## PRELIMINARY DRAFT

TEXAS LEGISLATIVE COUNCIL Government Code Chapter 543 4/21/22

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17	CHAPTER 543. CLINICAL INITIATIVES TO IMPROVE MEDICAID QUALITY OF
18	CARE AND COST-EFFECTIVENESS
19	SUBCHAPTER A. GENERAL PROVISIONS
20	Revised Law
21	Sec. 543.0001. EFFECT OF CHAPTER ON COMMISSION'S AUTHORITY.
22	This chapter does not affect the commission's authority, or give
23	the commission additional authority, to:
24	(1) affect any individual health care treatment
25	decision for a Medicaid recipient;
26	(2) replace or affect:
27	(A) the process of determining Medicaid

- 1 benefits, including the approval process for receiving benefits for
- 2 durable medical equipment; or
- 3 (B) any applicable approval process required for
- 4 reimbursement for services or other equipment under Medicaid;
- 5 (3) implement a clinical initiative or associated rule
- 6 or program policy that is otherwise prohibited under state or
- 7 federal law; or
- 8 (4) implement any initiative that would expand
- 9 eligibility for Medicaid benefits. (Gov. Code, Sec. 538.002.)

#### 10 Source Law

Sec. 538.002. EFFECT OF CHAPTER; AUTHORITY OF COMMISSION. This chapter does not affect or give the commission additional authority to:

(1) affect any individual health care

treatment decision for a Medicaid recipient;

- (2) replace or affect the process of determining Medicaid benefits, including the approval process for receiving benefits for durable medical equipment, or any applicable approval process required for reimbursement for services or other equipment under Medicaid;
- (3) implement a clinical initiative or associated rule or program policy that is otherwise prohibited under state or federal law; or
- (4) implement any initiative that would expand eligibility for benefits under Medicaid.

# 27 <u>Revised Law</u>

- Sec. 543.0002. RULES. The executive commissioner shall
- 29 adopt rules necessary to implement this chapter. (Gov. Code, Sec.
- 30 538.003.)

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### 31 Source Law

- Sec. 538.003. RULES. The executive commissioner shall adopt rules necessary to implement this chapter.
- 35 Revised Law
- 36 Sec. 543.0003. INTERNET WEBSITE. The commission shall
- 37 maintain an Internet website related to the quality improvement
- 38 process required under this chapter. The website must include:
- 39 (1) an explanation of the process for submission,
- 40 preliminary review, analysis, and approval of a clinical initiative
- 41 under this chapter;
- 42 (2) an explanation of how members of the public may

- 1 submit comments or research related to an initiative;
- 2 (3) a copy of each initiative selected for analysis
- 3 under Section 543.0054;
- 4 (4) the status of each initiative in the approval
- 5 process; and

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- 6 (5) a copy of each final report prepared under this
- 7 chapter. (Gov. Code, Sec. 538.056.)

## 8 Source Law

- Sec. 538.056. INTERNET WEBSITE. The commission shall maintain an Internet website related to the quality improvement process required under this chapter. The website must include:
  - (1) an explanation of the process for submission, preliminary review, analysis, and approval of clinical initiatives under this chapter;
  - (2) an explanation of how members of the public may submit comments or research related to an initiative;
  - (3) a copy of each initiative selected for analysis under Section 538.054;
    - (4) the status of each initiative in the approval process; and
- 23 (5) a copy of each final report prepared 24 under this chapter.
- 25 SUBCHAPTER B. ASSESSMENT OF CLINICAL INITIATIVES

## 26 Revised Law

- Sec. 543.0051. MEDICAID QUALITY IMPROVEMENT PROCESS. The
- 28 commission shall, in accordance with this chapter, develop and
- 29 implement a quality improvement process by which the commission:
- 30 (1) receives suggestions for clinical initiatives
- 31 designed to improve:
- 32 (A) the quality of care provided under Medicaid;
- 33 and
- 34 (B) the cost-effectiveness of Medicaid;
- 35 (2) conducts a preliminary review under Section
- 36 543.0053(2) of each suggestion received under Section 543.0052 to
- 37 determine whether the suggestion warrants further consideration
- 38 and analysis; and
- 39 (3) conducts an analysis under Section 543.0054 of
- 40 each suggestion that is selected for analysis in accordance with
- 41 Subdivision (2). (Gov. Code, Sec. 538.051.)

