



Texas Hospitals Prepare for the 2021 Legislative Session ***Suggested Interim Charges for 2019-2020***

Providing the highest quality care and ensuring positive health outcomes are hallmarks of Texas hospitals' work. Texas hospitals support funding and programs that adequately reimburse providers for the care they provide and promote access to timely care for their patients. To support that work, THA suggests the following topics to study in advance of the 87th Texas Legislature in 2021.

Medicaid 1115 Transformation Waiver (*House Appropriations Committee, Senate Finance Committee*)

- Texas' current five-year Medicaid 1115 Transformation Waiver changes the way that uncompensated care is calculated for provider reimbursement payments and phases out the Delivery System Reform Incentive Payment program by 2021. The federal government requires the Texas Health and Human Services Commission to develop a DSRIP transition plan, and the committees should evaluate the plan to ensure the stability of the health care safety net. The committees also should study and report on the forthcoming federal changes in budget neutrality calculations that will impact any future Waiver renewals.

Health Care Coverage (*House Appropriations Committee, House County Affairs Committee, House Human Services Committee, House Insurance Committee, Senate Health & Human Services Committee*)

- Texas continues to have the highest percentage and number of uninsured individuals in the U.S., and the number of uninsured children is rising. The committees should evaluate the factors contributing to declining rates of health care coverage, especially among children, and study and report on the impact of the uninsured on communities, businesses, consumer health care costs and uncompensated care costs. The report should include recommendations for increasing the number of Texans with health care coverage and improving access to care.

Managed Care (*House Insurance Committee, House Human Services Committee, Senate Health & Human Services Committee, Senate State Affairs Committee*)

- Study the impact of the 30-day limit on hospital stays for Texas Medicaid's STAR + PLUS population. Evaluate how the limit impacts patients, hospitals and health plans. Study how the limit contributes to the uncompensated care costs and the overall cost of care.
- Study THHSC's oversight of Medicaid managed care organizations, specifically:
 - Review THHSC's policies related to quality metrics, particularly those related to the Hospital Quality-Based Potentially Preventable Readmissions and Complications Program. Identify which patient populations have a disproportionate rate of readmissions and the reasons for those readmissions and evaluate how managed care coordination impacts readmissions.
 - Evaluate the Pay-4-Quality Program and how it is working toward improving quality for patients.
 - Study care coordination programs and how THHSC evaluates whether care coordination occurs on a patient-by-patient basis. Review whether THHSC evaluates the accessibility of care coordinators for both patients and providers.
- Study THHSC's oversight of network adequacy standards for managed care plans. Make recommendations for how it can improve oversight and strengthen network participation.

Surprise Billing (*House Insurance Committee, Senate Business & Commerce Committee*)

- Monitor the Texas Department of Insurance's implementation of Senate Bill 1264, 86th Texas Legislature, the new state law banning surprise medical billing of patients for emergency or unplanned out-of-network health care services. Study trends in surprise billing as well as market and regulatory conditions that contribute to the prevalence of surprise medical bills in Texas.
- Evaluate how network adequacy impacts the prevalence of surprise medical bills and recommend opportunities to improve network adequacy in Texas.