

## **BILL ANALYSIS**

Senate Research Center  
80R4452 KFF-D

S.B. 598  
By: Zaffirini  
Health & Human Services  
3/21/2007  
As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Currently, college students whose parents have private medical insurance have the opportunity to receive medical insurance under their parents' plan until they turn 25 years of age, as long as they are enrolled in a college or university and are making academic progress. Former foster youth, who for all intents and purposes were parented by the State of Texas, do not have the opportunity to receive medical coverage. After Medicaid coverage for youth formerly in foster care ends at age 21, these young people must seek alternate coverage, and some may be eligible for Temporary Assistance for Needy Families Medicaid, thus qualifying for the adult package of services. This package, while excellent in many areas, is a benefits package that may limit or not cover certain services that may be particularly meaningful for this population.

As proposed, S.B. 598 extends Medicaid coverage to certain persons who were emancipated from Child Protective Services and are making academic progress in an accredited Texas college or university. The bill requires the Texas Health and Human Services Commission to seek a waiver or authorization from the federal government necessary for eligibility to receive federal matching funds for the program.

### **RULEMAKING AUTHORITY**

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

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.02471, as follows:

Sec. 32.02471. MEDICAL ASSISTANCE FOR CERTAIN FORMER FOSTER CARE ADOLESCENTS ENROLLED IN HIGHER EDUCATION. (a) Defines "independent foster care adolescent."

(b) Requires the Health and Human Services Commission or an agency operating part of the medical assistance program (HHSC) to provide medical assistance to certain people, except as provided by Subsection (d).

(c) Requires HHSC to apply for and actively pursue a waiver or other authorization from an appropriate federal agency to receive matching funds to provide medical assistance under this section.

(d) Requires HHSC, if the waiver or authorization applied for under Subsection (c) is not granted, to use funds appropriated for that purpose to develop and implement a program designed to provide health care services and benefits to a person described by Subsection (b) in a manner that is substantively identical to the medical assistance provided to independent foster care adolescents under Section 32.0247 (Medical Assistance for Certain Persons Making Transition from Foster Care to Independent Living), except to the extent that programmatic differences are appropriate because of the populations served by the programs and the sources of funding for the programs.

SECTION 2. Requires HHSC to apply to the federal Centers for Medicare and Medicaid Services for a waiver or other authorization as required by Section 32.02471, as added by this Act, not later than October 1, 2007.

SECTION 3. Effective date: September 1, 2007.