1	Source Law
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Sec. 538.051. MEDICAID QUALITY IMPROVEMENT PROCESS. The commission shall, according to the provisions of this chapter, develop and implement a quality improvement process by which the commission:  (1) receives suggestions for clinical initiatives designed to improve:  (A) the quality of care provided under Medicaid;  (B) the cost-effectiveness of Medicaid;  (2) conducts a preliminary review under Section 538.053(4) of each suggestion received under Section 538.052 to determine whether the suggestion warrants further consideration and analysis; and  (3) conducts an analysis under Section 538.054 of clinical initiative suggestions that are selected for analysis under Subdivision (2).
19	Revised Law
20	Sec. 543.0052. SOLICITATION OF SUGGESTIONS FOR CLINICAL
21	INITIATIVES. (a) Subject to Subsection (b), the commission shall
22	solicit and accept written or electronic suggestions for clinical
23	initiatives from:
24	(1) a member of the legislature;
25	(2) the executive commissioner;
26	(3) the commissioner of state health services;
27	(4) the commissioner of the Department of Family and
28	Protective Services; and
29 30	(5) the medical care advisory committee appointed under Section 32.022, Human Resources Code.
31	(b) The commission may not accept a suggestion for a
32	clinical initiative that:
33	(1) is undergoing clinical trials; or
34	(2) expands a health care provider's scope of practice
35	beyond the law governing the provider's practice. (Gov. Code, Sec.
36	538.052.)
37	Source Law
38 39 40 41 42 43 44 45	Sec. 538.052. SOLICITATION OF SUGGESTIONS FOR CLINICAL INITIATIVES. (a) Subject to Subsection (b), the commission shall solicit and accept suggestions for clinical initiatives, in either written or electronic form, from:  (1) a member of the state legislature; (2) the executive commissioner; (3) the commissioner of aging and disability services;

- (4) the commissioner of state health services;
- (5) the commissioner of the Department of Family and Protective Services;
- (6) the commissioner of assistive and rehabilitative services;
- (7) the medical care advisory committee established under Section 32.022, Human Resources Code; and
- (8) the physician payment advisory committee created under Section 32.022(d), Human Resources Code.
- (b) The commission may not accept suggestions under this section for an initiative that:
  - (1) is undergoing clinical trials; or
- (2) expands a health care provider's scope of practice beyond the law governing the provider's practice.

#### Revisor's Note

(1) Section 538.052(a), Government Code, refers to soliciting and accepting suggestions for clinical initiatives from "the commissioner of aging and disability services" "the commissioner and ofrehabilitative services." assistive and The commissioner of aging and disability services was the chief administrative officer of the Department of Aging and Disability Services, and the commissioner of assistive and rehabilitative services was the chief administrative officer of the Department of Assistive and Rehabilitative Services. The Department of Aging and Disability Services was abolished September 1, 2017, accordance with Section 531.0202(b), in Government Code, which is executed law that expires September 1, 2023. The Department of Assistive and Rehabilitative Services was abolished September 1, 2016, in accordance with Section 531.0202(a), Government Code, which is also executed law that expires September 1, 2023. Because those agencies have been abolished, there are no individuals serving as the chief administrative officers of the agencies who would make suggestions for clinical initiatives. The revised law therefore omits the quoted references as obsolete.

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Section 538.052(a)(8), Government Code, (2) refers to "the physician payment advisory committee created under Section 32.022(d), Human Resources Code." The referenced advisory committee, which functioned as a subcommittee of the medical care advisory committee established under Section 32.022, Resources Code, was to bе automatically abolished August 31, 2017. See 39 Tex. Req. 340 (2014).

In 2015, Section 2.02, Chapter 946 (S.B. 277), Acts of the 84th Legislature, Regular Session, 2015, amended Section 531.012(a), Government Code, to require the executive commissioner of the Health and Human Services Commission to establish and maintain advisory committees to consider and solicit public input on certain health and human services-related Section 2.39 of that Act required the executive commissioner to, not later than November 1, 2015, publish in the Texas Register a list of new advisory committees to be established under Section 531.012(a), Government Code, as amended by the Act, and a list that identified advisory committees whose functions would be assumed by newly established advisory committees. In October 2015, under authority of that section, the executive commissioner identified physician payment advisory committee committee to be discontinued. See 40 Tex. Reg. 7726 (2015). The committee was subsequently discontinued prior to its automatic abolition date of August 31, Accordingly, the revised law omits the quoted reference to the advisory committee as obsolete.

