

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 11, 2015

TO: Honorable Myra Crownover, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB1623 by Laubenberg (Relating to the reimbursement of providers for the provision of certain home telemonitoring services under the Medicaid program.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would require the Medicaid program to provide home telemonitoring services to pediatric patients who are concurrently treated by at least three medical specialists, medically dependent on technology, diagnosed with end-stage solid organ disease, and require mechanical ventilation. The Health and Human Services Commission (HHSC) would be required to promulgate and adopt rules, not later than December 1, 2015 to implement the provisions of this bill.

Home telemonitoring is currently a Texas Medicaid benefit for certain clients with diabetes and/or hypertension. A telemonitoring services medical policy is currently in place, along with all the claims administrator tools, processes, technology, and staff needed to maintain the home telemonitoring benefit.

HHSC assumes that when the existing home telemonitoring clients lose telemonitoring eligibility on September 1, 2015, and the newly eligible pediatric clients gain eligibility, the existing claims administrator tools, processes, technology, and staff needed to maintain the home telemonitoring benefit would be leveraged. HHSC assumes that the volume of new pediatric clients is estimated to be smaller than the existing volume of home telemonitoring clients and therefore no significant fiscal impact is anticipated.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission

LBB Staff: UP, NB, JJ, JQ, LR