

SUBJECT: Expanding maternal care services in Healthy Texas Women program

COMMITTEE: Public Health — favorable, with amendment

VOTE: 10 ayes — S. Thompson, Allison, Coleman, Frank, Guerra, Lucio, Ortega, Price, Sheffield, Zedler

0 nays

1 absent — Wray

SENATE VOTE: On final passage, April 16 — 31-0

WITNESSES: No public hearing

BACKGROUND: Human Resources Code sec. 32.0248, which expired September 1, 2011, established a demonstration project for women's health care services that expanded access to preventive health and family planning services for low-income women.

A similar program has been operated by the Health and Human Services Commission (HHSC) since 2016 as the "Healthy Texas Women program." Certain pregnant women who are eligible for Medicaid are automatically enrolled in the program on the day after their Medicaid coverage ends, two months after the end of their pregnancy.

Health and Safety Code sec. 31.003 authorizes the HHSC executive commissioner to establish a primary health care services program for eligible individuals that provides diagnosis and treatment, emergency services, family planning services, preventive health services, health education, and laboratory, X-ray, or other appropriate diagnostic services.

Health and Safety Code ch. 34 governs the Maternal Mortality and Morbidity Task Force, which is subject to the Texas Sunset Act. Sec. 34.009 specifies certain confidential information acquired by the Department of State Health Services (DSHS) relating to pregnancy-related

death or severe maternal morbidity that may not be disclosed.

Unless continued in statute, the task force is abolished, and ch. 34 expires September 1, 2023.

Tax Code ch. 323 establishes the County Sales and Use Tax Act, which governs the administration of sales and use taxes in counties. Ch. 26 excludes certain city, county, and hospital districts' additional sales and use taxes from certain property tax assessment provisions.

Observers have noted the need to address the state's high rates of maternal mortality and morbidity and align state law with new federal legislation on maternal mortality review committees. They suggest expanding prenatal and postpartum care services and improving the quality of care provided to women in this state.

DIGEST:

SB 750, as amended, would require the Health and Human Services Commission (HHSC) to expand prenatal and postpartum care services for certain women enrolled in the Healthy Texas Women program. The bill would require HHSC to assess the feasibility of providing Healthy Texas Women program services through Medicaid managed care.

The bill also would allow the Midland County Hospital District to impose a sales and use tax and make other conforming changes in Special District Local Laws Code ch. 1061 and Tax Code ch. 26.

Prenatal care. The bill would require HHSC, in collaboration with its contracted Medicaid managed care organizations, to develop and implement cost-effective, evidence-based, and enhanced prenatal services for high-risk pregnant women covered under Medicaid.

Postpartum care. HHSC would have to evaluate postpartum care services provided to women enrolled in the Healthy Texas Women program after the first 60 days postpartum. Based on the evaluation, HHSC would be required to develop a limited postpartum care services package for enrolled women to be provided after the first 60 days

postpartum and for a maximum of 12 months after their date of enrollment in the Healthy Texas Women program.

Maternal health. The bill would require HHSC to assess the feasibility and cost-effectiveness of providing Healthy Texas Women program services through Medicaid managed care in one or more health care service regions if the Healthy Texas Women Section 1115 Demonstration Waiver was approved. This section would expire September 1, 2021.

If the Centers for Medicare and Medicaid Services approved the waiver, the executive commissioner of HHSC would have to seek an amendment to the waiver as soon as practicable to provide enhanced services under the Healthy Texas Women program.

Using money from an available source and in collaboration with managed care organizations and health care providers who participated in the Healthy Texas Women program, HHSC would have to develop and implement a postpartum depression treatment network for women enrolled in Medicaid or the program.

HHSC also would have to implement strategies ensuring the continuity of care for women who transitioned from Medicaid and enrolled in the Healthy Texas Women program.

Statewide initiatives. The bill would require HHSC to develop or enhance statewide initiatives to improve the quality of maternal health care services and outcomes for women in the state. HHSC would have to specify the initiatives that each contracted managed care organization had to include in the organization's plans. The initiatives could address:

- prenatal and postpartum care rates;
- maternal health disparities that existed for minority women and other high-risk populations of women;
- social determinants of health, defined as environmental conditions that affect an individual's health and quality of life; and
- other priorities specified by HHSC.

HHSC would have to prepare, submit to the Legislature, and make available to the public an annual report summarizing:

- the commission's progress in developing or enhancing the initiatives; and
- each managed care organization's progress in incorporating the required initiatives in the organization's plans.

Medicaid funds. As soon as practicable after the bill's effective date, HHSC would have to apply to the Centers for Medicare and Medicaid Services to receive any federal money available to implement a model of care that improved the quality and accessibility of care for pregnant women with opioid use disorder enrolled in Medicaid during the prenatal and postpartum periods and their children after birth. This section would expire September 1, 2021.

Primary health care. The executive commissioner of HHSC by rule would have to ensure that women receiving services under the Healthy Texas Women program were referred to and provided with information on the primary health care services program.

Review committee. The bill would change the name of the "Maternal Mortality and Morbidity Task Force" to the "Texas Maternal Mortality and Morbidity Review Committee." The bill also would make conforming changes applicable to the review committee under Health and Safety Code ch. 34.

The bill would create an exception under which certain confidential information acquired by the Department of State Health Services (DSHS) regarding a pregnancy-related death or severe maternal morbidity could be disclosed to an appropriate federal agency for the limited purpose of complying with applicable federal requirements.

The bill would extend the expiration date of the review committee and Health and Safety Code ch. 34 from 2023 to 2027.

The Sunset Advisory Commission would have to review the committee during the two-year period preceding the date DSHS was scheduled to be abolished, but the review committee would continue until September 1, 2027. This subsection would expire September 1, 2025.

Other provisions. As soon as practicable after the bill's effective date, HHSC would have to adopt rules to implement the bill's provisions.

HHSC would be required to implement a provision of the bill only if the Legislature appropriated money specifically for that purpose. If the Legislature did not appropriate money specifically for that purpose, the commission could, but would not be required to, implement a provision of the bill using other available appropriations.

The bill also would authorize HHSC to seek a federal waiver or authorization if the commission determined that the waiver or authorization was necessary to implement the bill. HHSC could delay the implementation of the bill's provisions until the waiver or authorization was granted.

Midland County Hospital District. SB 750, as amended, would authorize the Midland County Hospital District to adopt, change the rate of, or abolish a sales and use tax at an election held in the district. The bill would prohibit the district from adopting or increasing a tax if as a result the combined rate of all sales and use taxes in the district would exceed 2 percent. Revenue collected from a tax imposed under the bill could be used by the Midland County Hospital District for any purpose of the district authorized by law.

The bill would establish election procedures, a tax effective date, and other provisions governing the tax rate and a tax election of the district.

Effective date. The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2019.

NOTES: According to the Legislative Budget Board, the bill would have a negative impact of about \$14.7 million to general revenue related funds through fiscal 2020-21.

The committee amendment would allow the Midland County Hospital District to impose a sales and use tax and make other conforming changes in Special District Local Laws Code ch. 1061 and Tax Code ch. 26.