

BILL ANALYSIS

C.S.S.B. 2040
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Human Services
Committee Report (Substituted)

BACKGROUND AND PURPOSE

It has been reported that Medicaid providers are reimbursed at a rate well below the cost of the services provided. There are concerns that this underpayment means that Texans who rely on Medicaid have less access to community-based health care services, which are less costly than hospitals and emergency departments, because community-based providers are typically less likely to cover the costs of uncompensated and undercompensated care. C.S.S.B. 2040 seeks to require the Health and Human Services Commission to report on provider reimbursement rates and access to care in the Medicaid program to reveal the factors used to determine how and at what level services are reimbursed so the resulting information can be used to address issues associated with low reimbursement rates.

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

C.S.S.B. 2040 requires the Health and Human Services Commission (HHSC), not later than December 1, 2020, to prepare and submit to the legislature a written report regarding provider reimbursement rates and access to care in the Medicaid program. The bill requires HHSC to collaborate with the medical care advisory committee to develop and define the scope of the research for the report. The bill sets out the required contents of the report and clarifies that HHSC is not required to include in the report any information it determines is proprietary.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 2040 may differ from the engrossed in minor or nonsubstantive ways, the following summarizes the substantial differences between the engrossed and committee substitute versions of the bill.

The substitute includes a requirement for HHSC to collaborate with the medical care advisory committee to develop and define the scope of the research for the report. The substitute revises the required contents of the report.