

BILL ANALYSIS

Senate Research Center

H.B. 460
By: Maxey (Moncrief)
Health & Human Services
5-5-97
Engrossed

DIGEST

In 1994, the Long-Term Care Task Force Report recommended a review and consideration of waivers. During the 1996 House Human Service Committee's interim hearings on long-term care, advocacy groups urged the committee to re-examine consolidation. In December 1996, Health Care Financing Administration staff members met with consumers and stated that there was no prohibition on waiver consolidations. Many states are seriously considering such an option in order to minimize administration duplication, maximize the services provided, and to provide flexibility for each state in determining the appropriate services for each individual based upon that individual's needs. This bill would require the Health and Human Services Commission to report to the legislature, by January 15, 1999, on the "feasibility and advisability" of replacing all or several long-term care Medicaid waivers with a single waiver.

PURPOSE

As proposed, H.B. 460 requires the Health and Human Services Commission to report to the legislature, by January 15, 1999, on the "feasibility and advisability" of replacing all or several long-term care Medicaid waivers with a single waiver.

RULEMAKING AUTHORITY

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Requires the Commissioner of Health and Human Services (commissioner) to report to the legislature on the feasibility and advisability of replacing all or several of the waivers or authorizations that this state has obtained with respect to administration of federally funded Medicaid programs supporting long-term services at the Texas Department of Human Services (DHS), the Texas Department of Mental Health and Mental Retardation (MHMR), the Texas Rehabilitation Commission (TRC), and the Texas Department of Health (TDH) with a single waiver or authorization to minimize administrative duplication, maximize the services provided, and provide flexibility to the state in determining the appropriate combination of services to be provided to each individual based on that individual's needs. Requires the commissioner to consider the waivers or authorizations obtained with respect to the community-based alternatives program administered by DHS; the community living assistance support and services program administered by DHS; the home and community services program and the home and community services program under the Omnibus Budget Reconciliation Act, P.L. 100-203, Nursing Home Reform Amendments of 1987, administered by MHMR; the deaf and blind services program administered by TRC; and the medically dependent children program administered by TDH.

SECTION 2. Emergency clause.
Effective date: upon passage.