

**House Appropriations Committee
Riders - Article II**

Adopted

March 16, 2023

Legislative Budget Board

By: Representative Howard

Overview

Direct the Department of Family and Protective Services to allocate \$100,000 Family First Transition Act (FFTA) federal funds to form a workgroup to explore effective ways for Texas to leverage federal Family First Prevention Services Act funds to decrease DFPS investigations while still supporting struggling families.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$50,000 in FFTA federal funds in each fiscal year of the 2024-25 biennium;
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

Community Pathways.

- (a) Out of funds appropriated above in Strategy B.1.2, CPS Program Support, the Department of Family and Protective Services shall form a diverse stakeholder workgroup, including but not limited to youth and parents who have lived experience with DFPS, the Texas Supreme Court Children’s Commission, child protection advocacy organizations, and/or other child welfare stakeholders to explore effective ways for Texas to leverage federal Family First Prevention Services Act funds to decrease DFPS investigations while still supporting struggling families. The workgroup shall consider the Community Pathways approach which allows community-based providers to offer services to struggling families and seek reimbursement from DFPS without needing to report suspected abuse or neglect; and
- (b) The workgroup shall report their findings by November 1, 2024, to the Legislative Budget Board, the Governor, the House Committee on Appropriations, the Senate Committee on Finance, the House Committee on Human Services, the Senate Committee on Health and Human Services, and any standing Joint Legislative Oversight Committees, as appropriate.

Department of Family and Protective Services
Proposed Funding and Rider
Curriculum for Parental Engagement and Family Preservation

Prepared by LBB Staff, 03/15/2023

Overview

The proposed rider would direct the Department of Family and Protective Services to contract with a nonprofit organization who has prior experience working with the Prevention and Early Intervention division to implement a statewide fatherhood and parental engagement curriculum and training to support family preservation.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$325,000 in General Revenue in each fiscal year of the 2024-25 biennium.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____ . **Curriculum for Parental Engagement and Family Preservation.** Out of funds appropriated above in Strategy C.1.4, Other At-Risk Prevention Program, the Department of Family and Protective Services shall allocate \$325,000 in General Revenue in each fiscal year of the 2024-25 biennium for a contract with a nonprofit organization with expertise in providing curriculum-based fatherhood and parental engagement services to support family preservation, at-risk families, and reunification services. Funding shall be used for personnel, training, advertising, recruitment, and other necessary costs associated with statewide expansion.

Department of Family and Protective Services
Proposed Funding and Rider
Family Prevention Services Asset Map

Prepared by LBB Staff, 03/01/2023

Overview

Direct the Department of Family and Protective Services to allocate \$600,000 in Family First Transition Act (FFTA) federal funds to contract with an institution of higher education and other agencies to develop a family preservation services asset map.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$300,000 in FFTA federal funds in each fiscal year of the 2024-25 biennium;
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Family Prevention Services Asset Map.**

- (a) Out of funds appropriated above in Strategy B.1.2, CPS Program Support, the Department of Family and Protective Services shall consult with the Health and Human Services Commission and the Texas Department of Juvenile Justice, and contract with an institution of higher education to develop a family preservation services asset map. The map shall, at a minimum, provide a complete, cross-system picture of family preservation services available to Texas children and families that are eligible for Title IV-E federal matching funds under the Family First Prevention Services Act, including any barriers to these services, and be publicly available and disaggregated by Community-Based Care catchment areas; and
- (b) DFPS shall share the asset map by August 31, 2025, with the Legislative Budget Board, the Governor, the House Committee on Appropriations, the Senate Committee on Finance, the House Committee on Human Services, the Senate Committee on Health and Human Services, and any standing Joint Legislative Oversight Committees, as appropriate.

Department of Family and Protective Services
Proposed Funding and Rider
Business Process Redesign Rider

Prepared by LBB Staff, 03/15/2023

Overview

Business Process Redesign is a broad concept describing the effort of capturing an organization's hidden capacity, reducing activities that do not add value, and decreasing cycle times required to process work. This rider would direct DFPS to contract with a third-party entity to redesign its child protective investigations process with the goal of increasing the agency's staffing capacity, ensuring consistency in investigations, collecting and reporting all necessary documentation, and improving the overall quality of investigations.

Required Action

1. On page II-1 of the Department of Family and Protective Services Bill Pattern, increase appropriations by \$1,500,000 in General Revenue in fiscal year 2024
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Business Process Redesign.** Out of funds appropriated above in Strategy B.1.1, CPS Direct Delivery Staff, the Department of Family and Protective Services (DFPS) shall contract with a third-party entity to evaluate and recommend how the agency can improve its child protective investigations process. The review of its investigations process should include, but not limited to, how DFPS can maximize its staffing capacity, ensure consistency in its investigations across the state and over time, collect and report all necessary documentation, and improve the quality of its investigation processes. DFPS shall submit a report to the Legislative Budget Board and the Governor of its finding, recommendations, and status of implementing recommendations by December 31, 2024.

Department of Family and Protective Services
Proposed Funding and Rider
Connecting Technology Services

Prepared by LBB Staff, 03/02/2023

Overview

Direct the Department of Family and Protective Services continue and expand their contract with an organization that provides connecting technology.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$1,413,750 in General Revenue in fiscal year 2024 and \$2,359,500 in General Revenue in fiscal year 2025.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Connecting Technology Services.** Out of funds appropriated above in Strategy C.1.3, Child Abuse Prevention Grants, the Department of Family and Protective Services shall continue, and expand their contract with an organization that provides connecting technology for children and families in Texas. The technology services shall include providing community partners the opportunity to address the needs of children and families in their community.

Department of Family and Protective Services
Proposed Funding and Rider
Long-Term Youth and Family Support

Prepared by LBB Staff, 03/04/2023

Overview

Direct the Department of Family and Protective Services to allocate funding to expand a prevention program to improve outcomes for children at risk of reentering the child protective services system.

Required Action

1. On page II-1 of the Department of Family and Protective Services bill pattern, increase appropriations by \$1,500,000 in General Revenue in fiscal year 2024 and \$3,000,000 in General Revenue in fiscal year 2025.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Long-Term Youth and Family Support.** Out of funds appropriated above in Strategy B.1.8, Other CPS Purchased Services, the Department of Family and Protective Services shall allocate \$1,500,000 in General Revenue in fiscal year 2024 and \$3,000,000 in General Revenue in fiscal year 2025 to continue the program aimed at improving outcomes for children at highest risk of re-entering the child protective services system, and expand the program into at least two additional areas of the state and provide each program funding for, model support, including, but not limited to, training and technical assistance. The program shall:

(a) be evidence-based or incorporate promising practices;

(b) be implemented in a county with a population over 800,000; and

(c) aim to reduce the child's interaction with the juvenile justice system, reduce teen pregnancy and increase graduation rates over the span of the child's youth.

By: Representative Wu

Department of Family and Protective Services
Proposed Rider
Department of Family and Protective Services Liaison

Prepared by LBB Staff, 03/08/2023

Overview

Allow the agency to appoint an employee to serve as a liaison in each region with the Texas Juvenile Justice Department.

Required Action

On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

- _____ . **Department of Family and Protective Services Liaison.** The Department of Family and Protective Services (DFPS) has the authority to designate a DFPS employee to serve as a liaison in each region to be the point of contact between DFPS and the Texas Juvenile Justice Department.

Department of Family and Protective Services
Amend Rider
Human Resources Management Plan

Prepared by LBB Staff, 02/27/2023

Overview

Amend Department of Family and Protective Services rider 8, Human Resources Management Plan.

Required Action

On page II-9 of the Department of Family and Protective Services bill pattern, amend the following rider:

- _____. **Human Resources Management Plan.** Out of funds appropriated above, the Department of Family and Protective Services (DFPS) shall develop a Human Resources Management Plan designed to produce a high-quality workforce and improve employee morale and retention. The plan must focus on reducing employee turnover through better management and hiring, retaining, and promoting a high-quality workforce into positions of leadership. DFPS shall report by March 31 and September 30 of each fiscal year to the Senate Finance Committee, the House Committee on Appropriations, the Legislative Budget Board, and the Governor. Each report shall include, at a minimum and for at least the preceding twelve months, the following information by job category: employee turnover rate, percent workers retained six months after completion of training, ~~and~~ employee tenure, and promotion rates. The effectiveness of the agency's plan shall be measured by whether there is a reduction in employee turnover rates at the agency, specifically by the reduction in the turnover rates for caseworkers.

Department of State Health Services
Proposed Funding and Rider
Health Programs for Persons with Intellectual Disabilities

Prepared by LBB Staff, 03/03/2023

Overview

Increase funding and a rider at the Department of State Health Services (DSHS) to provide grants to organizations that provide statewide screenings and education for people with intellectual disabilities.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy B.1.2, Children with Special Needs: Children with Special Health Care Needs, by \$1,000,000 in General Revenue in each year of the 2024-25 biennium.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Health Programs for Persons with Intellectual Disabilities.** Included in the amounts appropriated above in B.1.2, Children with Special Needs: Children with Special Health Care Needs, is \$1,000,000 in General Revenue in each year of the 2024-25 biennium to provide grants to organizations that provide statewide screenings and education in screenings and education that includes health history, physical exams, vision/eye health, audiology, dentistry, nutrition, physical therapy, and podiatry for people with intellectual disabilities.

Overview

Increase funding and amend the Alzheimer’s Disease Program rider at the Department of State Health Services (DSHS).

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy A.3.1, Chronic Disease Prevention, by \$4,500,000 in General Revenue in each fiscal year of the 2024-25 biennium.
2. On page II-XX of the Department of State Health Services bill pattern, increase the Number of Full-Time Equivalents (FTE) by 1.0 in each fiscal year of the 2024-25 biennium.
3. On page II-XX of the Department of State Health Services bill pattern, amend the following rider:

_____. **Alzheimer’s Disease Program.** Out of the amounts appropriated above in Strategy A.3.1, Chronic Disease Prevention, the Department of State Health Services (DSHS) shall expend ~~\$500,000~~ 5,000,000 in General Revenue in each fiscal year on the Alzheimer’s Disease Program. The Alzheimer’s Disease Program shall:

- (a) Include a public awareness component for healthcare professionals to highlight the importance of early detection and diagnosis of Alzheimer’s disease and related dementias;
- (b) Assistant in fulfilling the responsibility of DSHS to develop and implement a State Plan on Alzheimer’s Disease, as required by Health and Safety Code Section 99A.001;
- (c) Coordinate with other state agencies, institutions of higher education, and other stakeholders on implementation of the State Plan on Alzheimer’s Disease;
- (d) Operate a competitive grants program to provide support to qualified local and regional entities providing direct caregiver support and promoting the early detection and diagnosis of Alzheimer’s disease and related dementias. The agency may contract with another state agency or institution of higher education to operate the grant program;
- (e) Study and recommend the inclusion of appropriate dementia-related questions in the Behavioral Risk Factor Surveillance System; and
- (f) Implement other initiatives related to caregiver support and the promotion of early detection and diagnosis of Alzheimer’s disease and related dementias.

