

BILL ANALYSIS

S.B. 1059
By: Paxton
Human Services
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Under federal law, youth who are receiving Medicaid when they age out of foster care are eligible to continue receiving Medicaid coverage until they are 26 years of age through the Former Foster Care Children program. The state provides these young adults with coverage by automatically enrolling them in the appropriate Medicaid program when they leave state conservatorship. However, many of these former foster youth experience a disruption in coverage because they have difficulty recertifying their Medicaid eligibility annually with the state due to the complexity of the renewal materials and the transient lifestyle of many, which makes it hard to maintain a correct address on file with the state. Failure to submit these renewal documents annually may lead to a gap or complete loss of coverage. S.B. 1059 seeks to address these issues and ensure that more former foster care youths maintain their Medicaid coverage by streamlining the process of determining a former foster care youth's Medicaid eligibility, changing the period of continuous Medicaid eligibility for certain persons making the transition from foster care to independent living, and allowing those persons to recertify Medicaid eligibility online.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

S.B. 1059 amends the Human Resources Code to require the Health and Human Services Commission (HHSC), in consultation with the Department of Family and Protective Services (DFPS), to design and implement a streamlined process for determining a former foster care youth's Medicaid eligibility. The streamlined process must do the following:

- provide for the automatic enrollment and recertification of a Medicaid-eligible former foster care youth in the appropriate Medicaid program;
- be designed to prevent any unnecessary interruption of the youth's Medicaid benefits, including any interruption related to having to recertify the youth for benefits; and
- if recertification is required under federal law, use a simple application and recertification process that, depending on federal law, does not require that a youth verify Texas residency unless HHSC determines that the youth is receiving Medicaid benefits outside of Texas or that allows the youth to attest to that fact without providing additional documentation or evidence that proves Texas residency.

S.B. 1059 changes the period of continuous Medicaid eligibility for certain persons making the transition from foster care to independent living from 12 calendar months after certification and after each recertification to the maximum period permitted under federal law before any recertification is required. The bill requires the recertification process for such an individual to comply with the streamlined process designed and implemented by HHSC under the bill's provisions and requires the recertification process to include the option of recertifying online.

Implementation of a provision of this bill by HHSC or DFPS is mandatory only if a specific appropriation is made for that purpose.

EFFECTIVE DATE

September 1, 2021.