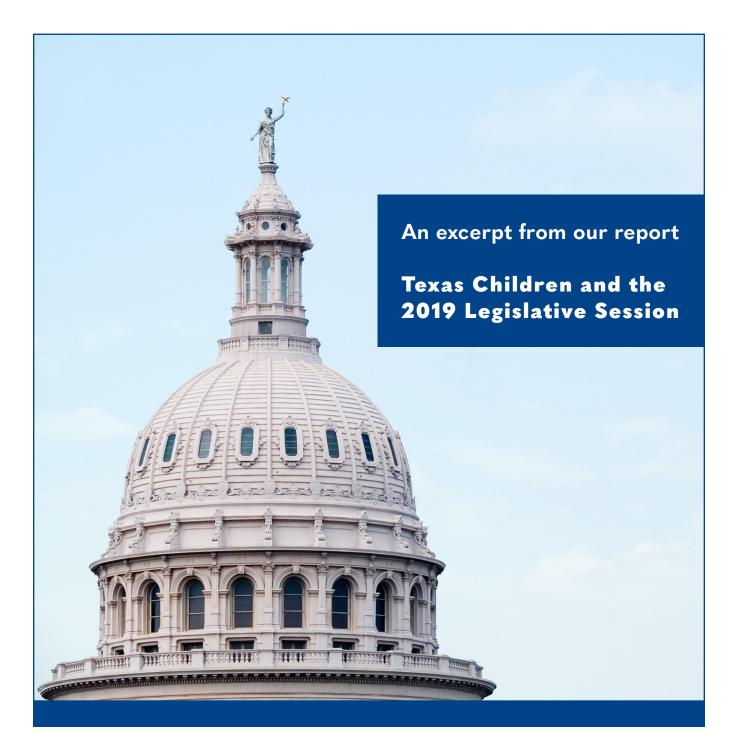


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# Review of **MATERNAL AND CHILD HEALTH** Policy Progress During the 2019 Texas Legislative Session



# Review of Maternal and Child Health Policy Progress During the 2019 Texas Legislative Session

State leaders made no progress on the state's worst-in-the-nation uninsured rates for children, women of childbearing age, and other adults this session, but there were some bright spots as well as signs of new momentum. The House, but not the Senate, passed maternal and child health coverage bills that languished in previous sessions. The Legislature passed targeted measures on maternal health and on Medicaid managed care reform that fell short of expectations but still made important improvements. Along with our team's work on these bills, Texans Care for Children's staff also championed successful legislation to ensure more Texas mothers have transportation to prenatal and postpartum care appointments.

The **Children's Health Coverage** bill, HB 342, became a higher profile bill this session after receiving little attention in 2017. State data released this year revealed that eligible Texas children are often removed from Medicaid health insurance due to the repeated documentation that Texas requires many families to provide to verify their income from month to month. HB 342 sought to address this problem by reducing red tape and keeping eligible kids enrolled in health coverage. Legislators on both sides of the aisle worked closely with Texans Care for Children and other partners to pass a compromise version of the bill out of the House Committee, but it was not scheduled for a full House vote. The full House did pass the compromise version as an amendment to SB 1105, but Senators did not bring that bill back up for a vote in the

Senate. While legislation did not pass on the issue, the progress that was made may pave the way for a future policy change to ensure that more eligible children maintain the health coverage they need to do well in school and thrive.

State leaders raised expectations for progress on maternal health in 2019 by directing the state's Maternal Mortality and Morbidity Task Force in 2017 to study maternal health and make recommendations for action. Supporting maternal health is critically important for preventing maternal deaths as well as addressing the much more common - and often devastating – health challenges that can arise for babies, pregnant women, and new mothers. The House took a big step forward by passing HB 744, which would have implemented the Task Force recommendation to extend mothers' postpartum Medicaid coverage to 12 months after childbirth, replacing the current state policy that leaves many Texas mothers uninsured just two months after delivery. Unfortunately, the Senate did not take up the legislation. The Legislature also failed to move on bills to accept Medicaid expansion funding to cover uninsured low-wage workers.