The Alzheimer’s Disease Program is provided an additional 1.0 FTE to manage various program initiatives and coordinate efforts with other state agencies related to Alzheimer’s disease and other dementias.

Background

- From FY 2020 to FY 2021, there was a 25% increase in applications for Vital Statistics services, and a 22% increase in the number of vital records issued.
- Due to increased demand and rising supplier costs, operational costs have also increased for staffing, technology, security paper, and shipping.
- Vital Statistics customer service representatives make about \$15 per hour, in comparison to local county and city employees who make a minimum wage of about \$20 per hour.
 - o Resulting turnover has led to a slow down of responses to customer orders.
 - o For example, Customer Service Representative IVs (over 100 Vital Statistics staff) have a 35.3% turnover rate as of FY 2022.

DSHS Revenue from Texas.gov Online Fees

- Online orders comprise over 90% of customer orders and occur through Texas.gov, with customers paying a Texas online fee.
- DIR receives a portion of the Texas Online fee to support the development and operation of Texas.gov, and DSHS receives a portion to support the program that generates the revenue.
- Adjustments to the DSHS-DIR fee split over the years have funded projects like digitization of vital statistics records and the TxEVER vital records information system, and also allowed for technology improvements for the program operation.

Request to Increase Fee Amounts Directed to Fund for Vital Statistics Staffing and Operational Costs

- Since 2006, Texas.gov has collected an online fee of \$10 from every online vital record transaction. In FY 2022, this amounted to \$5.9 Million in collections.
- DIR and DSHS have collaborated to review this fee and confirm DIR does not use the full \$5.9 Million each year to maintain its functions associated with vital records.

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DSHS requests to retain \$4 Million of the Texas.gov fees currently collected from Vital Statistics orders annually. This would not be a fee increase to the customer.

- o The funds would be deposited to GR-D Account 19.
- o This would amount to the Texas.gov fee being reduced to \$3 to continue funding DIR operations, and the remainder of \$7 per transaction being retained by DSHS as part of its overall vital records fee.

The additional funds to DSHS would be used to support the following items:

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DSHS Need for Rider Language to Appropriate Fee Revenue to Vital Statistics Operations

- o Increased operational costs to digitize the mailroom and allow online verification of birth and death records.
- o Salary increases above the 5% included in SB 1/HB 1 as introduced so that DSHS can bring Vital Statistics employees to the more competitive SAO market rate.
- o Increased ERS charges for employee pension and health care insurance, including increases related to SB 321 from the 87th Legislative Session that fully funded the state employee pension fund.

Details on Requested Actions

- Increase appropriations to DSHS in GRD-19 Vital Statistics by \$3.2 Million in FY 2024 and \$3.5 Million in FY 2025. Fringe does not come out of the appropriation and so a reference to the full \$4 Million amount is not necessary.
- Add a new rider to DIR and DSHS bill patterns to outline the intent of the funding, as outlined below.
- If the Legislature takes these actions, then in August, DIR would seek approval from its board to change the Texas.gov online fee.

New Rider. Department of State Health Services and Department of Information Resources: Vital Statistics Revenue.

It is the intent of the legislature that the Department of Information Resources (DIR) and the Department of State Health Services (DSHS) enter into an agreement to share the Customer fee for vital record services with DIR retaining a Texas Online fee of \$3 per order and DSHS retaining the remainder of the Customer fee to be deposited to General Revenue - Dedicated Fund 19. Vital Statistics Account.

By: Orr

Texas Department of State Health Services
Emergency Preparedness/Patient Communication & Logistics Platform

Overview

The following action adds a new rider and provides \$4.8 million for the purchase of a HIPAA secure multimodal communication and logistics software platform for the efficient transfer of healthcare patients for timely treatment. The platform will help to provide multiagency, multijurisdictional all hazards response for EMS, emergency rooms, mental health, public safety, and other critical care services statewide. The platform should be app based, mobile smart device first, including multimedia (images, screen capture, video), on demand audio and video telepresence, and accessible using any desktop/laptop via modern browsers.

Required Action

- 1) On page II-XXX of Department of State Health Service’s bill pattern, increase appropriations by \$2,400,000 in General Revenue in each fiscal year of the 2024-2025 biennium:
- 2) On page II-XXX of Department of State Health Service’s bill pattern, add the following new rider:

____. **Emergency Preparedness/Patient Communication & Logistics Platform**
Included in amounts appropriated above in Strategy A.1.1 Public Health Preparedness and Coordination Services, the Department of State Health Services is appropriated \$2,400,000 million in General Revenue in each fiscal year of the biennium to maintain existing patient transfer portal technology.

By: Dean

Health and Human Services Commission, Article II
Proposed Funding and Rider
Pediatric Long-Term Care Facility Rate Increase.

Overview

Provide funding to the Health and Human Services Commission to increase reimbursement for a Pediatric Long-Term Care Facility Rate Increase. Add a rider in the Health and Human Services Commission's bill pattern to identify appropriations for this purpose.

Required Action

- 1) In the Health and Human Services Commission bill pattern, increase appropriations in Strategy (either 1.1.2, Medicaid Disability Related, or 1.2.4, Nursing Facility Payments), by \$759,055 in General Revenue Funds and \$1,144,769 in Federal Funds in fiscal year 2024 and \$763,814 in General Revenue Funds and \$1,140,010 in Federal Funds in fiscal year 2025.

- 2) In the Health and Human Services Commission bill pattern, add the following rider:

Funding for Medicaid Pediatric Long-Term Care Facility Rate Increase

- (a) Included in amounts appropriated above, is \$759,055 in General Revenue Funds and \$1,144,769 in Federal Funds in fiscal year 2024 and \$763,814 in General Revenue Funds and \$1,140,010 in Federal Funds in fiscal year 2025 to increase the reimbursement rate for pediatric long-term care facilities.

By: Rep. Lynn Stucky

Health and Human Services Commission, Article II
Proposed Funding and Rider
Emergency Telemedicine Services for Individuals with Intellectual and Developmental
Disabilities

Prepared by LBB Staff, 02/13/2023

Overview

Add a rider to appropriate an additional \$10,100,000 in General Revenue Funds to the Health and Human Services Commission for Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), by \$1,800,000 in General Revenue Funds in each fiscal year.
2. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.3.1, Home and Community-based Services, by \$3,250,000 in General Revenue Funds in each fiscal year.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities (IDD).** Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) are the following amounts to provide access to emergent and urgent clinical and care coordination services via telemedicine by board certified emergency room physicians who have specialized IDD training:

- (a) \$1,800,000 in General Revenue Funds in each fiscal year in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID); and
- (b) \$3,250,000 in General Revenue Funds in each fiscal year in Strategy A.3.1, Home and Community-based Services.

These services would be limited to individuals receiving residential services through the Home and Community-based Services (HCS) program. The services shall be evidence-based and aim to improve health outcomes for the IDD population by reducing unnecessary emergency room visits and treating individuals in place. Services provided under this rider must show cost-savings as prescribed by Rider 21, Health and Human Services Cost Containment, and reported to the Legislative Budget Board.

4. On page II-61 of the Health and Human Services Commission bill pattern, amend Rider 21, Health and Human Services Cost Containment as outlined below:

_____ **Health and Human Services Cost Containment.** It is the intent of the Legislature Health and Human Services Commission (HHSC) shall develop and implement cost containment initiatives to achieve savings of at least \$350,000,000 in General Revenue Funds for the 2024-25 biennium throughout the health and human services system. These initiatives shall include:

- (a) increasing fraud, waste, and abuse prevention and detection;
- (b) seeking to maximize federal flexibility under the Medicaid program in compliance with Government Code, Chapter 537;
- (c) achieving other programmatic and administrative efficiencies; and
- (d) savings from services identified in Rider XX, Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

HHSC shall provide an annual report on the implementation of cost containment initiatives to the Legislative Budget Board by December 1. It is the intent of the legislature that HHSC shall achieve savings without adjusting amount, scope, or duration of services or otherwise negatively impacting access to care. It is the intent of the legislature that prior to making any changes, HHSC shall consider stakeholder input, including complying with any statutory requirements related to rulemaking and public hearings. This rider shall not be construed as limiting HHSC's ability to maximize federal flexibility under the Medicaid program, including federal flexibility that may impact amount, scope, or duration of services.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Women's Preventive Health Mobile Units

Prepared by LBB Staff, 02/28/2023

Overview

Add a rider to appropriate an additional \$10 million in the biennium to the Health and Human Services Commission, for the purpose of providing grants to Women's Health Program providers to build Mobile Women's Preventive Health Units similar to University of Texas Population Health mobile contraception unit currently contracted by HHSC.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.1, Women's Health Programs, by \$5,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Women's Preventive Health Mobile Units.** Out of funds appropriated above in Strategy D.1.11, Women's Health Programs, the Health and Human Services Commission (HHSC) is allocated \$5,000,000 in General Revenue each fiscal year to increase the number of Women's Preventive Health Mobile Units in the state. The Health and Human Services Commission shall prioritize awards for underserved communities or populations of the state to increase access to Healthy Texas Women, Breast and Cervical Cancer Services, and Family Planning Program services.