#### Revised Law 32

Sec. 543.0053. CLINICAL INITIATIVE EVALUATION PROCESS. The commission shall establish and implement an evaluation process for 34

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- 1 the submission, preliminary review, analysis, and approval of a
- 2 clinical initiative. The process must:
- 3 (1) require that a suggestion for a clinical
- 4 initiative be submitted to the state Medicaid director;
- 5 (2) allow the commission to conduct, with the
- 6 assistance of an appropriate advisory committee or similar group as
- 7 determined by the commission, a preliminary review of each
- 8 suggested clinical initiative to determine whether the initiative
- 9 warrants further consideration and analysis under Section
- 10 543.0054;
- 11 (3) require the commission to publish on the Internet
- 12 website maintained in accordance with Section 543.0003 the criteria
- 13 the commission uses in the preliminary review under Subdivision (2)
- 14 to determine whether an initiative warrants analysis under Section
- 15 543.0054;
- 16 (4) limit the number of suggestions analyzed under
- 17 Section 543.0054;
- 18 (5) require that a suggestion for a clinical
- 19 initiative selected for analysis under Section 543.0054 be
- 20 published on the Internet website maintained in accordance with
- 21 Section 543.0003 not later than the 30th day after the date the
- 22 state Medicaid director receives the suggestion;
- 23 (6) provide for a formal public comment period that
- 24 lasts at least 30 days during which the public may submit comments
- 25 and research relating to a suggested clinical initiative;
- 26 (7) require commission employees to analyze, in
- 27 accordance with Section 543.0054, each suggested clinical
- 28 initiative selected for analysis; and
- 29 (8) require the development and publication of a final
- 30 report in accordance with Section 543.0055 on each clinical
- 31 initiative selected for analysis under Section 543.0054 not later
- 32 than the 180th day after the date the state Medicaid director
- 33 receives the suggestion. (Gov. Code, Sec. 538.053.)

1 <u>Source Law</u>

 Sec. 538.053. CLINICAL INITIATIVE EVALUATION PROCESS. The commission shall establish and implement an evaluation process for the submission, preliminary review, analysis, and approval of a clinical initiative. The process must:

- (1) require that a suggestion for a clinical initiative be submitted to the state Medicaid director;
- (2) require that a suggestion for a clinical initiative selected for analysis under Section 538.054 be published on the Internet website created under Section 538.056 not later than the 30th day after the date on which the state Medicaid director receives the suggestion;
- (3) provide for a formal public comment period that lasts at least 30 days during which the public may submit comments and research relating to a suggested clinical initiative;
- (4) allow the commission to conduct with the assistance of appropriate advisory committees or similar groups as determined by the commission a preliminary review of each suggested clinical initiative to determine whether the initiative warrants further consideration and analysis under Section 538.054;
- (5) limit the number of suggestions that receive analysis under Section 538.054;
- (6) require the commission to publish on the Internet website created under Section 538.056 the criteria the commission uses in the preliminary review under Subdivision (4) to determine whether an initiative warrants analysis under Section 538.054;
- (7) require commission employees to perform an analysis of each suggested clinical initiative selected for analysis in accordance with Section 538.054; and
- (8) require the development and publication of a final report in accordance with Section 538.055 on each clinical initiative selected for analysis under Section 538.054 not later than the 180th day after the date on which the state Medicaid director receives the suggestion.

44 Revised Law

- 45 Sec. 543.0054. ANALYSIS OF CLINICAL INITIATIVES. After
- 46 conducting a preliminary review of a clinical initiative under
- 47 Section 543.0053(2), the commission shall analyze the clinical
- 48 initiative if the commission selects the initiative for analysis.
- 49 The analysis must include a review of:
- 50 (1) any public comments and submitted research
- 51 relating to the initiative;
- 52 (2) the available clinical research and historical
- 53 utilization information relating to the initiative;
- 54 (3) published medical literature relating to the

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    initiative;
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                     any adoption of the initiative by a medical
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    society or other clinical group;
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                (5)
                     whether the initiative has been implemented under:
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                      (A)
                           the Medicare program;
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                      (B)
                           another state medical assistance program; or
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                                                                program,
                      (C)
                              state-operated
                                                health
                                                         care
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    including the child health plan program;
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                     the results of reports, research, pilot programs,
                (6)
    or clinical studies relating to the initiative conducted by:
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                           institutions of higher education, including
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                      (A)
    related medical schools;
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                      (B)
                           governmental entities and agencies; and
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                      (C)
                           private
                                   and nonprofit think
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    research groups;
                     the impact the initiative would have on Medicaid
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    if the initiative were implemented in this state, including:
                           an estimate of the number of
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                      (A)
                                                               Medicaid
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    recipients that would be impacted by implementing the initiative;
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    and
                           a description of any potential cost savings
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    to the state that would result from implementing the initiative;
    and
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                (8)
                           statutory barriers
                     any
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                                                      implementing
                                                                      the
    initiative. (Gov. Code, Sec. 538.054.)
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                                 Source Law
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                Sec. 538.054.
                                ANALYSIS OF CLINICAL INITIATIVES.
               commission shall conduct an analysis of each
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          The
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          clinical initiative selected by the commission after
          having conducted the commission's preliminary review
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          under Section 538.053(4). The analysis required under this section must include a review of:
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                               public
                      (1)
                           any
                                         comments
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          research relating to the initiative;
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                      (2)
                           the available clinical research and
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          historical utilization information relating to
          historia
initiative;
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                           published medical literature relating
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          to the initiative;
                           any adoption of the initiative by
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                      (4)
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medical societies or other clinical groups;