While the Legislature fell short of meeting expectations on maternal health, it did pass some important, limited measures. Texans Care for Children played a leading role in crafting and guiding HB 25, a bill that passed to establish a pilot program to ensure more Texas mothers can use the state's Medicaid transportation program to attend prenatal and postpartum care appointments. Prior to HB 25, mothers who needed to take their newborn babies or other young children with them were unable to use the program. The most significant maternal health bill that passed was HB 1111, which passed as an amendment to SB 748. It establishes a pregnancy medical home pilot program to coordinate maternity care; establishes a pilot program to improve care coordination services for women at higher risk for poor pregnancy, birth, or postpartum outcomes; and directs HHSC to develop a program to deliver prenatal and postpartum care through telehealth services, among other provisions. Additionally, SB 750 and its accompanying \$15 million in the state budget have the potential to support additional postpartum health services for a portion of the women enrolled in the state's Healthy Texas Women program. The budget also includes an additional \$7 million requested by the Department of State Health Services for maternal health initiatives and a notable increase in funding for substance use prevention and treatment for pregnant women and mothers.

Expectations were also high this session for reform of the state's Medicaid managed care program, in which the state contracts with private health insurance companies to serve as a middle man between medical providers and Medicaid enrollees, such as children in foster care and Texans with disabilities. The Dallas Morning-News' investigation into the system helped highlight many areas that were ripe for reform. The Legislature did not pass the bill that included the most sweeping reforms and patient protections, HB 2453. However, elements of that bill and others passed as amendments to SB 1095, SB 1207, and HB 4533. The most significant reforms that passed this session will create an external

medical review to resolve a Medicaid client's appeal after a health insurer denies or reduces doctor-ordered treatments; streamline and add a bit of oversight to prior authorizations (the rules insurers have for what services are and are not covered); and improve medication access for kids with disabilities.

Following the legislative session, it will be important for state leaders to work to reduce the uninsured rate for children, mothers, and all low-wage workers, building on the legislation that passed the House but stalled in the Senate.



# Outcomes for Key Maternal and Child Health Legislation

## PASSED

#### Support Children by Supporting Maternal Health

HB 25 by Rep. M. González Similar bill: SB 937 by Sen. Zaffirini	This bill creates a pilot program that removes obstacles in the current medical transportation program and ensures more Texas mothers can attend prenatal and postpartum care appointments.
HB 253 by Rep. Farrar	This bill requires the HHSC to develop and implement a five-year strategic plan to improve access to screening, referral, treatment, and support services for postpartum depression.
HB 405 by Rep. Minjarez	This bill designates June as Neonatal Abstinence Syndrome Awareness Month, with the goal to raise awareness of prenatal substance exposure and the impact on babies and to increase awareness of substance use treatment and recovery supports available in Texas.
<b>HB 475 by Rep. Howard</b> Similar bill: SB 1290 by Sen. Watson	This bill ensures pregnant and parenting youth in foster care receive basic parenting education and services that will help preserve their young families. The bill addresses youth in regions of the state that are not served by the Helping through Intervention and Prevention (HIP) program.
HB 541 by Rep. M. González	This bill clarifies that Texas mothers may use a breast pump in public.
HB 650 by Rep. White	This bill takes steps to improve health outcomes for women involved in the justice system through correctional officer training related to care for pregnant women, pregnancy and parenting classes, nutrition support for pregnant women, and a prohibition on shackling women while pregnant.
<b>HB 1111 by Rep. S. Davis</b> Passed as an amendment to SB 748	This bill establishes a pregnancy medical home pilot program to coordinate maternity care; establishes a pilot program to improve care coordination services for women at higher risk for poor pregnancy, birth, or postpartum outcomes; and directs HHSC to develop a program to deliver prenatal and postpartum care through telehealth services, among other provisions.

## Support Children by Supporting Maternal Health (continued)

<b>SB 436 by Sen. Nelson</b> Similar bill: HB 1292 by Rep. Price	This bill seeks to improve screening to better identify and care for women with opioid use disorder; improve referrals to treatment and continuity of care; increase medication- assisted treatment options; and optimize health care provided to pregnant women with opioid use disorder and to newborns.
<b>SB 559 by Sen. Miles</b> Passed as an amendment to SB 750 Similar bill: HB 1255 by Rep. Hinojosa	This bill improves maternal health data in Texas by requiring a hospital or birthing center to send patient records to DSHS within 30 days of the state's request regarding a pregnancy-related death.
SB 750 by Sen. Kolkhorst	This bill directs HHSC to evaluate and develop a limited postpartum care package for new mothers enrolled in Healthy Texas Women (HTW) program and to develop strategies to ensure continuity of care for new mothers who transition from Medicaid for Pregnant Women into HTW, among other provisions.
SB 1564 by Sen. West	This bill improves access to medication-assisted treatment for Texans with substance use disorder by authorizing Medicaid reimbursement for the prescribing of buprenorphine by an advanced practice registered nurse.
SB 2132 by Sen. Powell	This bill improves awareness of the HTW program by adding information to the notice sent to new mothers enrolled in HTW after having a baby.