Adopted as Amended

By: Rep. Orr/Spiller

**Health and Human Services Commission, Article II
Rural Labor and Delivery Medicaid Add-on Payment**

Overview

The following action amends an existing rider to update the data reference for rural hospitals to the most recent census and to adjust the population threshold to maintain the existing classification of rural hospitals. It also includes updated estimates to increase the current add-on payment for labor and delivery services for from \$500 to \$1500 for FY2024 and FY2025

Required Action

On page II-53 of the Health and Human Services Commission's bill pattern, amend Rider 16, Rural Labor and Delivery Medicaid Add-on Payment:

16. Rural Labor and Delivery Medicaid Add-on Payment. Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.3, Pregnant Women, is \$12,373,629 ~~\$3,146,400~~ in General Revenue and \$19,119,444 ~~\$4,853,600~~ in Federal Funds in fiscal year 2024 ~~2022~~ and \$12,549,990 ~~\$3,050,400~~ in General Revenue and \$18,943,083 ~~\$4,949,600~~ in Federal Funds in fiscal year 2025 ~~2023~~ for HHSC to provide a \$1500 ~~\$500~~ Medicaid add-on payment for labor and delivery services provided by rural hospitals. For purposes of this rider, rural hospitals are defined as (1) hospitals located in a county with ~~60,000~~ 65,000 or fewer persons according to the ~~2010~~ 2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

Overview

Add a rider and funding to authorize \$127.3 million in General Revenue for the biennium for a Maintenance of Critical Services exceptional item such as the one used by the Legislature in 2009 with a targeted increase in appropriations to address increased operational costs and personnel shortages in the Local MH/IDD Authority System.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Svc - Adults, by \$37,928,029 in General Revenue in each fiscal year.
2. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.2, Community Mental Health Svc - Children, by \$9,653,956 in General Revenue in each fiscal year.
3. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.3, Community Mental Health Crisis Svcs, by \$7,169,246 in General Revenue in each fiscal year.
4. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy F.1.3, Non-Medicaid Developmental Disability Community Services, by \$4,733,944 in General Revenue in each fiscal year.
5. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy I.2.1, Intake, Access, and Eligibility to Services and Supports, by \$4,171,485 in General Revenue in each fiscal year.
6. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

. **Maintenance of Critical Services: Local Authority Workforce Capacity.** Out of funds appropriated above, the Health and Human Services Commission shall allocate the following amounts for maintenance of critical infrastructure to local mental health authorities, local behavioral health authorities, and local intellectual and developmental disability authorities proportionally based on fiscal year 2023 funding levels:

(a) \$37,928,029 in General Revenue in each fiscal year in Strategy D.2.1, Community Mental Health Svc - Adults;

(b) \$9,653,956 in General Revenue in each fiscal year in Strategy D.2.2, Community Mental Health Svc - Children;

(c) \$7,169,246 in General Revenue in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Svcs;

(d) \$4,733,944 in General Revenue in each fiscal year in Strategy F.1.3, Non-Medicaid IDD Community Svcs; and

(e) \$4,171,485 in General Revenue in each fiscal year in Strategy I.2.1, Long-term Care Intake & Access.

By: Rep. Howard

Health and Human Services Commission, Article II
Proposed Rider
Informational Listing: Women's Health Funding

Overview

Increase eligibility and funding for breast and cervical cancer screening and diagnostic services delivered through the Breast and Cervical Cancer Services program.

Required Action

1. On page II-XX of the Health and Human Services bill pattern, increase appropriations by \$500,000 General Revenue in fiscal year 2024 and by \$500,000 General Revenue in fiscal year 2025.

____. **Informational Listing: Women's Health Funding.** Out of funds appropriated above in Strategy D.1.1, Women's Health Programs, the Health and Human Services Commission shall increase the income eligibility threshold for the Breast and Cervical Cancer Services program to 250% of the federal poverty level.

Background: Federal law (the BREAST AND CERVICAL CANCER MORTALITY PREVENTION ACT OF 1990) authorized the U.S. Centers for Disease Control and Prevention (CDC) to issue grants to states for breast and cervical cancer screening and diagnosis services. CDC program policy allows states to set income eligibility up to 250% of the federal poverty level.

The Texas Administrative Code currently limits eligibility to 200% FPL (TAC, Title 26, Part I, Chapter 371, Rule 371.7). Studies show that early detection of these cancers increases the likelihood of successful treatment and cancer remission.

By: Representative Orr

**Health and Human Services Commission, Article II
Proposed Funding and Rider
Medicaid and CHIP Provider Enrollment and Credentialing Portal Ongoing
Costs**

Overview

Increase funding and add a rider at the Health and Human Services Commission for the ongoing costs of the Medicaid and CHIP Provider Enrollment and Credentialing Portal.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, by \$500,000 in General Revenue and \$1,500,000 in Federal Funds (\$2,000,000 in All Funds) in fiscal year 2025.
2. On Page JI-XX of the Health and Human Services Commission bill pattern, amend Rider 2, Capital Budget, to increase capital budget authority by \$500,000 in General Revenue and \$1,500,000 in Federal Funds (\$2,000,000 in All Funds) in fiscal year 2025.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

. Medicaid and CHIP Provider Enrollment and Credentialing Portal. Included in the amounts appropriated above to the Health and Human Services Commission in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, is \$500,000 in General Revenue and \$1,500,000 in Federal Funds (\$2,000,000 in All Funds) in fiscal year 2025 for the ongoing costs for the Medicaid and CHIP Provider Enrollment and Credentialing Portal.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Texas Colorectal Cancer Treatment Initiative

Prepared by LBB Staff, 03/15/2023

Overview

Increase funding and add a rider for the Health and Human Services Commission for a Colorectal Managed Care Initiative (CCMCI).

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in D.1.10, Additional Specialty Care, by \$10,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Texas Colorectal Cancer Managed Care Initiative.** Included in the amounts appropriated above to the Health and Human Services Commission in D.1.10, Additional Specialty Care, is \$10,000,000 in General Revenue in each fiscal year for the Health and Human Services Commission to fund the treatment of colorectal cancer for uninsured and underinsured Texas residents with household incomes at or below 200 percent of the federal poverty level.

Any unexpended balances remaining as of August 31, 2024 are appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Overview

Increase funding and add a rider to increase rates for intermediate care facilities and the Home and Community-Based Services and Texas Home Living waivers.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Goal A, Medicaid Client Services, by \$215,800,000 in General Revenue for the biennium.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Rates: Intermediate Care Facilities and Certain Waiver Providers.

- (a) Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) in Goal A, Medicaid Client Services, is \$215,800,000 in General Revenue over the biennium to do the following:
 - (1) maintain rate increases authorized by House Bill 1, Eighty-sixth Legislature, Health and Human Services Commission, Rider 44, Rate Increases: Intermediate Care Facilities and Home and Community-Based Services (HCS) and Texas Home Living (TxHmL) Waiver Providers; and
 - (2) provide for rate increases for intermediate care facilities and the Home and Community-Based Services and Texas Home Living waivers in the direct care portion of those rates.
- (b) It is the intent of the Legislature that HHSC assume direct care staff wages of \$15.00 per hour on average, before benefits, in the methodology for these services.

Overview

The UT Health Science Center at Tyler (UTHSCT) operates 30 long term and 14 acute care inpatient mental health beds under contract with HHSC in an effort to alleviate burden on the state hospital system. Currently, UTHSCT receives \$558.47 per bed per day from HHSC for operation of the long term beds and \$644.39 per bed per day for operation of the acute care beds. This rate has remained relatively flat since the beds were first brought online in 2013, despite escalating costs associated with their operation. The institution has requested a rate of \$650 per day. Considering the adoption of HHSC exceptional item #4 will increase the acute care bed rate to \$650, the amount requested herein ensures the 30 long term care beds are raised to the \$650 bed day rate, for a standard rate of \$650 for all 44 beds.

This rider would dedicate general revenue in the HHSC bill pattern to provide an increased rate for contracted inpatient mental health care beds at UTHSCT.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals, by \$889,800 in General Revenue in fiscal year 2024 and \$887,683 in General Revenue in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

University of Texas Health Science Center at Tyler Contracted Mental Health Beds. Out of funds appropriated above in Strategy G.2.2, Mental Health Community Hospitals, HHSC shall allocate \$889,800 in General Revenue in fiscal year 2024 and \$887,683 in General Revenue in fiscal year 2025 to increase the bed-day rate for inpatient mental health contracted beds at the University of Texas Health Science Center at Tyler.

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.1.2, Disability-Related, by \$75,000,000 in general revenue funds and \$115,017,735 in federal funds in Fiscal Year 2024 and \$74,283,348 in general revenue funds and \$112,124,050 in federal funds in Fiscal year 2025.
2. On Page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

____. Private Duty Nursing. Included in amounts appropriated above to the Health and Human Services Commission in Strategy A.1.2, Disability-Related, is \$75,000,000 in general revenue funds and \$115,017,735 in federal funds in Fiscal Year 2024 and \$74,283,348 in general revenue funds and \$112,124,050 in federal funds in Fiscal year 2025 for reimbursement rate increases for private duty nursing services to assist providers with the increases costs of maintaining adequate staff, including on holidays, weekends, and extended shifts.

Health and Human Services Commission, Article II
Proposed Rider
Health Information Exchanges Image Enablement

Prepared by LBB Staff, 03/04/2023

Overview

To promote a robust health data infrastructure, Texas should ensure that Health Information Exchanges (HIEs) in Texas deploy image enablement. Image enablement will result in better patient outcomes and lower healthcare costs. In addition, patients will benefit from a seamless continuum of care to assist in first-time-right diagnosis and reduce radiation exposure rates.

The health care system and state Medicaid program cost savings are achieved by significantly reducing repeat procedures and duplicate imaging claims. Currently, the Office of E-Health at the Health and Human Services Commission (HHSC) provides leadership to and acts as a single point of coordination for health information technology initiatives in Texas.

This rider would provide for a one-time appropriation of \$30 million in the fiscal year 2024 for HHSC to distribute grant funding to health information exchanges in Texas deploy image enablement.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.14, Primary Health and Specialty Care Administration, by \$30,000,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Health Information Exchange Image Enablement.** Out of funds appropriated above in Strategy D.1.14, Primary Health and Specialty Care Administration, the Health and Human Services Commission shall distribute \$30,000,000 in General Revenue to the Texas Health Services Authority established by Chapter 182, Health and Safety Code, and to local or regional health information exchanges, as defined by Section 531.901(4), Government Code, in an amount not to exceed \$0.75 per patient covered, as verified by an electronic Master Patient Index (eMPI) implemented within their network, to expand and enhance their existing infrastructures to enable the exchange of diagnostic imaging scans in support of improved clinical imaging workflows. Funding shall be distributed by December 31, 2023.

Adopted as Amended

By: ___ Rep. Stucky _____

Health and Human Services Commission, Article II
Medicaid Ground Ambulance Reimbursement Rates

Overview

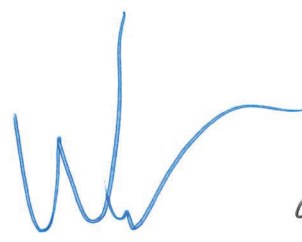
The following action adds a new rider that directs up to \$24.5 million in general revenue to the Health and Human Services Commission for the purpose of increasing Medicaid ground ambulance reimbursement rates, which have not been increased since 2008 and have been reduced twice since 2011.

Required Action

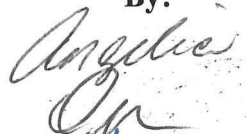
1. On page II-XXX of the Health and Human Services Commission’s bill pattern, increase appropriations by \$10,899,622 in general revenue funds and \$16,715,331 in federal funds in FY 24, and \$10,887,910 in general revenue funds and \$16,434,325 in federal funds in FY 25.
2. On page II-XXX of the Health and Human Services Commission’s bill pattern, add the following new rider:

Ground Ambulance Reimbursement Rates. Out of funds appropriated above in Strategies A.1.1 Aged and Medicare-Related, A.1.2 Disability-Related, A.1.3 Pregnant Women, A.1.4 Other Adults and A.1.5 Children, the Health and Human Services Commission shall use \$21,787,532 in general revenue funds and \$33,149,656 in federal funds over the biennium for the purposes of increasing the Medicaid ground ambulance mileage rate to equal the calendar year 2023 Medicare urban mileage rate.

