.

(c) Requires the executive commissioner to adopt rules necessary to implement this section. Requires that the rules be based on certain criteria.

(d) Require HHSC to seek, accept, and spend any federal funds that are available for the purposes of this section, including priority funding authorized by Section 317L-1 of the Public Health Service Act (42 U.S.C. Section 201 et seq.), as added by the 21st Century Cures Act (Pub. L. No. 114-255).

SECTION 4. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such a waiver or authorization is granted.

SECTION 5. Effective date: September 1, 2017.