## Support Children by Reforming Medicaid Managed Care

HB 72 by Rep. White Similar bill: SB 1493 by Sen. Paxton	This bill allows adoptive parents to opt into STAR Health Medicaid for a child with a chronic health condition and establishes a program that protects the continuity of care for each child following adoption.
HB 1576 by Rep. Phelan	This bill significantly transforms the medical transportation program by requiring Medicaid health plans, rather than current transportation providers or regional brokers, to manage and coordinate the transportation benefit. Health plans may arrange ridesharing for a client or use existing medical transportation providers that offer handicap accessible vehicles.

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## Support Children by Reforming Medicaid Managed Care (continued)

SB 1096 by Sen. Perry	This bill improves medication access for kids with disabilities by prohibiting prior authorizations for drugs prescribed to a child enrolled in the STAR Kids Medicaid managed care program; and streamlines some prior authorization processes when a child is hospitalized.
<b>SB 1105 by Sen. Kolkhorst</b> Passed as an amendment to HB 4533	This bill directs HHSC to implement a no-wrong-door system for Medicaid managed care grievances; establish a procedure for expedited resolution of a Medicaid-related grievance; and publish quality and health outcome data for each Medicaid health plan in an easy-to-read format.
SB 1207 by Sen. Perry	This bill improves the coordination of benefits for children who have both private health insurance and Medicaid coverage in STAR Kids; creates an external medical review process to resolve a Medicaid client's appeal after HHSC or a Medicaid health plan denies or reduces health care services; streamlines several prior authorizations processes for health providers and health plans; and requires health plan notices to clients about denial of services to include a clear, easy-to-understand explanation of the reason for the denial. It includes select provisions of HB 2453 and HB 4178.

## Support Children's Health Directly

HB 3345 by Rep. Price	This bill requires certain private health plans regulated by the state to cover and reimburse health providers for health services delivered through telehealth on the same basis and to the same extent that the plan covers the service in an in-person setting.
<b>SB 21 by Sen. Huffman</b> Similar bill: HB 749 by Rep. Zerwas	This bill raises the age of tobacco sales from age 18 to 21.
SB 670 by Sen. Buckingham	This bill eliminates some restrictions on the use of telemedicine in Medicaid so that safety-net health centers can offer telehealth benefits to kids and families.
SB 747 by Sen. Kolkhorst	This bill prohibits health plans that cover newborn care from limiting or excluding coverage of newborn screening tests and requires DSHS to publish on its website the cost of and instructions for submitting reimbursements for a newborn screening test kit.

#### Support Children's Health Directly (continued)

SB 748 by Sen. Kolkhorst	This bill creates a newborn screening preservation account to establish a consistent and long-term funding stream to repair, upgrade, and expand screenings conducted by the DSHS public health lab.
<b>SB 952 by Sen. Watson</b> Similar bill: HB 1808 by Rep. Lucio III	This bill updates and clarifies minimum child care standards for nutrition and active play, areas already regulated through state licensing standards.
<b>SB 1834 by Sen. Alvarado</b> Similar bill: HB 3541 by Rep. Rose	This bill creates a pilot program that incentivizes Texas- grown fresh fruits and vegetables under the supplemental nutrition assistance program (SNAP).

#### Impact Children By Impacting Maternal Health

## **SB 195 by Sen. Perry** This bill requires DFPS to collect and publicly report statelevel data related to parental substance use and prenatal substance exposure.

## **DID NOT PASS**

#### Support Children by Supporting Maternal Health

HB 60 by Rep. Ortega	This bill would have required institutions of higher educatior to e-mail students each fall with information about the Healthy Texas Women and Family Planning Program.
HB 565 by Rep. Coleman Similar bill: HB 590 by Rep. Israel Similar bill: HB 826 by Rep. Bernal Similar bill: SB 327 by Sen. Alvarado	This bill would have used federal Medicaid expansior funding to cover uninsured low-wage adults.
HB 744 by Rep. Rose Similar bill: HB 1110 by Rep. S. Davis Similar bill: HB 241 by Rep. Farrar Similar bill: HB 411 by Rep. Thierry Similar bill: HB 610 by Rep. Walle Similar bill: SB 147 by Sen. Rodríguez	This bill would have extended the length of time eligible women are covered by Medicaid from 60 days after childbirth to 12 months.
HB 800 by Rep. Howard	This bill would have included contraception as a covered benefit under the Children's Health Insurance Program (CHIP) when teens have parental consent.
	(CHIP) when teens have parental consent.