March 6, 2023

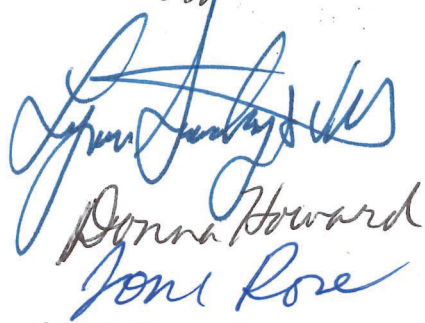


By:



Article II
Health & Human Services Commission
Proposed New Rider

Improving Access to Pediatric Services



Background

Medicaid Rates Have Remained Flat Over a Decade While Patient Caseload and Costs Have Increased

- Medicaid physician payments have not been increased for pediatric services in over a decade, while patient caseloads and physician practice costs have increased. This is not sustainable.
- Pediatric codes are currently paid at the SAME rate as their 2009 levels. When adjusted for inflation, this equates to a **decrease of 28.9% over a thirteen-year period**.
- Inadequate rates reduce the number of physicians willing to take Medicaid. Texas has the nation's second highest percentage of physicians who do not accept Medicaid.
- 38% of Texas physicians do not participate in Medicaid, 60% of those citing low rates as the reason.
- HHSC prioritized Medicaid rate increases in appropriations request.
 - In its LAR, HHSC included a request to increase Medicaid rates, stating: "some categories of reimbursement rates have not been updated for long periods of time... due to lack of available appropriations to support an increase of that magnitude."
 - HHSC's LAR prioritized 5 categories of rate types, including physician Evaluation and Management codes, which makes up the majority of the rates within this request.
 - Per HHSC, "without additional funding for rate increases, rising costs incurred by providers could erode the quality of services delivered and could result in access-to-care problems for clients if fewer providers are willing to deliver services for the level of Medicaid reimbursement".

Medicaid Targeted Rate Increases: Maximize Positive Impact to Vulnerable Population

- To begin to address low rates across Medicaid, **targeted rate increases** should focus on our most vulnerable populations and on services and populations that can yield the highest impact in terms of improved outcomes.
- **Texas Should Target Codes to Care for Babies and Children Ages 0-3 Because the Impact Will Last a Lifetime:**
 - The health care a child receives during the first three years of his or her life has impacts that will last a lifetime – both in health outcomes and costs.
 - Healthcare in the earliest years strengthens developing biological systems that enable children to thrive and grow up to be healthy adults.
 - Prevention and early intervention yields cost savings because the investment costs are often less than the downstream costs of poor health and development. Overall studies

have shown that investments in early childhood appear to save money in the longer term.

Proposed Action

- (1) On Health and Human Services bill pattern in House Bill 1, increase general revenue appropriations in Strategy A.1.5., Children, by \$\$22,884,170 in fiscal year 2024 and \$23,483,070 in fiscal year 2025
- (2) Add the following appropriately numbered rider to the bill pattern of the Health & Human Services Commission:

Rider Language

_____ **Improving Access to Pediatric Services.** (a) Included in amounts appropriated above in Strategy A.1.5, Children, is \$22,884,170 in General Revenue Funds and \$34,027,460 in Federal Funds (\$56,911,630 in All Funds) in fiscal year 2024 and \$23,483,070 in General Revenue Funds and \$34,903,470 in Federal Funds (\$58,386,540 in All Funds) in fiscal year 2025 to provide a 10 percent rate increase for services provided in any setting by a physician, including a specialist, to children ages 0 to 3.

(b) It is the intent of the Legislature that HHSC allocate the funding identified in subsection (a) among provider type and procedure codes to improve access to care for clients served under Medicaid fee-for-service and managed care models. It is the intent of the Legislature that HHSC shall ensure all funds allocated through this rider are fully reflected in reimbursement rates paid for physician services in both Medicaid fee-for-service and managed care models.

(c) HHSC shall report to the Legislative Budget Board and Governor by September 1, 2024 detailing the compliance by managed care organizations in allocating the additional funds listed above directly to physician services for children ages 0 to 3.

By: Representative Howard

Health and Human Services Commission, Article II
Proposed Funding and Rider
Medicaid Community Care

Overview

Increase funding and add a rider at the Health and Human Services Commission to increase reimbursement for Medicaid services provided by Community Attendants.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Goal A, Medicaid Client Services, by \$498,798,761 in General Revenue and (\$1,284,234,103 All Funds for the biennium).
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Funding for Medicaid Services Provided by Community Attendants.**

- a. Included in amounts appropriated above in Goal A, Medicaid Client Services, is \$106,933,535 in General Revenue Funds (\$275,374,537 All Funds) for HHSC to increase service support funding for Home and Community Services Agency Community Attendant services.
- b. Included in amounts appropriated above in Goal A, Medicaid Client Services for each fiscal year is \$391,865,226 General Revenue (\$1,008,859,566 All Funds) for HHSC to include an increase of \$0.04 for each level in the rate enhancement program for Community Attendants. Funds include full rate enhancement for attendant programs not included in the rate enhancement such as MDCP /PAS, PCS, Respite. and Consumer directed services (CDS) option attendant services.

Health and Human Services Commission, Article II, and Health-Related Provisions, Article IX

Proposed Rider Project Baby Dillo

Prepared by LBB Staff, 03/02/2023

Overview

Add funding at the Health and Human Services Commission for a critically ill newborn whole genome sequencing demonstration. Add rider in Article IX directing use of the funds and requiring a report.

Required Action

1. On page II-XX of the Health and Human Services Commission's bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$2,000,000 in General Revenue in each fiscal year.
2. On page IX-XX of the Article IX bill pattern, add the following rider:

Project Baby Dillo Critically Ill Newborn Whole Genome Sequencing (WGS) Demonstration.

- (a) Included in funds appropriated elsewhere in this Act, the Health and Human Services Commission is appropriated \$4,000,000 in General Revenue for the one-time purpose of demonstrating improved clinical outcomes and cost savings associated with the utilization of Whole Genome Sequencing for low-income neonatal and pediatric intensive care patients. To administer the demonstration, HHSC shall expend \$2,000,000 per fiscal year with the University of Texas Health Science Center at Houston for program administration, clinical referral partners, and sequencing. The University of Texas Health Science Center at Houston shall coordinate with the Baylor College of Medicine Human Genome Sequencing Center, the Health and Human Services Commission, the Department of State Health Services, participating clinical referral sites within Texas, and patient representatives to collaborate on the development and implementation of the demonstration.
- (b) The agencies shall meet quarterly to carry out coordination activities as described above.
- (c) The agencies shall submit a report to the Governor, the Lieutenant Governor, the Speaker of the House of Representatives, and the standing committee of each house of the Legislature with primary jurisdiction over pediatric health issues and post on its Internet website a written report no later than December 1, 2024, describing:
 - (1) the activities and objectives of the demonstration, including an analysis of the cost effectiveness of the activities and a description of the health outcomes achieved and anticipated for cases;
 - (2) the health-related institutions of higher education and participating clinical referral partners that receive funding under the demonstration; and
 - (3) any recommendations based on the activities of the demonstration, including recommendations related to improving the availability of genetic services and workforce.

Health and Human Services Commission, Article II
Proposed Rider
Healthy Texas Women Enrollment Support

Prepared by LBB Staff, 02/28/2023

Overview

Add a rider to appropriate an additional \$5.3 million in the biennium to the Health and Human Services Commission for the purpose of providing additional contract funds to Women’s Health Program Providers to support the hiring of Healthy Texas Women Patient Navigators on-site at contract clinics. There are currently 38 unique FPP providers with almost 200 locations throughout the state. These providers are assisting patients with their HTW applications every day and are struggling to maintain sufficient staffing. The Federal CMS application is 13 pages long and clients are no longer allowed to be automatically enrolled in HTW after coming off postpartum Medicaid. With the unwinding of the PHE, hundreds of thousands of new women need to be screened and apply for HTW this year.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.14, Primary Health and Specialty Care Administration, by \$2,614,100 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Healthy Texas Women Enrollment Support.** Out of funds appropriated above in Strategy D.1.14, Primary Health and Specialty Care Administration, the Health and Human Services Commission (HHSC) is allocated \$2,614,000 in General Revenue each fiscal year to fund patient navigators at providers for women’s health programs to facilitate and expedite access to the Healthy Texas Women (HTW) program. HHSC shall utilize the funding used to increase contract amounts to support the hiring of on-site navigators at contracted HTW or Family Planning Program clinics throughout the state. HHSC shall grant on-site navigators appropriate access to TIERS to facilitate client enrollment.

Overview

Add money to innovation grants in Rider 40 for the purpose of providing mental health intervention and wraparound services for Independent School District students

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Rider 40 (e)(3), Innovation Grants, by \$25,000,000 in each fiscal year
2. On Page II-XX of the Health and Human Services Commission bill pattern, make the following changes to Rider 40 (e)(3)

(3) Innovation Grants. ~~\$7,500,000~~ \$32,500,000 in each fiscal year in Strategy D.2.6, Community Mental Health Grant Programs, for an innovation grant program to support a variety of community-based initiatives that improve access to care for children and families, such as programs that reduce juvenile justice involvement, reduce relinquishment, ~~and preventing~~ prevent emergency room visits, and provide mental health prevention and intervention services. HHSC shall ensure at least half of the appropriated innovation grant funds are used to provide mental health services at Independent School Districts

By: Rep. Howard

March 9, 2023 - DRAFT

State Children’s Health Insurance Program (CHIP) Health Services Initiative

Funding for CHIP Health Services Initiative. Funds appropriated above in Strategy B.1.1, Medicaid and CHIP Contracts and Administration, and consistent with § 2105(a)(1)(D)(ii) of the Social Security Act, include \$2,500,000 in General Revenue and \$7,500,000 in Federal Funds in fiscal year 2024 and \$2,500,000 in General Revenue and \$7,500,000 in Federal Funds in fiscal year 2025. The Health and Human Services Commission (HHSC) shall develop a State Children’s Health Insurance Program (CHIP) Health Services Initiative (HSI) that will focus on the creation of a funding program for Community Based Organizations (CBOs) to allow for investment in technology to facilitate coordination across government, healthcare entities, and CBOs in order to address non-medical factors that affect healthcare outcomes and costs. Such systems must include capabilities to: (1) make closed-loop referrals, (2) automatically generate invoices based on services provided, and (3) link service delivery outcomes to payment.

