

BILL ANALYSIS

Senate Research Center
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S.B. 1376
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Health & Human Services
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As Filed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Since the passage of the Patient Protection and Affordable Care Act in 2010, the state has adopted a number of regulations and made significant changes to the state's healthcare delivery systems in order to comply with federal requirements. Recently, the federal government has indicated its intention to repeal and replace the Patient Protection and Affordable Care Act. In the event this occurs, it is imperative that the state be prepared to make the necessary modifications to state healthcare laws and rules to ensure millions of Texans have access to healthcare without interruption.

S.B. 1376 creates a joint interim committee (committee) to conduct a comprehensive, data-driven readiness review study in conjunction with the Health and Human Services Commission and its umbrella agencies, the Department of Insurance, and any other affected state agency. The purpose of this joint interim committee is to review the impact of changes in federal law on the state's healthcare system. The committee shall also identify what reforms are necessary on the state level in order to comply with new federal healthcare regulations.

S.B. 1376 provides that the committee shall provide a full report, including findings and recommendations, to the lieutenant governor, the speaker of the house of representatives, and the governor.

As proposed, S.B. 1376 amends current law relating to a joint interim study regarding the state's response to modifications to federal health care laws.

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. CREATION OF JOINT INTERIM COMMITTEE. (a) Provides that a joint interim committee (committee) is created to study the ability in this state to effectively respond and adapt to and implement significant modifications to federal health care laws, regulations, and requirements.

(b) Provides that the committee is composed of the members of the appropriate standing committees of the senate and the house of representatives, two members of the senate appointed by the lieutenant governor, and two members of the house of representatives appointed by the speaker of the house of representatives (speaker).

(c) Requires the lieutenant governor and speaker to each designate a co-chair from among the committee members.

(d) Requires the committee to convene at the joint call of the co-chairs.

(e) Authorizes the committee to adopt rules necessary to carry out the committee's duties under this section.

(f) Provides that the committee has all other powers and duties provided to a special or select committee by the rules of the senate and house of representatives, by Subchapter B (Legislative Reorganization Act), Chapter 301 (Legislative Organization), Government Code, and by policies of the senate and house committees on administration.

SECTION 2. INTERIM STUDY RELATING TO THE STATE'S ABILITY TO RESPOND TO MODIFICATION OF FEDERAL HEALTH CARE LAWS. (a) Requires the committee to study the ability in this state to respond and adapt to and implement significant modifications to federal health care laws, regulations, and requirements.

(b) Requires the committee to collaborate with the Texas Health and Human Services Commission, the Texas Department of Insurance, and other appropriate agencies to conduct a comprehensive, data-driven readiness review to:

(1) analyze the potential impact of modifications to federal health care laws, regulations, and requirements on state, county, and local governments and other public entities; and on health care providers, hospitals, health benefit plans, and other private organizations and individuals in this state;

(2) identify changes to state laws, regulations, and requirements necessary to access or manage federal funding from Medicaid, Medicare, or a block grant funding system established by the federal government or funding authorized by a waiver issued under Section 1115 of the federal Social Security Act (42 U.S.C. Section 1315);

(3) identify legislative reforms and executive rulemaking necessary to comply with modified federal health care laws, regulations, and requirements; and

(4) review and assess the potential impact of proposed federal and state policies and reforms on overall affordability of health care services, health care cost containment goals; patient access to physical, behavioral, and mental health care, especially in rural or underserved areas, health care delivery systems in this state, patient outcomes; reimbursement rates to health care providers, and workforce shortages.

(c) Requires the committee to prepare a report reflecting the required study that includes proposed reforms to improve the ability in this state to respond and adapt to and implement significant modifications to federal health care laws, regulations, and requirements. Requires the committee to include in the report recommendations of specific statutory and regulatory changes that appear necessary from the committee's study.

SECTION 3. COMMITTEE FINDINGS AND PROPOSED REFORMS. (a) Requires the committee created under Section 1 of this Act to, not later than December 1, 2018, submit to the lieutenant governor, the speaker of the house of representatives, and the governor the report prepared under Section 2 of this Act.

(b) Requires the lieutenant governor and the speaker to, not later than the 60th day after the effective date of this Act, appoint the members of the committee in accordance with Section 1 of this Act.

SECTION 4. ABOLITION OF COMMITTEE. Provides that the committee created under Section 1 of this Act is abolished and this Act expires January 20, 2019.

SECTION 5. Effective date: upon passage or September 1, 2017.