## Support Children by Supporting Maternal Health (continued)

HB 840 by Rep. Bucy Similar bill: SB 524 by Sen. Johnson	This bill and the accompanying constitutional amendment would have provided Texas voters an opportunity to vote on using federal Medicaid expansion funding to cover uninsured low-wage adults.
HB 937 by Rep. S. Davis Similar bill: SB 795 by Sen. Alvarado	This bill would have allowed women with Medicaid or private health insurance to receive up to a twelve-month supply of prescription contraception at one time.
HB 1589 by Rep. Ortega	This bill would have improved awareness about the HTW program by notifying pregnant women enrolled in Medicaid that they will be auto-enrolled into the HTW program.
HB 2091 by Rep. Ortega	This bill would have promoted the use of community health workers, also known as promotoras, by allowing Medicaid health plans to report associated expenses as a quality improvement cost rather than an administrative expense.
HB 2618 by Rep. Walle	This bill would have created a pilot program to place mental health peer specialists in safety-net health centers to serve women at risk of or who have developed postpartum depression.
SB 429 by Sen. Lucio	This bill would have directed the state to develop a comprehensive plan for increasing and improving the workforce to serve persons with mental health and substance use conditions.
SB 2150 by Sen. Kolkhorst	This bill would have aligned state law with federal law to allow Texas to apply for grant funding under the Preventing Maternal Deaths Act, which makes grants available to state maternal mortality review committees. This bill also would have allowed family members, health care facilities, and health care professionals to report pregnancy-related deaths to the state health agency.

### Support Children by Reforming Medicaid Managed Care

HB 2453 by Rep. S. Davis Similar bill: SB 1139 by Sen. Watson	This bill would have strengthened Medicaid managed care by improving key areas, such as contract oversight, network adequacy enforcement, prior authorizations, appeals and fair hearings, utilization review, care coordination, transparency, and accountability. (Select provisions are included in SB 1207, which passed.)
	adequacy enforcement, prior authorizations, appea and fair hearings, utilization review, care coordinatio transparency, and accountability. (Select provisions a

### Support Children by Reforming Medicaid Managed Care (continued)

HB 3721 by Rep. Deshotel	This bill would have required HHSC to contract with an independent review organization to review and resolve a Medicaid client's appeal made after a Medicaid health plan denies or reduces health services because of medical necessity.
<b>HB 4178 by Rep. Frank</b> Similar bill: SB 2239 by Sen. Kolkhorst	This bill would have improved the appeal and fair hearing process after a Medicaid client appeals a denial of services; streamlined enrollment and coordination of benefits; and simplified the prior authorization process for Medicaid managed care.
<b>SB 1140 by Sen. Watson</b> Similar bill: HB 3478 by Rep. S. Davis	This bill would have directed HHSC to contract with at least three independent review organizations to resolve a Medicaid client's appeal after HHSC or a Medicaid health plan denies or reduces health care services. The independent review organization would have provided objective, unbiased review of medical necessity determinations done by clinical staff with training and experience in the health service at issue.

### Support Children's Health Directly

HB 342 by Rep. Cortez Similar bill: SB 637 by Sen. Zaffirini	This bill would have provided continuous Medicaid coverage to eligible children, reducing the current mid-year requests for additional income verification documentation.
HB 1063 by Rep. Price	This bill would have repealed the expiration of the Medicaid telemonitoring reimbursement program so that the program can continue. The bill also would have required Medicaid to cover home telemonitoring services to certain pediatric patients who are diagnosed with end-stage solid organ disease, had received an organ transplant, or require mechanical ventilation.

# VETOED

### Support Children's Health Directly

#### HB 455 by Rep. Allen

Similar bill: SB 364 by Sen. Watson

This bill would have required school districts to adopt a formal recess policy, including the number of minutes for recess and whether or not recess may be withheld as a form of punishment.