HHSC shall prepare and submit a report that outlines how HSI funds were allocated, progress made on creation of the grant program, and funds disbursed to date to the Senate Committee on Finance, the House Committee on Appropriations, the Legislative Budget Board, the Governor, the Lieutenant Governor, the Speaker of the House, and permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services by December 31, 2024.

Overview

Prepare a rider to appropriate an additional \$5.0 million in the biennium to the Health and Human Services Commission for Healthy Texas Women and other women’s health programs to implement a marketing program for local-level and regional outreach. With more than half of Texas births being funded by Medicaid, a \$5 million allocation would allow Health and Human Services Commission to contract with a marketing company to develop and implement local and regional marketing efforts to increase awareness of Healthy Texas Women and other women’s health programs and available providers in their geographical area. By providing funds for a local level marketing campaign, more Texans will be aware that Healthy Texas Women and other women’s health programs are available for their health needs.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.14, Primary Health and Specialty Care Administration, by \$5,000,000 in General Revenue in fiscal year 2024.
2. On Page II-XX of the Health and human Services Commission bill pattern, add the following rider.

Local-Level Marketing Program for Women's Health Programs. Out of Funds appropriated above in Strategy D.1.14, Primary Health and Specialty Care Administration, the Health and Human Services Commission is allocated \$5,000,000 in General Revenue in fiscal year 2024 to partner with a marketing agency to implement a local-level outreach program to increase regional awareness of women's health programs and local program providers for Healthy Texas Women, the Family Planning Program, and Breast and Cervical Cancer Services. Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium are appropriated for the same purposes for the second fiscal year of the biennium.

March 9, 2023

**Article II
Health & Human Services Commission
Proposed New Rider**

Improving Access to Pediatric Services

Proposed Action

- (1) On Health and Human Services bill pattern in House Bill 1, increase general revenue appropriations in Strategy A.1.5., Children, by \$3,066,320 in General Revenue Funds and \$4,559,470 in Federal Funds (\$7,625,790 in All Funds) in fiscal year 2024 and \$3,150,030 in General Revenue Funds and \$4,681,990 in Federal Funds (\$7,832,020 in All Funds) in fiscal year 2025.
- (2) Add the following appropriately numbered rider to the bill pattern of the Health & Human Services Commission:

Rider Language

_____ **Improving Access to Pediatric Services.** (a) Included in amounts appropriated above in Strategy A.1.5, Children, is \$3,066,320 in General Revenue Funds and \$4,559,470 in Federal Funds (\$7,625,790 in All Funds) in fiscal year 2024 and \$3,150,030 in General Revenue Funds and \$4,681,990 in Federal Funds (\$7,832,020 in All Funds) in fiscal year 2025 to provide a 10 percent rate increase for services provided in any setting by a physician, including a specialist, to children age 4.

(b) It is the intent of the Legislature that HHSC allocate the funding identified in subsection (a) among provider type and procedure codes to improve access to care for clients served under Medicaid fee-for-service and managed care models. It is the intent of the Legislature that HHSC shall ensure all funds allocated through this rider are fully reflected in reimbursement rates paid for physician services in both Medicaid fee-for-service and managed care models.

(c) HHSC shall report to the Legislative Budget Board and Governor by September 1, 2024 detailing the compliance by managed care organizations in allocating the additional funds listed above directly to physician services for children age 4.

By: Representative Orr

**Health and Human Services Commission, Article
II
Proposed Funding and
Rider Nutrition Incentives**

Prepared by LBB Staff, 02/13/2023

Overview

Provide \$6,000,000 in General Revenue Funds in fiscal year 2024 and unexpended balance authority to the Health and Human Services Commission (HHSC) to provide for grant funding to organizations implementing nutrition incentive programs. Add a new rider to identify appropriations for this purpose.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy I.1.1, Integrated Eligibility and Enrollment, by \$6,000,000 in General Revenue Funds in fiscal year 2024.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Nutrition Incentives. Included in the amounts appropriated above to the Health and Human Services Commission is \$6,000,000 in General Revenue Funds in fiscal year 2024 in Strategy I.1.1, Integrated Eligibility and Enrollment, for grants to organizations implementing nutrition incentive programs that qualify for federal funds under Section 4205, Agriculture Improvement Act of 2018 (7 U.S.C. Section 7517). Any organization selected for grant funding must have demonstrated experience designing and implementing successful nutrition incentive programs that connect low-income consumers and agricultural producers, offer administrative and technological support to retailer participants to support uptake and participation in the program, and operate in at least two counties.

Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium in Strategy I.1.1, Integrated Eligibility and Enrollment, are appropriated for the same purposes for the second fiscal year of the biennium.

Health and Human Services Commission, Article II
Proposed Rider
Rural Hospital Telepsychiatry Consultations

Prepared by LBB Staff, 03/15/2023

Overview

Add funding and a new rider at the Health and Human Services Commission to fund telepsychiatry consultations in rural hospitals. Patients experiencing mental health crises present in rural hospital emergency departments, but most rural hospitals do not have on-site psychiatrist support. Timely access to a remote psychology consult would help patients get the care they need and help hospitals provide necessary care and treatment. Programs offering remote psychology consults exist but may require a minimum call volume that rural hospitals cannot meet individually. Aggregating consults through a single statewide organization would enable cost effective utilization of remote services, deliver better patient care, reduce duplication/churn among patients with behavioral health issues, and reduce the security risk associated with holding unstable patients.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Svcs – Adults, by \$3,700,000 in General Revenue in each fiscal year of the biennium.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Rural Hospital Telepsychiatry Consultations.** Included in amounts appropriated above in Strategy D.2.1, Community Mental Health Svcs – Adults, is \$3,700,000 in General Revenue in each fiscal year of the biennium to fund telepsychiatry consultations for rural hospitals. The Health and Human Services Commission shall contract with a statewide organization to aggregate telepsychiatry consultations among rural hospitals in order to access remote psychology services through collaboration with one or more telepsychiatry networks. The statewide organization must be exempt from federal income taxation and provide services to rural hospitals, including grant and fund development to assist rural hospitals in their search for funding opportunities, education and training to provide important information to rural hospital staff, and performance and quality improvement tools to help rural hospitals deliver quality health care.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

Overview

Add \$4.65 million in General Revenue in each year of the fiscal year of the 2024-25 biennium to Strategy F.3.1 Family Violence Services to fund enhanced capacity and services to survivors seeking shelter and community education and prevention programming.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy F.3.1, Family Violence Services, by \$4,650,000 in General Revenue Funds in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Enhanced Capacity for Family Violence Services.** Out of funds appropriated above in Strategy F.3.1, Family Violence Services, the Health and Human Services Commission is allocated \$4,650,000 in General Revenue each fiscal year to distribute to existing family violence centers and special nonresidential projects in a manner consistent with Chapter 51 of the Human Resources Code. Funding shall be used to provide enhanced capacity for shelter services as well as legal, mental health, housing, and economic stability services for victims of family violence and to offer community education and prevention programming.

Health and Human Services Commission, Article II
Proposed Rider
Rider 8, Hospital Payments

Prepared by LBB Staff, 03/03/2023

Overview

Amend HHSC Rider 8, Hospital Payments, to update the data reference for rural hospitals.

Required Action

On page II-55 of the Health and Human Services Commission bill pattern, amend the following rider:

8. **Hospital Payments.** Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategies in Goal A, Medicaid Client Services, is \$112,399,393 in General Revenue Funds, \$72,586,320 in Interagency Contracts, and \$278,870,136 in Federal Funds (\$463,855,849 in All Funds) in fiscal year 2024 and \$116,333,409 in General Revenue Funds, \$72,250,499 in Interagency Contracts, and \$281,465,713 in Federal Funds (\$470,049,621 in All Funds) in fiscal year 2025 to provide Medicaid hospital add-on payments for trauma care and safety-net hospitals and add-on payments and rate increases for rural hospitals as follows:
- (a) \$71,784,000 in Interagency Contracts and \$108,216,000 in Federal Funds in fiscal year 2024 and \$72,216,000 in Interagency Contracts and \$107,784,000 in Federal Funds in fiscal year 2025 for trauma care;
 - (b) \$59,017,680 in General Revenue Funds, \$802,320 in Interagency Contracts, and \$90,180,000 in Federal Funds in fiscal year 2024 and \$60,145,501 in General Revenue Funds, \$34,499 in Interagency Contracts, and \$89,820,000 in Federal Funds in fiscal year 2025 for safety-net hospitals;
 - (c) \$11,964,000 in General Revenue Funds and \$18,036,000 in Federal Funds in fiscal year 2024 and \$12,036,000 in General Revenue Funds and \$17,964,000 in Federal Funds in fiscal year 2025 for rural hospitals to maintain increases and add-ons related to general outpatient reimbursement rates, outpatient emergency department services that do not qualify as emergency visits, the outpatient hospital imaging services fee schedule, and the outpatient clinical laboratory services fee schedule;
 - (d) \$11,644,960 in General Revenue Funds and \$17,555,040 in Federal Funds in fiscal year 2024 and \$13,440,200 in General Revenue Funds and \$20,059,800 in Federal Funds in fiscal year 2025 for rural hospitals to maintain inpatient rates trended forward from 2013 to 2020 using an inflationary factor;
 - (e) \$5,446,155 in General Revenue Funds and \$8,210,201 in Federal Funds in fiscal year 2024 and \$5,651,359 in General Revenue Funds and \$8,434,781 in Federal Funds in fiscal year 2025 for rural hospitals to maintain increases to inpatient rates in addition to those identified in Subsection (d); and
 - (f) \$24,326,598 in General Revenue Funds and \$36,672,895 in Federal Funds in fiscal year 2024 and \$25,060,349 in General Revenue Funds and \$37,403,132 in Federal Funds in fiscal year 2025 to increase reimbursement for Medicaid services provided by rural hospitals.

HHSC shall develop a methodology to implement the add-on payments pursuant to funding identified in Subsection (b) that targets the state's safety-net hospitals,

including those hospitals that treat high percentages of Medicaid and low-income, uninsured patients. Total reimbursement for each hospital shall not exceed its hospital specific limit.

For purposes of Subsections (c), (d), (e) and (f), rural hospitals are defined as (1) hospitals located in a county with ~~60,000~~70,000 or fewer persons according to the ~~2010~~2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA. No reimbursement may exceed the hospital specific limit and reimbursement for outpatient emergency department services that do not qualify as emergency visits may not exceed 65 percent of cost.

