

**Texas State Statutes**

**S.B. No. 601**

**AN ACT**

Relating to certain educational programs and support services under a managed care Medicaid program.

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

SECTION 1. Section 16, Article 4413(502), Revised Statutes, is amended to read as follows:

**Sec. 16. ADMINISTRATION OF MEDICAID PROGRAM.**

- (A) On approval by the federal government, the commission is the state agency designated to administer federal medical assistance funds.
- (B) In adopting rules implementing a managed care Medicaid program, the commission shall establish guidelines for and require managed care organizations to provide education programs for providers and clients using a variety of techniques and mediums.
- (C) A provider education program must include information on:
  - (1) Medicaid policies, procedures, eligibility standards, and benefits;
  - (2) the specific problems and needs of Medicaid clients; and
  - (3) the rights and responsibilities of Medicaid clients under the bill of rights and the bill of responsibilities prescribed by this section.
- (D) A client education program must present information in a manner that is easy to understand. A program must include information on:
  - (1) a client's rights and responsibilities under the bill of rights and the bill of responsibilities prescribed by this section;
  - (2) how to access health care services;
  - (3) how to access complaint procedures and the client's right to bypass the managed care organization's internal complaint system and use the notice and appeal procedures otherwise required by the Medicaid program;
  - (4) Medicaid policies, procedures, eligibility standards, and benefits;
  - (5) the policies and procedures of the managed care organization; and
  - (6) the importance of prevention, early intervention, and appropriate use of services.
- (E) The commission by rule shall adopt a bill of rights and a bill of responsibilities for each person enrolled in the Medicaid program. The bill of rights must address a client's right to:
  - (1) respect, dignity, privacy, confidentiality, and nondiscrimination;
  - (2) a reasonable opportunity to choose a health care plan and primary care provider and to change to another plan or provider in a reasonable manner;
  - (3) consent to or refuse treatment and actively participate in treatment decisions;
  - (4) ask questions and receive complete information relating to the client's medical condition and treatment options, including specialty care;
  - (5) access each available complaint process, receive a timely response to a complaint, and receive a fair hearing; and
  - (6) timely access to care that does not have any communication or physical access barriers.

- (F) The bill of responsibility must address a clients responsibility to:
- (1) learn and understand each right the client has under the Medicaid program;
  - (2) abide by the health plan and Medicaid policies and procedures;
  - (3) share information relating to the client's health status with the primary care provider and become fully informed about service and treatment options; and
  - (4) actively participate in decisions relating to service and treatment options, make personal choices, and take action to maintain the client's health.
- (G) The commission shall provide support and information services to a person enrolled in or applying for Medicaid coverage who experiences barriers to receiving health care services. The commission shall give emphasis to assisting a person with an urgent or immediate medical or support need. The commission may provide support and information services by contracting with a nonprofit organization that is not involved in providing health care, health insurance, or health benefits. As a part of the support and information services required by this subsection, the commission or nonprofit organization shall:
- (1) operate a statewide toll-free assistance telephone number that includes TDD lines and assistance for persons who speak Spanish;
  - (2) intervene promptly with the state Medicaid office, managed care organization and providers, the Texas Department of Health, and any other appropriate entity on behalf of a person who has an urgent need for medical services;
  - (3) assist a person who is experiencing barriers in the Medicaid application and enrollment process and refer person for further assistance if appropriate;
  - (4) educate persons so that they:
    - (a) understand the concept of managed care;
    - (b) understand their rights under the Medicaid program, including grievance and appeal procedures; and
    - (c) are able to advocate for themselves;
  - (5) collect and maintain statistical information on a regional basis regarding calls received by the assistance lines and publish quarterly reports that:
    - (a) list the number of calls received by region;
    - (b) identify trends in delivery and access problems;
    - (c) identify recurring barriers in the Medicaid system; and
    - (d) indicate other problems identified with Medicaid managed care; and
  - (6) assist the state Medicaid office, managed care organizations and providers, and the Texas Department of Health in identifying and correcting problems, including site visits to affected regions if necessary.

SECTION 2. The importance of this legislation and the crowded condition of the calendars in both houses create an emergency and an imperative public necessity that the constitutional rule requiring bills to be read on three several days in each house be suspended, and this rule is hereby suspended, and that this Act take effect and be in forced from and after its passage, and it is so enacted.