

SUBJECT: Expanding the use of home telemonitoring services under Medicaid

COMMITTEE: Public Health — committee substitute recommended

VOTE: 11 ayes — Crossover, Naishtat, Blanco, Coleman, Collier, S. Davis, Guerra, R. Miller, Sheffield, Zedler, Zerwas

0 nays

WITNESSES: For —Marina Hench, Texas Association for Home Care and Hospice; Ed Stonebraker; (*Registered, but did not testify:* Vicki Perkins and Gabriela Saenz, CHRISTUS Health; Braxton Stonebraker, Guardian eHealth Solutions; Amanda Martin, Texas Association of Business; Jaime Capelo, Texas Chapter American College of Cardiology; Nora Belcher, Texas e-Health Alliance; Dan Finch, Texas Medical Association; Clayton Travis, Texas Pediatric Society; John Davidson, Texas Public Policy Foundation; Eduardo Lazaga; Andrew Levine; Mario Sanchez)

Against — None

On — (*Registered, but did not testify:* Laurie VanHoose, HHSC)

BACKGROUND: Under Government Code, sec. 531.02164, a person diagnosed with a specified condition who also exhibits certain risk factors may receive home telemonitoring services under Medicaid. These conditions include diabetes, heart disease, and cancer.

DIGEST: CSHB 3519 would add to the list of specified conditions for which a person with a certain diagnosis could receive home telemonitoring services under Medicaid other conditions for which the Health and Human Services Commission (HHSC) had made an evidence-based determination that such monitoring would be cost-effective and feasible.

The bill would require that home telemonitoring services be available to a pediatric patient with chronic or complex medical needs who:

- concurrently was undergoing treatment by at least three medical specialists;
- was medically dependent on technology;
- had been diagnosed with end-stage solid organ disease; or
- required mechanical ventilation.

The bill also would provide Medicaid reimbursement for home telemonitoring services even if the data transmission was unsuccessful if the service provider attempted to communicate with the patient by telephone or in person to establish a successful transmission.

The bill would extend the date by which the HHSC would have to stop reimbursing providers under Medicaid for providing home telemonitoring services from September 1, 2015 to September 1, 2021.

The HHSC executive commissioner would have to adopt rules to implement CSHB 3519, and a state agency needing a waiver or authorization from a federal agency to implement a provision of the bill would be required to request it and delay implementation until receiving approval.

CSHB 3519 would take effect September 1, 2015.