To the extent possible, HHSC shall ensure any funds identified in this rider that are included in Medicaid managed care capitation rates are distributed by the managed care organizations to the hospitals. The expenditure of funds identified in this rider that are not used for targeted increases to hospital provider rates as outlined above shall require the prior written approval of the Legislative Budget Board.

Overview

Amend the Health and Human Services Commission Rider 19, Interest List Reporting, to add additional reporting requirements.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:
 19. **Interest List Reporting.** Out of funds appropriated above in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, the Health and Human Services Commission shall post the following information regarding the Home and Community-based Services, Community Living Assistance and Support Services, Deaf-Blind Multiple Disabilities, Texas Home Living, and Medically Dependent Children Program waivers and STAR+PLUS on the commission's website:
 - (a) interest list releases;
 - (b) interest list counts, by years on list;
 - (c) average number of individuals on the interest list per month;
 - (d) average number of individuals on the interest list receiving other services per month;
 - (e) percent declined services or found to be ineligible for services at the end of the fiscal year;
 - (f) The unduplicated number of persons on each interest list, broken out by program, by month; and
 - (g) The type of services persons may require, based on the services provided by the program in which the person is interested.

Health and Human Services Commission, Article II
Proposed Rider
Rider 16, Rural Labor and Delivery Medicaid Add-on Payment

Prepared by LBB Staff, 03/03/2023

Overview

Amend HHSC Rider 16, Rural Labor and Delivery Medicaid Add-on Payment, to update the data reference for rural hospitals.

Required Action

On page II-59 of the Health and Human Services Commission bill pattern, amend the following rider:

16. **Rural Labor and Delivery Medicaid Add-on Payment.** Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.3, Pregnant Women, is \$3,190,400 in General Revenue and \$4,809,600 in Federal Funds in fiscal year 2024 and \$3,209,600 in General Revenue and \$4,790,400 in Federal Funds in fiscal year 2025 for HHSC to provide a \$500 Medicaid add-on payment for labor and delivery services provided by rural hospitals.

For purposes of this rider, rural hospitals are defined as (1) hospitals located in a county with ~~60,000~~70,000 or fewer persons according to the ~~2010~~2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

Health and Human Services Commission, Article II
Proposed Rider
Clear Process for Including Prescription Drugs on the Texas Drug Code Index

Prepared by LBB Staff, 03/07/2023

Overview

Add a rider at the Health and Human Services Commission to reinstate rider related to the Texas Drug Code Index.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Clear Process for Including Prescription Drugs on the Texas Drug Code Index.**
The Health and Human Services Commission (HHSC) shall make clear their process for the inclusion of prescription drugs in the Medicaid and Children's Health Insurance Programs. In maintaining the prescription drug inclusion process, HHSC shall ensure that the timeline for review, including initiation of drug review, clinical evaluation, rate setting, Legislative Budget Board notification, and making the product available, does not extend past the 90th day of receipt of the completed application for coverage on the Texas Drug Code Index. After the applicable Drug Utilization Review Board meeting and approval by the HHSC Executive Commissioner, HHSC will complete the public posting of medical policies associated with the product.

Health and Human Services Commission, Article II
Proposed Rider
Family Planning Program Funds Gone Notification and Women’s Health Programs
Transfer Authority

Prepared by LBB Staff, 02/28/2023

Overview

Add a rider to require the Health and Human Services Commission to notify the LBB and Office of the Governor if there are inadequate funds in Strategy D.1.1. before entering into a ‘funds gone’ status with any of the contracted providers for women’s preventive health. As providers are required to see an unlimited number of patients, it is critical for their sustainability that the state be aware of circumstances when funding is inadequate and have remedies in place to address it.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Family Planning Program Funds Gone Notification and Women’s Health Programs Transfer Authority.**

- (a) At least 30 calendar days prior to entering a ‘funds gone’ status for contract claims with Family Planning Program (FPP) providers, the Health and Human Services Commission (HHSC) shall notify the Legislative Budget Board and the Governor’s Office. The notification must include if there are sufficient funds available within other programs in Strategy D.1.1, Women’s Health Programs, to transfer into FPP to cover all FPP client services. In the event that funds are not available within Strategy D.1.1, Women’s Health Programs, HHSC shall transfer funding for FPP client services pursuant to section (b) of this rider.
- (b) Notwithstanding the transfer limitations in Rider 122, Limitations on Transfer Authority; Article IX, Section 14.01, Appropriation Transfers; and any other transfer limitations in this Act, HHSC is authorized to transfer funds from Goal A, Medicaid Client Services, to Strategy D.1.1, Women’s Health Programs, for client services if HHSC determines that there is a demand based on program utilization.
- (c) Transfers under the authority in Subsection (b) of this rider may be made only for direct client services and shall not be made to increase administration of women’s health programs.
- (d) Authority granted by this rider to transfer funds is contingent upon a written notification from HHSC to the Legislative Budget Board and the Governor’s Office within 30 calendar days of making a transfer.

**Health and Human Services Commission, Article II
Use of Unused San Antonio State Hospital Property**

Overview

The following action adds a new rider that directs HHSC, Bexar County, and the City of San Antonio to establish a partnership for comprehensive land use and program planning.

The Texas Legislature has invested more than \$1 billion for replacement and renovation of several state psychiatric hospitals across Texas. One of these projects, at the San Antonio State Hospital, will result in a full replacement of the current state hospital with a new, state of the art facility. The new state hospital is slated to begin operations in March 2024.

As a result of operations moving into the new state hospital building, much of the current footprint of the SASH campus will be vacant, providing an opportunity for collaborative land use planning to ensure that the land and usable buildings are utilized to further advance the mission of HHSC and the state hospital system.

An Interim Report from the Bexar County Task Force on Criminal Justice and Behavioral Health was presented to Bexar County Commissioners Court on February 8, 2022. As a result of that presentation, and at the direction of Bexar County Commissioners and the Bexar County Sheriff, Bexar County and University Health have engaged with Meadows Mental Health Institute and HOK Architects to assess the cost to build and operate new mental health facilities and step-down or supportive housing on the current SASH site after SASH operations move into the new hospital building.

Rider direction is needed for HHSC, Bexar County, and the City of San Antonio to establish a partnership for comprehensive land use and program planning.

Required Action

On page X-XX of the Health and Human Services Commission's bill pattern, add the following new rider:

_____ . **Unused San Antonio State Hospital Land.** HHSC shall engage in land use and program planning with Bexar County and the City of San Antonio to utilize unused land and buildings on the San Antonio State Hospital campus for the purpose of the provision of mental health services. Planning should include community outreach and input and consider the full mental health continuum of care in services considered for inclusion on the property.

By: Howard

Health and Human Services Commission
Proposed Rider Revision
Early Childhood Intervention Report

Overview

Add a rider requiring Health and Human Services Commission (HHSC), out of its current funding, to develop and release a report relating to the number of infants aged 0-3 eligible for and enrolled in Early Childhood Intervention and performance measures related to ECI.

Required Action

- 1) Add the following new rider to the bill pattern for the Health and Human Services Commission:

Rider , Early Childhood Intervention Report

Out of the funds appropriated above, the Health and Human Services Commission (HHSC) shall establish an Early Childhood Intervention (ECI) Eligibility and Enrollment Forecast report. No later than thirty days after the end of each fiscal quarter, the Commission shall post on its website:

- a. The total count of infants aged 0-3 years old that are newly eligible to receive services during the reporting period, the number of newly authorized infants who became enrolled in services, the total number of eligible individuals, the total number enrolled, the number of service delivery hours provided to enrolled individuals, and the total number of ECI clients who aged out of the program; and
- b. A comparison of actual performance on each ECI performance measure included in the General Appropriations Act to the targeted performance included in that Act.

No later than September 1 of every even numbered year, HHSC shall provide a biennial report which:

- a. Includes a consolidated report for the preceding biennium, including a comparison of performance for any measure for which quarterly data are not available, and
- c. An analysis of the cost to meet any of the performance measures that were not met over the period.

Overview

Add a rider directing the Health and Human Services Commission to submit a state plan amendment for Medicaid patients with sickle cell disease.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Health Home for Medicaid Patients with Sickle Cell Disease.** Out of funds appropriated above in B.1.1, Medicaid & CHIP Contracts & Administration, the Health and Human Services Commission (HHSC) shall prepare and submit a Medicaid state plan amendment to the Centers for Medicare and Medicaid Services to provide coverage for health home services to persons who are diagnosed with sickle cell disease and are already enrolled in Medicaid. HHSC shall only prepare and submit the Medicaid state plan amendment if HHSC determines that the 10.0 percent state match General Revenue cost of providing health home services would be offset by reductions in other Medicaid spending.

Health and Human Services Commission
Proposed Rider
Institutions of Mental Disease exclusion Waiver

Prepared by LBB Staff, 02/13/2023

Overview

Add a rider to direct the Health and Human Services Commission to pursue an 1115 demonstration waiver to eliminate the institutions of mental disease exclusion to increase access to inpatient treatment for adults with severe mental illness.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____. **Institutions of Mental Disease Exclusion Waiver.** Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall prepare and submit an application to the Centers for Medicare and Medicaid Services (CMS) for approval of a Section 1115 Demonstration Waiver in order to receive federal financial participation for services furnished to Medicaid-eligible individuals in psychiatric hospitals or residential treatment settings that qualify as institutions of mental disease.

Health and Human Services Commission, Article II
Proposed Rider
Maternal Health Deserts Report

Prepared by LBB Staff, 03/04/2023

Overview

Nationwide, access to maternity care is worsening. 36% of counties constitute “maternity health deserts,” where no access to obstetric care is available. These deserts are particularly common in rural regions. Mothers and babies born in these maternal health deserts are at risk of worse health outcomes, including death. There is a need for the state to assess these deserts and regions where access to obstetric care is limited and provide recommendations.

Add a rider to direct HHSC to determine the prevalence of maternal health deserts, assess the impacts, and provide recommendations.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Maternal Health Deserts Report.** Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall study statewide access to maternity care. HHSC shall identify counties where access to maternity health care is absent or limited, provide detail on what services are provided, and make recommendations to improve access. In counties where access to maternity care is limited, HHSC shall assess the impact on maternal health outcomes and identify preventable outcomes related to severe maternal morbidity. HHSC shall include in their assessment the rate of maternal mortality and morbidity in counties with limited access to maternal care and make recommendations to reduce the prevalence of maternal mortality and morbidity within these counties. For the purposes of this study, a maternal health desert is any county with limited access to maternal care or is a county without a hospital, birth center, or clinic offering obstetric care or without any obstetric providers. Limited access to appropriate preventive, prenatal, and postpartum care is defined as a county with one or fewer hospitals or birth centers that provide obstetric care, few obstetric providers (fewer than 60 per 10,000 births), or a high proportion of women without health insurance (10 percent or more).

