

# 2017 Legislative Summary

## 85<sup>th</sup> Legislative Session

(last updated June 1, 2017)

### Funding & Budget Issues

**[SB 1](#)** (Nelson/Zerwas) - *total funding for Medicaid in 2018-2019 is \$62.4 billion All Funds (\$26.3 billion non-federal).*

The budget covers Legislative Budget Board (LBB) estimates for caseload growth for 2018, but not for 2019; also unfunded is projected cost growth per Medicaid participant for 2018 or 2019.

The largest budget cut directive is in HHSC Rider #34 Cost Containment, which requires the agency to reduce Medicaid spending by \$830 million All Funds (\$350 million General Revenue).

NAIP, MPAP, and QIPP Payments Reporting. In the event the Centers for Medicare and Medicaid Services (CMS) complete their review of the Network Access Improvement Program (NAIP), Nursing Facility Minimum Payment Amounts Program (MPAP), and Quality Incentive Payment Program (QIPP), and provide approval for the programs, the Health and Human Services Commission, out of funds appropriated above in L.1.1, HHS System Supports, shall report to the Legislative Budget Board and Governor an estimate of the funds that will be available and an estimate of the non-state funds used as intergovernmental transfers available.

### Managed Care & Health Plans

**[SB 654](#)** (Seliger) - *participation of an advanced practice registered nurse as a primary care or network provider for certain governmental and other health benefit plans.* Authorizes certain health plans to include advanced practice registered nurses as primary care providers in an applicable entity's provider network, regardless of whether the physician supervising the nurse is in the entity's provider network.

**[SB 1107](#)** (Schwertner/Price) - *relating to telemedicine and telehealth services.* The Texas Medical Board (TMB), Texas Board of Nursing (BON), Texas Physician Assistant Board, and Texas State Board of Pharmacy (TSBP) are required to adopt rules to determine a valid telemedicine prescription and publish frequently asked questions relating to a valid prescription on each respective agency website. Specifies that a health benefit plan may not exclude from coverage a covered health care service or procedure delivered by a preferred or contracted health professional to a covered patient as a telemedicine medical service or telehealth service solely on the basis of the service or procedure not being provided in person. The bill expressly excludes mental health services from statutory provisions governing telemedicine and telehealth.

### Regulatory Issues

#### Nursing Facilities & Assisted Living Facilities

**[HB 284](#)** (Springer) - *authorization for certain health care facilities to secure residents with wheelchair self-release seat belts.* The bill requires that certain health-care facilities allow a resident to use a wheelchair self-release seatbelt in a wheelchair, provided the resident demonstrates an ability to release and fasten the

seatbelt without assistance and the use of a seatbelt complies with the residents plan of care, and the facility receives written authorization signed by the resident or legal guardian.

**[HB 1642](#)** (Bell) - *reporting requirements for investigations of abuse, neglect, or exploitation against residents of certain health facilities.* Requiring DADS to continue to submit such reports to the appropriate law enforcement agency only when DADS determines the report of abuse, neglect, or exploitation is substantiated at the conclusion of the investigation.

**[HB 2025](#)** (Davis) - *staffing requirements for certain facilities that provide care to persons with Alzheimer's disease or related disorders; authorizing an administrative penalty.* Requires employees of certain facilities that provide direct care to individuals with Alzheimer's disease or related disorders to complete training in the provision of care to persons with Alzheimer's and related disorders. Authorize the HHSC to assess a penalty against a facility that does not comply with the training requirement. Requires the HHSC to take certain enforcement actions against facilities that violate that requirement, and to adopt rules related to the administration and implementation of the provisions of the bill.

HB 2025 includes language from **[SB 932](#)** (Schwertner). Requires HHSC to develop and implement a system to track the scope and severity of violations of rules and standards regulating certain long-term care facilities that is comparable to the system used by the Centers for Medicare and Medicaid Services (CMS) to categorize the scope and severity of violations for nursing homes. SB 932 removes the right to correct for Level Three (actual harm) violations.

**[SB 924](#)** (Perry) - *relating to informal dispute resolutions for violations of health and safety standards at certain long-term care facilities.* Requires HHSC to provide certain documentation related to the survey, inspection, or other investigation of assisted living facilities to facilities that request an informal dispute resolution in response to a statement of violations. The documentation would include notes taken by or e-mails or messages sent by a commission employee involved with the survey, inspection, investigation, or other visit of an assisted living facility, with certain information redacted. Authorizes HHSC to charge and requires the ALF to pay the reasonable costs associated with making such required redactions. The bill requires the informal dispute resolution process to require that HHSC bear the burden of proving the violation of a standard or standards.

**[SB 1049](#)** (Uresti) - *relating to safety requirements of assisted living facilities.* Requires HHSC to issue a technical memorandum providing guidance on the interpretation of minimum life safety code standards as they apply to ALFs at least twice each year. Requires any new requirement that relates to an existing standard to first appear in a technical memorandum. Requires HHSC to solicit comments from interested parties and experts to assist in determining which standards need to be addressed in such a memorandum and to post the memorandum on the HHSC website. Establishes that such a memorandum is binding and must be followed by a person conducting a life safety code survey under the Assisted Living Facility Licensing Act.

## Priority Legislation Not Passed

**[HB 2454/SB 1819](#)** (Klick/Burton) - *relating to the provision of a nursing facility quality-based payment incentives program and a program to increase direct care staff and wages under Medicaid.* HB 2454 was

placed on the House Calendar for May 11, 2017 but was not brought up for a vote prior to the deadline.  
(SUPPORT)

[HB 2766/SB 1130](#) (Sheffield/Hinojosa) - *Relating to the creation and administration of a reinvestment allowance for certain long-term care facilities (nursing home provider tax)*. HB 2766 was placed on the Senate Intent Calendar for May 24, 2017 but was not brought up for a vote prior to the deadline. (OPPOSED)

## Resources

[Texas Legislature Online](#) – Search Legislation

[Legislative Budget Board](#) – 2017-2018 Budget Documents

[Health and Human Services Commission](#) – Presentations and Reports to the 85<sup>th</sup> Legislature

For more information contact Alyse Meyer, Director of Public Policy at [alyse@leadingagetexas.org](mailto:alyse@leadingagetexas.org) or 512-467-2242