

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 72
By: Nelson
Health & Human Services
3/9/2011
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

C.S.S.B. 72 seeks to prevent over-utilization of services and streamline licensing and contracting processes in order to promote competition and ease the administrative burden on certain health care providers.

This bill directs the Department of Aging and Disability Services (DADS) to perform utilization reviews of services in all Medicaid 1915(c) waiver programs and directs the Health and Human Services Commission and DADS to jointly explore opportunities to develop uniform licensing and contracting standards for all waiver programs.

C.S.S.B. 72 amends current law relating to streamlining of and utilization management in Medicaid long-term care waiver programs.

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. Redesignates Section 161.077, Human Resources Code, as added by Chapter 759 (S.B. 705), Acts of the 81st Legislature, Regular Session, 2009, as Section 161.081, Human Resources Code, and amends it as follows:

Sec. 161.081. New heading: LONG-TERM CARE MEDICAID WAIVER PROGRAMS: STREAMLINING AND UNIFORMITY. Redesignates existing Section 161.077 as Section 161.081. (a) Makes no changes to this subsection.

(b) Requires the Department of Aging and Disability Services (DADS), in consultation with the Health and Human Services Commission (HHSC), to streamline the administration of and delivery of services through Section 1915(c) (Consolidated Waiver Program) programs. Authorizes DADS, in implementing this subsection, subject to Subsection (c), to consider implementing certain initiatives, including, if feasible, concurrently conducting program certification and billing audit and review processes and other related audit and review processes; streamlining other billing and auditing requirements; eliminating duplicative responsibilities with respect to the coordination and oversight of individual care plans for persons receiving waiver services; and streamlining cost reports and other cost reporting processes. Makes a nonsubstantive change.

(c) Requires DADS to ensure that actions taken under Subsection (b) (relating to DADS, in consultation with HHSC, streamlining the administration of and delivery of services through certain waiver programs), rather than this section, do not conflict with any requirements of HHSC under Section 531.0218 (Long-term Care Medicaid Programs), Government Code.

(d) Requires DADS and HHSC to jointly explore the development of uniform licensing and contracting standards that would apply to all contracts for the

delivery of Section 1915(c) waiver program services; promote competition among providers of those program services; and integrate with other DADS and HHSC efforts to streamline and unify the administration and delivery of the program services, including those required by this section or Section 531.0218, Government Code.

SECTION 2. Amends Subchapter D, Chapter 161, Human Resources Code, by adding Section 161.082, as follows:

Sec. 161.082. LONG-TERM CARE MEDICAID WAIVER PROGRAMS: UTILIZATION REVIEW. (a) Defines in this section, "Section 1915(c) waiver program."

(b) Requires DADS to perform utilization review of services in all Section 1915(c) waiver programs. Requires that the utilization review include reviewing program recipients' levels of care and any plans of care for those recipients that exceed service level thresholds established in the applicable waiver program guidelines.

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

SECTION 4. Effective date: September 1, 2011.