

Chapter 1030

H.B. No. 1629

AN ACT

relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.

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

SECTION 1. Section 536.003, Government Code, is amended by adding Subsections (f), (g), and (h) to read as follows:

(f) The commission, in coordination with the Department of State Health Services, shall develop and implement a quality-based outcome measure for the child health plan program and Medicaid to annually measure the percentage of child health plan program enrollees or Medicaid recipients with HIV infection, regardless of age, whose most recent viral load test indicates a viral load of less than 200 copies per milliliter of blood.

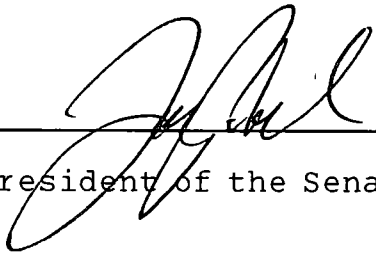
(g) The commission shall include aggregate, nonidentifying data collected using the quality-based outcome measure described by Subsection (f) in the annual report required by Section 536.008 and may include the data in any other report required by this chapter. The commission shall determine the appropriateness of including the quality-based outcome measure described by Subsection (f) in the quality-based payments and payment systems developed under Sections 536.004 and 536.051.

(h) In this section, "HIV" has the meaning assigned by Section 81.101, Health and Safety Code.

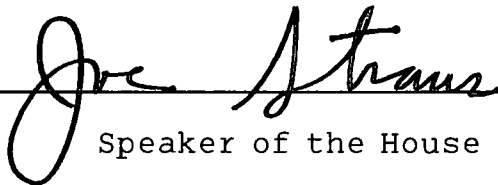
1 SECTION 2. As soon as practicable after the effective date
2 of this Act, the Health and Human Services Commission and the
3 Department of State Health Services shall develop and implement the
4 quality-based outcome measure required by Section 536.003(f),
5 Government Code, as added by this Act.

6 SECTION 3. 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 4. This Act takes effect immediately if it receives
13 a vote of two-thirds of all the members elected to each house, as
14 provided by Section 39, Article III, Texas Constitution. If this
15 Act does not receive the vote necessary for immediate effect, this
16 Act takes effect September 1, 2017.




President of the Senate



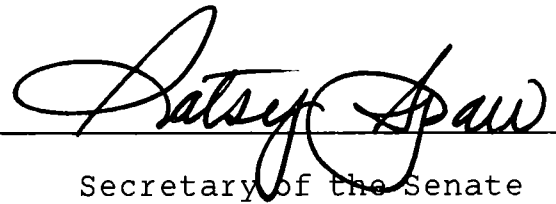
Speaker of the House

I certify that H.B. No. 1629 was passed by the House on May 4, 2017, by the following vote: Yeas 137, Nays 9, 2 present, not voting; and that the House concurred in Senate amendments to H.B. No. 1629 on May 26, 2017, by the following vote: Yeas 140, Nays 4, 2 present, not voting.



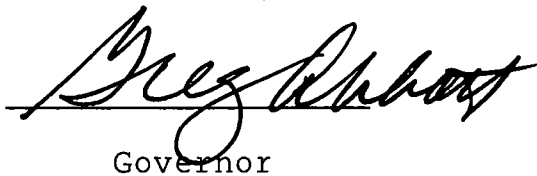
Chief Clerk of the House

I certify that H.B. No. 1629 was passed by the Senate, with amendments, on May 24, 2017, by the following vote: Yeas 30, Nays 1.



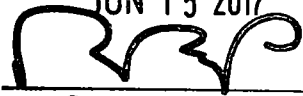
Secretary of the Senate

APPROVED: 6-13-2017
Date



Governor

FILED IN THE OFFICE OF THE
SECRETARY OF STATE
3 PM O'CLOCK

JUN 15 2017


Secretary of State

**LEGISLATIVE BUDGET BOARD
Austin, Texas**

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 25, 2017

TO: Honorable Joe Straus, Speaker of the House, House of Representatives

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB1629 by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Passed 2nd House**

No significant fiscal implication to the State is anticipated.

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection. HHSC would be required to include the quality-based outcome measure data in the annual report required by Government Code §536.008 and would be permitted to include the data in other reports required by Chapter 536 of Government Code. HHSC would be required to determine the appropriateness of including the quality-based outcome measure in the quality-based payment and payment systems.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, SD, KCA, LR, RGU

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 18, 2017

TO: Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB1629 by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.),
Committee Report 2nd House, Substituted

No significant fiscal implication to the State is anticipated.

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection. HHSC would be required to include the quality-based outcome measure data in the annual report required by Government Code §536.008 and would be permitted to include the data in other reports required by Chapter 536 of Government Code. HHSC would be required to determine the appropriateness of including the quality-based outcome measure in the quality-based payment and payment systems.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services,
Department of

LBB Staff: UP, KCA, LR, RGU

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

May 9, 2017

TO: Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB1629 by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Engrossed**

No significant fiscal implication to the State is anticipated.

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, KCA, LR, RGU

**LEGISLATIVE BUDGET BOARD
Austin, Texas**

FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

March 18, 2017

TO: Honorable Four Price, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB1629 by Coleman (Relating to the development of a quality-based outcome measure for the child health plan program and Medicaid regarding certain persons with HIV.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would require coordination between the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) to develop and implement a quality-based outcome measure for Medicaid and Children's Health Insurance Program (CHIP) recipients related to HIV infection.

The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on September 1, 2017.

Based on the analysis provided by HHSC and DSHS, the provisions of the bill can be implemented within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, KCA, LR, RGU