

## **BILL ANALYSIS**

Senate Research Center  
85R20033 MM-F

C.S.S.B. 922  
By: Buckingham  
Health & Human Services  
4/13/2017  
Committee Report (Substituted)

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

Schools are recognized as Medicaid providers and required by federal law to identify and provide certain services for special needs children such as speech-language therapy, occupational therapy, and certain counseling services. In many parts of the state, especially in rural areas, there are a limited number of professionals who are able to provide school districts with these necessary therapy services. As such, school districts in shortage areas are often required to spend significant tax dollars to contract with providers from other areas to deliver therapy services. S.B. 922 addresses this issue by permitting telehealth technology in school-based settings. In addition to reducing the financial burden on school districts, S.B. 922 helps ensure special needs students living in rural or underserved areas have increased accessibility to the essential therapy services they need to thrive.

In 2015, the Texas Legislature took action to improve access to healthcare for children in underserved areas by allowing the use of telemedicine in a school-based setting with the passage of H.B. 1878. S.B. 922 expands this provision to allow for Medicaid reimbursement of certain therapy services administered through telehealth technology in a school-based setting. S.B. 922 stipulates that only health professionals acting within their practice may provide telehealth services. It also requires consent from a parent or guardian and the presence of an onsite health professional when telehealth therapy services are provided. (Original Author's / Sponsor's Statement of Intent)

C.S.S.B. 922 amends current law relating to the reimbursement of certain providers under the Medicaid program for the provision of telehealth services.

### **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 Subchapter B, Chapter 531, Government Code, by adding Section 531.02171, as follows:

Sec. 531.02171. REIMBURSEMENT FOR CERTAIN TELEHEALTH SERVICES. (a) Defines "health professional."

(b) Requires the Health and Human Services Commission (HHSC) to ensure that Medicaid reimbursement is provided to a school district or open-enrollment charter school for telehealth services provided through the school district or charter school by a health professional, even if the health professional is not the patient's primary care provider, if:

(1) the school district or charter school is an authorized health care provider under Medicaid; and

(2) the parent or legal guardian of the patient provides consent before the service is provided.

SECTION 2. 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 3. Effective date: September 1, 2017.