1	(5) whether the initiative has been
1 2 3 4	<pre>implemented under:</pre>
4	(B) another state medical assistance
5 6	program; or (C) a state-operated health care
7	<pre>(C) a state-operated health care program, including the child health plan program;</pre>
8	(6) the results of reports, research,
9 10	<pre>pilot programs, or clinical studies relating to the initiative conducted by:</pre>
11	(A) institutions of higher
12	education, including related medical schools;
13 14	(B) governmental entities and agencies; and
15	(C) private and nonprofit think tanks
16	and research groups;
17 18	(7) the impact that the initiative would have on Medicaid if the initiative were implemented in
19	this state, including:
20 21	(A) an estimate of the number of recipients under Medicaid that would be impacted by
22	implementation of the initiative; and
23	(B) a description of any potential
24 25	cost savings to the state that would result from implementation of the initiative; and
26	(8) any statutory barriers to
27	implementation of the initiative.
28	Revised Law
29	Sec. 543.0055. FINAL REPORT ON CLINICAL INITIATIVE. The
30	commission shall prepare a final report based on the analysis of a
31	clinical initiative conducted under Section 543.0054. The final
32	report must include:
33	(1) a final determination of:
34	(A) the feasibility of implementing the
35	initiative;
36	(B) the likely impact implementing the
37	initiative would have on the quality of care provided under
38	Medicaid; and
39	(C) the anticipated cost savings to the state
40	that would result from implementing the initiative;
41	(2) a summary of the public comments, including a
42	description of any opposition to the initiative;
43	(3) an identification of any statutory barriers to
44	implementing the initiative; and
45	(4) if the initiative is not implemented, an

46 explanation of that decision. (Gov. Code, Sec. 538.055.)

Τ	Source Law
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Sec. 538.055. FINAL REPORT ON CLINICAL INITIATIVE. The commission shall prepare a final report based on the commission's analysis of a clinical initiative under Section 538.054. The final report must include:  (1) a final determination of: (A) the feasibility of implementing the initiative; (B) the likely impact implementing the initiative would have on the quality of care provided under Medicaid; and (C) the anticipated cost savings to the state that would result from implementing the initiative; (2) a summary of the public comments, including a description of any opposition to the initiative; (3) an identification of any statutory barriers to implementation of the initiative; and (4) if the initiative is not implement the initiative.
24	Revised Law
25	Sec. 543.0056. COMMISSION ACTION ON CLINICAL INITIATIVE.
26	After the commission analyzes a clinical initiative under Section
27	543.0054:
28	(1) if the commission determined that the initiative
29	is cost-effective and will improve the quality of care under
30	Medicaid, the commission may:
31	(A) implement the initiative if implementing the
32	initiative is not otherwise prohibited by law; or
33	(B) if implementation requires a change in law,
34	submit a copy of the final report together with recommendations
35	relating to the initiative's implementation to the standing
36	committees of the senate and house of representatives with
37	jurisdiction over Medicaid; and
38	(2) if the commission determined that the initiative
39	is not cost-effective or will not improve quality of care under
40	Medicaid, the commission may not implement the initiative. (Gov.
41	Code, Sec. 538.057.)
42	Source Law
43 44 45 46	Sec. 538.057. ACTION ON CLINICAL INITIATIVE BY COMMISSION. After the commission conducts an analysis of a clinical initiative under Section 538.054:  (1) if the commission has determined that

1	the initiative is cost-effective and will improve the
2	quality of care under Medicaid, the commission may:  (A) implement the initiative if
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4	implementation of the initiative is not otherwise
5	prohibited by law; or
6	(B) if implementation requires a
7	change in law, submit a copy of the final report
8	together with recommendations relating to the
9	initiative's implementation to the standing committees
10	of the senate and house of representatives having
11	jurisdiction over Medicaid; and
12	(2) if the commission has determined that
13	the initiative is not cost-effective or will not
14	improve quality of care under Medicaid, the commission
15	may not implement the initiative.