

AN ACT

relating to the delivery of certain Medicaid services to certain persons.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 534.111, Government Code, is amended to read as follows:

Sec. 534.111. CONCLUSION OF PILOT PROGRAMS; EXPIRATION. On September 1, 2019 [~~2018~~]:

(1) each pilot program established under this subchapter that is still in operation must conclude; and

(2) this subchapter expires.

SECTION 2. Section 534.201(b), Government Code, is amended to read as follows:

(b) On September 1, 2020 [~~2018~~], the commission shall transition the provision of Medicaid benefits to individuals to whom this section applies to the STAR + PLUS Medicaid managed care program delivery model or the most appropriate integrated capitated managed care program delivery model, as determined by the commission based on cost-effectiveness and the experience of the STAR + PLUS Medicaid managed care program in providing basic attendant and habilitation services and of the pilot programs established under Subchapter C, subject to Subsection (c)(1).

SECTION 3. (a) Using existing resources, the Health and Human Services Commission shall:

1           (1) identify and evaluate barriers preventing  
2 Medicaid recipients enrolled in the STAR + PLUS Medicaid managed  
3 care program or a home and community-based services waiver program  
4 from choosing the consumer directed services option and develop  
5 recommendations for increasing the percentage of Medicaid  
6 recipients enrolled in those programs who choose the consumer  
7 directed services option; and

8           (2) study the feasibility of establishing a community  
9 attendant registry to assist Medicaid recipients enrolled in the  
10 community attendant services program in locating providers.

11           (b) Not later than December 1, 2018, the Health and Human  
12 Services Commission shall submit a report containing the  
13 commission's findings and recommendations under Subsection (a) of  
14 this section to the governor, the legislature, and the Legislative  
15 Budget Board. The report required by this subsection may be  
16 combined with any other report required by this Act or other law.

17           SECTION 4. (a) The Health and Human Services Commission  
18 shall conduct a study of the provision of dental services to adults  
19 with disabilities under the Medicaid program, including:

20           (1) the types of dental services provided, including  
21 preventive dental care, emergency dental services, and  
22 periodontal, restorative, and prosthodontic services;

23           (2) limits or caps on the types and costs of dental  
24 services provided;

25           (3) unique considerations in providing dental care to  
26 adults with disabilities, including additional services necessary  
27 for adults with particular disabilities; and

1           (4) the availability and accessibility of dentists who  
2 provide dental care to adults with disabilities, including the  
3 availability of dentists who provide additional services necessary  
4 for adults with particular disabilities.

5           (b) In conducting the study under Subsection (a) of this  
6 section, the Health and Human Services Commission shall:

7           (1) identify the number of adults with disabilities  
8 whose Medicaid benefits include limited or no dental services and  
9 who, as a result, have sought medically necessary dental services  
10 during an emergency room visit;

11           (2) if feasible, estimate the number of adults with  
12 disabilities who are receiving services under the Medicaid program  
13 and who have access to alternative sources of dental care,  
14 including pro bono dental services, faith-based dental services  
15 providers, and other public health care providers; and

16           (3) collect data on the receipt of dental services  
17 during emergency room visits by adults with disabilities who are  
18 receiving services under the Medicaid program, including the  
19 reasons for seeking dental services during an emergency room visit  
20 and the costs of providing the dental services during an emergency  
21 room visit, as compared to the cost of providing the dental services  
22 in the community.

23           (c) Not later than December 1, 2018, the Health and Human  
24 Services Commission shall submit a report containing the results of  
25 the study conducted under Subsection (a) of this section and the  
26 commission's recommendations for improving access to dental  
27 services in the community for and reducing the provision of dental

1 services during emergency room visits to adults with disabilities  
2 receiving services under the Medicaid program to the governor, the  
3 legislature, and the Legislative Budget Board. The report required  
4 by this subsection may be combined with any other report required by  
5 this Act or other law.

6 SECTION 5. If before implementing any provision of this Act  
7 a state agency determines that a waiver or authorization from a  
8 federal agency is necessary for implementation of that provision,  
9 the agency affected by the provision shall request the waiver or  
10 authorization and may delay implementing that provision until the  
11 waiver or authorization is granted.

12 SECTION 6. This Act takes effect September 1, 2017.

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President of the Senate

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Speaker of the House

I certify that H.B. No. 3295 was passed by the House on May 4, 2017, by the following vote: Yeas 144, Nays 0, 2 present, not voting; and that the House concurred in Senate amendments to H.B. No. 3295 on May 26, 2017, by the following vote: Yeas 140, Nays 0, 2 present, not voting.

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Chief Clerk of the House

I certify that H.B. No. 3295 was passed by the Senate, with amendments, on May 24, 2017, by the following vote: Yeas 31, Nays 0.

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Secretary of the Senate

APPROVED: \_\_\_\_\_

Date

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Governor