Not later than September 1, 2024, the commission shall submit a written report on their findings to the the Legislative Budget Board, the Governor’s Office, the Chair of the House Appropriations Committee, the Chair of the Senate Finance Committee, the Speaker of the House, the Lieutenant Governor, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services.

By: Orr

**Health and Human Services Commission
Uncompensated Trauma Care Report Rider**

Required Action

On page II-XXX of the Health and Human Services bill pattern, add the following new rider:

Report on Uncompensated Trauma Payments. Out of funds appropriated above, the Health and Human Services Commission shall issue a report on uncompensated trauma care provided throughout Texas. The report shall provide information on:

- a) the amount of funds hospitals receive through governmental entities for uncompensated trauma care; and
- b) payments received by physicians or physician groups for providing medical care to uninsured trauma patients.

HHSC shall submit report findings to the Senate Committee on Finance, the House Committee on Appropriations, the Legislative Budget Board, the Lieutenant Governor, the Speaker of the House, and the Office of the Governor by December 1, 2024.

**Health and Human Services Commission, Article II
State Hospital Cost Study**

Member Name: Rep. Ann Johnson

Affected Agency: The University of Texas Health Science Center at Houston and HHSC

Purpose: The following action directs a cost study by Health and Human Services Commission to study cost of providing inpatient care at mental health hospitals operated by the University of Texas Health Science Center at Houston to increase transparency and accountability in the rate setting process for state mental health hospital beds.

Required Action

On page II-XX of the Health and Human Services Commission’s bill pattern, add the following new rider:

Rider Language: The University of Texas Health Science Center at Houston shall submit annual operating cost data to Texas Health and Human Service commission for all state-contracted inpatient mental health hospital beds funded through Goal D: Additional Health-Related Services and Goal G: Facilities. HHSC shall analyze the data and issue a report to the Legislature by September 1, 2024, with recommendations for an appropriate bed rate to fully cover the cost of operating the inpatient beds.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Health and Human Services Commission, Article II
Proposed Rider
Study on Language Access Plan

Prepared by LBB Staff, 03/02/2023

Overview

Add rider to require the Health and Human Services Commission to evaluate the costs associated with developing a Language Access Plan.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Study on Language Access Plan.** Out of the funds appropriated above in Strategy L.1.1, HHS System Support, the Health and Human Services Commission (HHSC) shall evaluate the costs associated with developing a Language Access Plan (LAP) that is updated each biennium.

In conducting the evaluation, HHSC shall consider the costs and staffing required to implement the following:

- a. Translate and orally interpret (through multilingual staffers or vendors) all materials, forms, applications, portal application systems, and external communications into any language from a language group that has a population over 50,000 and is 33 percent Limited English Proficiency (LEP) per the latest American Community Survey/Census with at least the following languages: English; Spanish; Vietnamese; Korean; Traditional/Simplified Chinese (written); Mandarin/Cantonese (oral); and Arabic.
- b. Make available all translated materials on the HHSC website;
- c. Ensure equitable access to all services and rights related to language access by informing LEP communities of their rights, having translated public information and announcements viewable in public spaces, and conduct intentional outreach to LEP communities;
- d. Train HHSC staff members to adhere to LAP procedures and expectations; and
- e. Create quality control and accountability measures to ensure all translations and interpretations are of professional and understandable quality and gives LEP community members agency to evaluate LAP performance.

HHSC shall submit a report that includes findings and recommendations to the Office of the Governor, the Legislative Budget Board, and relevant committees in the House and Senate by September 1, 2024.

Adopted as Amended

By: Rep. Rose

Sec. XX. **Rates: Reimbursement for Federal Substance Abuse Prevention and Treatment Block Grant Services.** It is the intent of the Legislature that the Health and Human Services Commission (HHSC) shall evaluate the rate setting methodology for reimbursement of services reimbursable to grant recipients of the federal Substance Abuse Prevention and Treatment Block Grant (SABG) funds and shall propose reimbursement rates for these services no later than October 1, 2023 in a format that will enable HHSC to receive public comments on the proposed rates. HHSC shall consider the public comments as well as characteristics of the populations served, commercial and Medicaid reimbursement rates for similar services, and financial sustainability of reimbursement rates prior to adopting final rates.

**House Appropriations Committee
Riders - Article II**

Article XI

March 16, 2023

Legislative Budget Board

Department of Family and Protective Services
Proposed Funding and Rider
Family First Prevention Services

Prepared by LBB Staff, 03/01/2023

Overview

Direct the Department of Family and Protective Services to utilize funding for purposes related to the Family First Prevention Services Act.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$ ___ million in General Revenue and \$ ___ million in Federal Funds in each fiscal year of the 2024-25 biennium.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Family First Prevention Services.** Out of funds appropriated above in Strategy B.1.2, CPS Program Support, the Department of Family and Protective Services shall allocate \$ ___ million in General Revenue and \$ ___ million in Federal Funds in each fiscal year of the 2024-25 biennium for the following purposes:

- (a) Family First Prevention Services Act (FFPSA) prevention services coordinated through Child Protective Services, as described in House Bill 3041, the Eighty-seventh Legislature, Regular Session;
- (b) The transition of family-based safety services program to evidenced-based programs under FFPSA as described in Senate Bill 1896, Eighty-seventh Legislature, Regular Session;
- (c) Other evidence-based services that are eligible for a federal match through the Title IV-E Prevention Services Clearinghouse;
- (d) Services and interventions for children who are at imminent risk of entering foster care or their caregivers who:
 - (1) Receive Family-Based Safety Services;
 - (2) May be removed due to refusal to accept parental responsibility;
 - (3) Are at risk of being referred to DFPS by the juvenile justice system; or
 - (4) Exit foster care through reunification, adoption, or other post-permanency alternatives.
- (e) DFPS shall report on the progress of increasing the capacity of qualifying community-based prevention and family preservation services, including a full accounting of funds expended. The report shall be prepared in a format specified by the Legislative Budget Board and shall be submitted by March 31 and September 30 of each fiscal year of the biennium. The report shall be provided to the Legislative Budget Board, the Governor, the House Committee on Appropriations, the Senate Committee on Finance, the House Committee on Human Services, the Senate Committee on Health and Human Services, and any standing Joint Legislative Oversight Committees, as appropriate. The report shall also be posted on the agency's public webpage in order to ensure transparency with the public and stakeholders.

By: Rep. Capriglione

Department of Family and Protective Services
Proposed Funding and Rider
Community-based Care Incubator Funds

Overview

Direct the Department of Family and Protective Services to provide funds to Single Source Continuum Contactors once a Community-based Care contract has been awarded to reimburse for costs that incurred prior to the contract award.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$10,000,000 in General Revenue in the 2024-25 biennium.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____ . **Community-based Care Incubator Funds.** Out of funds appropriated above in Strategy B.1.1, CPS Direct Delivery Staff, the Department of Family and Protective Services, shall reimburse a lump sum in an amount no more than \$10,000,000 in General Revenue for the 2024-25 biennium, among Single Source Continuum Contactors once a Community-based Care contract has been awarded, for costs that incurred prior to the contract award, in an amount not to exceed \$2,000,000, per SSCC contract. This only applies to SSCC contracts entered into on or after September 1, 2023, and areas where community-based care is not implemented.

All unexpended balances appropriated above for this purpose in Strategy B.1.1, CPS Direct Delivery Staff, for the fiscal year ending August 31, 2024, are hereby appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Department of Family and Protective Services
Proposed Funding and Rider
Southeast Texas Children and Family Services

Prepared by LBB Staff, 03/02/2023

Overview

The proposed rider would direct the Department of Family and Protective Services to work with a non-profit organization to assist in the implementation of a demonstration project to provide services.

Required Action

1. On page II-XX of the Department of Family and Protective Services bill pattern, increase appropriations by \$3,000,000 in General Revenue in each fiscal year of the 2024-25 biennium.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____ . **Southeast Texas Children and Family Services.** Out of funds appropriated above in Strategy C.1.4, Other At-Risk Prevention Programs, the Department of Family and Protective Services (DFPS) shall allocate \$3,000,000 in General Revenue each fiscal year of the 2024-25 biennium to support a demonstration project providing comprehensive family strengthening services to families in Harris and Jefferson counties, including kinship and adoptive families.

DFPS shall use the funds to contract with a Texas-based nonprofit organization that has provided community-based child abuse prevention services in each of the two counties for at least 10 years to develop and support community hubs for family strengthening services.

Services provided will include assisting with basic needs, comprehensive case management, parenting education, financial and educational empowerment, youth development, individual and family counseling, support groups, and referrals to community partners for additional services including but not limited to substance abuse treatment, housing, healthcare, and legal assistance. The project will also engage faith communities, community-based organizations, primary and secondary schools, higher education institutions, vocational schools, businesses, and other private and public agencies to outreach to families and youth in need and to provide services and support to them.

Department of Family and Protective Services
Proposed Funding and Amend Rider
Texas Home Visiting Program and Nurse Family Partnership Program

Prepared by LBB Staff, 03/08/2023

Overview

This rider would provide additional funding to the Nurse-Family Partnership program.

Required Action

1. On page II-1 of the Department of Family and Protective Services bill pattern, increase appropriations by \$7,740,000 in General Revenue each fiscal year of the 2024-25 biennium.
2. On page II-18 of the Department of Family and Protective Services bill pattern amend the following rider:

38. **Texas Home Visiting Program and Nurse Family Partnership Program.**
Included in amounts appropriated above to the Department of Family and Protective Services in Strategy C.1.5, Home Visiting Programs, is:

- (a) \$294,319 in General Revenue Funds and \$17,509,136 in Federal Funds in each fiscal year for services in the Texas Home Visiting Program; and
- (b) ~~\$4,170,899~~\$11,910,899 in General Revenue Funds and \$14,865,549 in Federal Funds in each fiscal year for services in the Nurse Family Partnership Program. \$3,060,000 in Funds in each fiscal year shall be used for expansion of Nurse-Family Partnership services into currently unserved geographic areas of the state. \$4,680,000 in Funds in each fiscal year shall be used to ensure inflationary adjustments to program budgets to first bring salary line items to market rate and additionally provide adequate funding for other budget line items which should include but need not be limited to mileage for home visits, basic assistance for clients, funds for training and ongoing professional education for nurses.
- (c) Support costs for these programs are included in Strategy C.1.6, At-Risk Prevention Program Support, and are not included in subsections (a) through (b).

Department of Family and Protective Services
Proposed Funding and Rider
Comprehensive Child Welfare Information System Planning Funds

Prepared by LBB Staff, 03/07/2023

Overview

Direct the Department of Family and Protective Services to implement technology improvements to the agency's Information Management Protecting Adults and Children in Texas (IMPACT) system to prepare to move to a new system.

