

BILL ANALYSIS

Senate Research Center

S.B. 1059
By: Paxton
Health & Human Services
5/28/2021
Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Under federal law, youth who age out of foster care are eligible for Medicaid coverage up to age 26 through the Former Foster Care Children (FFCC) program. However, many experience a disruption in coverage because they have difficulty renewing their benefits annually with the state. S.B. 1059 increases the time that a former foster care youth shall be eligible to recertify themselves for medical assistance, streamlines the process of determining former foster care youths' eligibility for Medicaid, and allows them to recertify online.

(Original Author's / Sponsor's Statement of Intent)

S.B. 1059 amends current law relating to the process for determining the Medicaid eligibility of certain former foster care youth.

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 Sections 32.0247(e) and (f), Human Resources Code, as follows:

(e) Requires an individual qualifying for medical assistance as established by Section 32.0247 (Medical Assistance for Certain Persons Making Transition From Foster Care to Independent Living) to remain eligible for the maximum period permitted under federal law before any recertification is required, rather than to remain eligible for 12 calendar months after certification and after each recertification.

(f) Requires that, if recertification is required, the recertification process for individuals who are eligible for medical assistance under Section 32.0247 comply with Section 32.024715 and include the option of recertifying online or by mail or phone, rather than the option of recertifying by mail or phone. Makes nonsubstantive changes.

SECTION 2. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.024715, as follows:

Sec. 32.024715. STREAMLINED ELIGIBILITY DETERMINATION PROCESS FOR CERTAIN FORMER FOSTER CARE YOUTH. (a) Provides that this section applies to a former foster care youth who is eligible for Medicaid under Section 1902(a)(10)(A)(i)(IX), Social Security Act (42 U.S.C. Section 1396a(a)(10)(A)(i)(IX)), or any other law.

(b) Requires the Health and Human Services Commission (HHSC), in consultation with the Department of Family and Protective Services (DFPS), to design and implement a streamlined process for determining a former foster care youth's eligibility for Medicaid. Requires that the streamlined process:

(1) provide for the automatic enrollment and recertification of a former foster care youth in the STAR Health program, the STAR Medicaid managed care program, or another Medicaid program, as appropriate;

(2) be designed to prevent any unnecessary interruption of the youth's Medicaid benefits, including any interruption related to having to recertify the youth for benefits; and

(3) if recertification is required under federal law, use a simple application and recertification process that:

(A) to the extent permitted by federal law, does not require that a youth verify that the youth is a resident of Texas unless HHSC determines that the youth is receiving Medicaid benefits outside of Texas; or

(B) if federal law requires that a youth verify that the youth is a resident of Texas, allows the youth to attest to that fact without providing additional documentation or evidence that proves the youth is a resident of Texas.

SECTION 3. Provides that the changes in law made by this Act apply to an initial determination or recertification of eligibility of a person for medical assistance under Chapter 32 (Medical Assistance Program), Human Resources Code, made on or after the effective date of this Act, regardless of the date the person applied for that assistance.

SECTION 4. 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 a delay of implementation until such a waiver or authorization is granted.

SECTION 5. Provides that DFPS and HHSC are required to implement this Act only if the legislature appropriates money specifically for that purpose. Provides that if the legislature does not appropriate money specifically for that purpose, DFPS and HHSC are authorized, but are not required, to implement this Act using other appropriations available for the purpose.

SECTION 6. Effective date: September 1, 2021.