

Timeline Changes Reflected in CSSB 7

Initiatives & Notes	2013	2014 - 2015 (2015-84th)	2016 - 2017 (2017-85th)	2018 - 2019 (2019-86th)	2020 - 2021 (2021-87th)	2022 - 2024 (2023-88th)
<p>CSSB 7: See other dates embedded in bill.</p> <p>Due date for rule adoption related to the IDD provisions not noted. Typically such must be done by effective date of a bill unless otherwise specified.</p>	9-1-13					
<p>NO CHANGE; Transfer of Acute Care</p> <p>Transfers provision of all IDD acute care services to an MCO (includes ICF; feasibility of such is being investigated) See also Subchapter D, page 2.</p>	9-1-13 (or 9-1-14 to coincide with CFC)	See column to the left related to Sec. 1.06.				
<p>NEW: IDD Advisory Committee</p> <p>Sec. 534.053 & Sec. 1.02: Committee appointed by DADS & HHSC</p> <p>Section 534.104 requires DADS in consultation with Committee to evaluate each pilot proposal.</p> <p>Section 534.105 requires DADS, in consultation with Committee, to propose specific strategies for achieving pilot goals.</p>	By October 1, 2013		534.108 requires that on or before Dec. 1, 2016 and Dec. 1, 2017 HHSC & DADS, in consultation with the Committee, must review and evaluate progress and outcomes of pilots			Jan. 1, 2024 - Committee abolished.
<p>Subchapter B. Acute Care & LTSS Services: Annual Report</p> <p>Due date for any rule adoption related to the IDD provisions not noted. Typically such must be done by effective date of the legislation unless otherwise specified.</p>		<p>Sec. 534.054 & Sec. 1.03: Annual report due Dec. 1 of each year thru Dec. 1, 2023. First report due Dec. 1, 2014.</p> <p>[previously reports required thru 12/1/19]</p>	Sec. 1.04: Not later than June 1, 2016 HHSC must submit report on CFC experience.	Sec. 1.06: Requires as part of the annual report, a report on review and evaluation of the transition of the benefits to persons in TxHmL and other waivers and ICF/IID to a managed care model. Reports due on or before Dec. 1 of 2018, 2019 & 2020.	See column to the left related to Sec. 1.06.	<p>Sec.534..054: Requirement is abolished 1/1/24.</p> <p>[previously expired on 1/1/19]</p>

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<p>Subchapter C: Stage One - IDD Pilots Sec. 534.101 - 534.111</p> <p>CSSB 7 revised this section extensively, requiring testing in one or more regions and by one or more providers, evaluation of consumer satisfaction.</p> <p>Specifies that purpose of pilot is to assist in making recommendations about a system of programs and services for implementation through future legislation or rules.</p> <p>See also IDD Advisory Committee on page 1 for details related to its involvement in pilot process.</p>			<p>Sec. 534.106 & 1.05: Must start as soon as practicable, but not later than 9/1/16 ; must operate for not less than 24 mos.</p> <p>[Previously to start as soon as practicable after 9/1/13 but not later than 9/1/14]</p>	<p>Sec. 534.111: Any pilot still operational must end & this subchapter expires.</p> <p>[previously were to conclude 9/1/16]</p>		
<p>Subchapter D. Stage One - delivery of acute care services to IDD pop. thru STAR, STAR+ or other model to include CFC Option</p> <p>No specific start date noted, but assume Sept. 1, 2013 minimally for provision of acute care to all IDD pop. under STAR +PLUS</p>	<p>Transfer of acute care to MCO</p> <p>9-1-13 (or 9-1-14 to coincide with CFC)</p>	<p>Assume CFC begins 9-1-14 as this is when funding for CFC is to start.</p>				
<p>Subchapter E. Stage Two - Transition of TxHmL to integrated MC to either STAR + or other capitated model</p> <p>CSSB 7 clarifies that HHSC will determine whether to continue TxHmL, or provide all or a portion of the services currently under the waiver thru the managed care model selected by HHSC.</p> <p>Requires HHSC to solicit statewide input from stakeholders in addition to input from the Advisory Committee.</p>			<p>Not later than 9-1-17</p> <p>[previously not later than 9-1-16]</p>			

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<p>Stage Two - ICF and other waivers Transition ICF & other waivers except TxHmL to integrated MC (STAR + or other capitated model)</p> <p>CSSB 7 clarifies that HHSC will determine whether to continue all other waivers affected by this bill and ICF/IID, or provide all or a portion of the services currently under these programs thru the managed care model selected by HHSC.</p> <p>Adds that HHSC is to solicit statewide stakeholder input that is in addition to input from Committee.</p>					<p>Not later than Sept. 1, 2020</p> <p>[previously not later than 9-1-18]</p>	
<p>Article 3. Other IDD Provisions: Requires development of functional assessment & resource allocation process for waiver services only.</p> <p>Removed requirement that DADS had option to implement CFA tool only for pilots.</p> <p>Clarifies that prior authorization process is only for persons for whom a more independent setting is not appropriate or available.</p> <p>Adds provision that DADS work in concert with the Committee in establishing prior authorization process.</p>	<p>Assume after committee is appointed (i.e., after 10-1-13)</p>					<p>CSSB expires expiration Jan 1, 2024</p> <p>[previously expired 9-1-18]</p>
<p>Flexible Housing & Behavioral Supports</p> <p>Establishes one or more behavioral health intervention teams & specialized training for families, providers, etc. subject to availability of federal funds (BIP) & explores flexible housing options</p> <p>Adds provision to study housing and other needs for persons with Prader Willi</p> <p>Removed provision related to congregate setting, but states that persons should be able to select the most integrated and least restrictive setting appropriate to their preferences and needs.</p> <p>Adds provision for statewide stakeholder input to ensure the most comprehensive review of opportunities and options for housing.</p>	<p>Assume 9-1-13 start date</p>	<p>Not later than 12/1/2014 HHSC must submit report on housing for persons with Prader Willi to the Speaker, Lt. Gov., Senate HHS & House HS. Requirement for study and report expires 9-1-15.</p>				