

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 796
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Health & Human Services
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Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Research has shown that individuals who have a substance abuse disorder and who are not receiving treatment have double the medical costs of people without a substance abuse disorder.

According to the National Institutes of Health, substance abuse disorders are brain diseases that can be successfully managed, much like diabetes, asthma, or heart disease.

In fiscal year 2006, fewer than 25 percent of the 47,663 adult clients in the Texas Medicaid program with a substance abuse disorder received treatment. Currently, treatment options for this population are limited.

Research strongly suggests that by using existing funds to provide comprehensive substance abuse treatment, Texas would see a decrease in spending related to the health care costs associated with Texas Medicaid clients who have an untreated substance abuse disorder. Currently, the cost of these health care services is approximately \$109 million annually.

C.S.S.B. 796 requires the Legislative Budget Board (LBB) to conduct a study regarding the cost-effectiveness of providing comprehensive substance abuse treatment. The bill requires the Texas Health and Human Services Commission to provide comprehensive substance abuse treatment under the medical assistance program to certain people, unless the LBB study determines that the cost of providing such services results in an increase in overall Medicaid spending.

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 531, Government Code, by adding Section 531.0226, as follows:

Sec. 531.0226. SUBSTANCE ABUSE TREATMENT EVALUATION. (a) Requires the Texas Health and Human Services Commission (HHSC) to monitor the provision of comprehensive substance abuse treatment, as described by Section 32.024(ff), Human Resources Code, to Medicaid recipients who are at least 21 years of age and analyze data relating to the provision of those services. Requires HHSC to provide the data to the Legislative Budget Board (LBB) in the format and at the times requested by the LBB.

(b) Requires that the data analyzed and provided under Subsection (a) be measured in three consecutive years, including the year before the year in which the recipient receives comprehensive substance abuse treatment, the year in which the treatment is first provided to the recipient, and the year following the year in which the treatment is first provided to the recipient, and include at least the following:

(A) the number of recipients to whom comprehensive substance abuse treatment is provided;

(B) the type of substance abuse treatment provided;

(C) the average annual cost per recipient of treatment under the Medicaid program, other than the comprehensive substance abuse treatment, including inpatient services other than inpatient labor and delivery services, emergency department services, outpatient services, and pharmaceutical and ancillary services;

(D) the average annual cost per recipient of the comprehensive substance abuse treatment; and

(E) the average annual number, per recipient, of inpatient days, emergency department visits, and outpatient visits.

(c) Requires HHSC to collect the data listed in Subsections (b)(2)(C) and (E) for Medicaid recipients who are at least 21 years of age and with respect to whom there is no evidence of a substance abuse disorder for the same period described by Subsection (b).

(d) Requires HHSC to ensure that data is analyzed using appropriate demographic categories, including recipient age, disability, and income; and the type of service delivery model through which the recipient received services through Medicaid, including the fee-for-service, primary care case management, and health maintenance organization models.

(e) Requires the LBB, using the data provided by HHSC, to evaluate cost and utilization trends and whether the provision of comprehensive substance abuse treatment through the state Medicaid program results in an increase in overall Medicaid spending. Requires the LBB, not later than February 1, 2013, to prepare and publish a report of the data. Requires the LBB to provide a draft of the report to HHSC before publishing the report.

(f) Prohibits HHSC, if the LBB determines that the provision of comprehensive substance abuse treatment through the state Medicaid program has resulted in an increase in overall Medicaid spending, from continuing to provide those services to a Medicaid recipient who is at least 21 years of age.

(g) Provides that this section expires March 1, 2013.

SECTION 2. Amends Section 32.024, Human Resources Code, by adding Subsection (ff), as follows:

(ff) Requires HHSC, except as otherwise provided by this subsection, to provide comprehensive substance abuse treatment under the medical assistance program to a person who is at least 21 years of age, has a substance abuse disorder, and otherwise qualifies for medical assistance. Prohibits HHSC from providing the treatment if, based on the data evaluated under Section 531.0226, Government Code, the LBB determines that the treatment resulted in an increase in overall medical assistance program spending. Provides that comprehensive substance abuse treatment includes assessment, residential detoxification, outpatient detoxification, methadone maintenance, residential services, specialized residential services for women, outpatient chemical dependency counseling, and any other necessary services as determined by HHSC.

SECTION 3. Requires a state agency, if necessary for implementation of a provision of this Act, to request any necessary waiver or authorization from a federal agency and authorizes delay of implementation until such waivers or authorizations are granted.

SECTION 4. Effective date: September 1, 2009.