Required Action

1. On page II-1 of the Department of Family and Protective Services, increase appropriations by \$15,000,000 in American Rescue Plan Act of 2021 Federal Funds in fiscal year 2025.
2. On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____ . **Comprehensive Child Welfare Information System Planning Funds.** Out of funds appropriated above is \$15,000,000 in American Rescue Plan Act of 2021 Federal Funds in Strategy F.1.1, Agency-Wide Automated Systems, in fiscal year 2025, to implement technology improvements aimed at moving the current Information Management Protecting Adults and Children in Texas (IMPACT) system to a Comprehensive Child Welfare Information System.

Department of Family and Protective Services
Proposed Rider
Children Without Placement

Prepared by LBB Staff, 03/02/2023

Overview

Direct the Department of Family and Protective Services to create a caseload specific to children without placement and provide resources to caseworkers.

Required Action

On page II-XX of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Children Without Placement.** Out of funds appropriated above to the Department of Family and Protective Services (DFPS), the agency shall establish caseworkers within existing staff and resources to address caseloads specific to children without placement (CWOP). These CWOP caseworkers shall receive training specific to this population and addressing their needs. It is the intent of the legislature that DFPS pay a rate for CWOP that is able to address their needs.


Anna Howard

Department of State Health Services
Proposed Funding and Rider
Emergency Medical Task Force

Add funding and a new rider at the Department of State Health Services to direct the funds to the Emergency Medical Task Force (EMTF) program units and its State Coordinating Office to restore funding for the state's disaster emergency medical response capability.

The EMTF program acts as the state's disaster medical safety net – leveraging relationships with professional medical and EMS personnel from across the state to provide needed assistance when a local jurisdiction's medical and EMS personnel need augmentation or have been incapacitated or overwhelmed by a natural disaster or emergency. For instance, the EMTF provided critical, life-saving emergency services throughout the COVID-19 pandemic, in the aftermath of the Uvalde CISD shooting, Hurricane Harvey, and the recent tornado event in Deer Park. The program has depended on federal grant money to fund its ongoing activities and those funds have steadily decreased despite a steady increase in the activation of the EMTF units. Just like the state provides financial outlays to support Texas Task Force-1 and Texas Task Force-2 to act as the state's search and rescue safety net, this would provide similar stability to the emergency medical safety net.

Required Action

- 1) On page II-24 of the Department of State Health Services' bill pattern, increase appropriations in Strategy A.1.1, Public Health Preparedness, by \$7,400,000 in General Revenue Funds in fiscal year 2024 and in fiscal year 2025.
- 2) On page II-36 of the Department of State Health Services bill pattern, amend Rider 26 as follows:

Emergency Medical Task Force.

- (a) Out of the amounts appropriated above in Strategy A.1.1, Public Health Preparedness and Coordinated Services, the Department of State Health Services (DSHS) shall provide ~~\$1,000,000~~ \$3,000,000 in each fiscal year of the biennium out of General Revenue Funds to fund ongoing programs, exercises, and readiness for the Emergency Medical Task Force (EMTF).
- (b) Out of the amounts appropriated above in Strategy A.1.1, Public Health Preparedness and Coordinated Services, DSHS shall provide ~~\$250,000~~ \$700,000 in each fiscal year of the biennium out of General Revenue Funds to fund the management of the EMTF program.
- (c) Out of the amounts appropriated above in Strategy A.1.1, Public Health Preparedness and Coordinated Services, DSHS shall provide ~~\$1,250,000~~ \$2,500,000 in each fiscal year of the biennium out of General Revenue Funds for the replacement of critical emergency medical response equipment statewide, including specialized emergency medical vehicles, trailers, inflatable equipment, and durable medical equipment.

Overview

Add funding and a new rider at the Department of State Health Services to support the state’s 22 Regional Advisory Councils in managing regional emergency health care systems.

Required Action

1. On page II-24 of the Department of State Health Services bill pattern, increase appropriations in Strategy B.2.1, EMS and Trauma Care Systems, by \$7,000,000 in General Revenue in fiscal year 2024 and by \$7,000,000 in General Revenue in fiscal year 2025.

2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Regional Advisory Councils. Included in amounts appropriated above in Strategy B.2.1, EMS and Trauma Care Systems are the following amounts in General Revenue to be provided to Regional Advisory Councils:**

- (a) \$2,500,000 in each fiscal year of the biennium for outreach and education programs;

- (b) \$2,500,000 in each fiscal year of the biennium for mass casualty incident training; and

- (c) \$2,000,000 in each fiscal year of the biennium for data collection that will support quality improvement initiatives for better patient outcomes.

Department of State Health Services
Proposed Funding and Rider
Federally Qualified Health Centers

Prepared by LBB Staff, 03/08/2023

Overview

Add funding and a rider to the Department of State Health Services for federally qualified health centers (FQHCs).

Required Action

1. On Page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy B.2.2, Texas Primary Care Office, by \$100,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider.

_____ . **Federally Qualified Health Centers.** Out of funds appropriated above in Strategy B.2.2, Texas Primary Care Office, the Department of State Health Services shall expend \$100,000,000 in General Revenue each fiscal year for the following:

- (a) \$20,000,000 in each fiscal year to establish new or expand existing federally qualified health centers (FQHCs) and FQHC look-alikes. Grants provided shall expand sites, services, and capacity to existing FQHCs and support non-profit organizations seeking to become FQHCs for planning, grant writing, initial operating costs, and initial capital costs;
- (b) \$20,000,000 in each fiscal year to increase comprehensive primary and preventative women's health services provided at FQHCs;
- (c) \$20,000,000 in each fiscal year to increase the delivery of integrated primary and behavioral health care services at FQHCs;
- (d) \$20,000,000 in each fiscal year for grants to start-up or stabilize school-based health centers by existing FQHCs; and
- (e) \$20,000,000 in each fiscal year for comprehensive primary and preventative care services for uninsured Texans at FQHCs.

Any unexpended balances for the fiscal year ending on August 31, 2024, are appropriated to the agency for the same purposes for the fiscal year beginning in September 1, 2024. The Department of State Health Services may transfer funding between categories (a), (b), (c), (d) or (e) as referenced above as needed.

**Department of State Health Services
Proposed Funding and Rider
Perinatal Data System**

Prepared by LBB Staff, 02/27/2023

Overview

Increase funding and add a new rider at the Department of State Health Services (DSHS) for a perinatal data system.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy B.1.1, Maternal and Child Health, by \$5,000,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ **Perinatal Data System.** Included in the amounts appropriated above in Strategy B.1.1. Maternal and Child Health is \$5,000,000 in General Revenue in fiscal year 2024 for the Department of State Health Services (DSHS) to contract for an external perinatal data system to capture timely, patient-centric data for the improvement of perinatal care. It is the intent of the legislature that DSHS enter into a memorandum of understanding with the Texas Collaborative for Healthy Mothers and Babies to procure the data system, provide data system oversight, determine data elements included in the system in consultation with other perinatal stakeholders, and provide guidance on access to and use of data in the system by other entities. It is also the intent of the legislature that DSHS not use information obtained from the data system to limit reimbursements or for regulatory purposes.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024

**Department of State Health Services
Proposed Funding and Rider
Perinatal Data System**

Overview

Add funding and a new rider at the Department of State Health Services for a perinatal data system.

Required Actions

- 1) On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy B.1.1, Maternal and Child Health, by \$5,000,000 in General Revenue in fiscal year 2024.
- 2) On page II-XX of the Department of State Health Services bill pattern, add the following rider:

____. **Perinatal Data System.** Included in appropriations above in Strategy B.1.1, Maternal and Child Health, is \$5,000,000 in General Revenue in fiscal year 2024 for the Department of State Health Services (DSHS) to contract for a data system to capture timely, patient-centric data for the purpose of identifying areas for improvement in the delivery of perinatal care. The department shall enter into an interagency contract with University of Texas System for the purpose of establishing a perinatal data system to support the quality improvement efforts of the Texas Collaborative for Healthy Mothers and Babies. DSHS shall include in the contract sufficient parameters to enable the Collaborative, in consultation with stakeholders, to provide data system oversight, determine the data elements necessary to achieve its perinatal quality improvement objective, and provide guidance on access to and use of data in the system, consistent with state and federal law. Information obtained from the data system shall not be used by any entity to limit reimbursement or for regulatory purposes.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Overview

Add a new rider at the Department of State Health Services (DSHS) for implementation of a pilot program to expand sexually transmitted disease testing for Medicaid underinsured and uninsured patients.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Sexually Transmitted Disease Testing Pilot Program.** Out of funds appropriated above in Strategy A.2.2, HIV/STD Prevention, the Department of State Health Services (DSHS) shall encourage Medicaid managed care plans to coordinate existing resources and contractors to address barriers to improve health outcomes and reduce costs. Activities shall include expanding HIV/STD testing and prevention. DSHS shall develop a comprehensive pilot program to outsource the HIV/STD testing program in high population centers, as well as prenatal care and screenings. In soliciting bids from managed care organizations, the agency shall submit such a plan as part of the Request for Proposal (RFP) process.

DSHS, in consultation with stakeholders, shall submit a report with results of the Sexually Transmitted Disease Testing Pilot program to the Legislature and the Governor no later than December 1, 2024.

Overview

Increase funding and add a rider at the Health and Human Services Commission to increase attendance and achievement of pre-kindergarten and elementary school students and increasing the engagement of parents of pre-kindergarten and elementary school students through the provision of winter clothing to children at low-income schools or participating in Head Start or Medicaid and CHIP programs to increase attendance and participation.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, by \$400,000 in General Revenue each fiscal year.

2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

- _____ . **Match for Private Sector Investment in Incentives for Attendance and Parent Engagement.** Included in amounts appropriated above in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, is \$400,000 in General Revenue each fiscal year, contingent upon the provision of private sector cash or in-kind match equal to state investment, to make funding available for the purchase and distribution of coats and shoes to pre-kindergarten and elementary school students at public or public charter schools for the purpose of increasing parent engagement and incentivizing student attendance and achievement.

By: Rep. Zwiener

Health and Human Services Commission, Article II
Proposed Rider
Fentanyl Education

Prepared by LBB Staff, 03/08/2023

Overview

Add funding and a rider to raise awareness of fentanyl contamination.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.4, Substance Abuse Services, by \$500,000 in General Revenue in fiscal year 2024 and \$100,000 in General Revenue in fiscal year 2025.

2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Fentanyl Education.** Out of funds appropriated above in Strategy D.2.4, Substance Abuse Services, the Health and Human Services Commission is allocated \$500,000 in General Revenue in fiscal year 2024 and \$100,000 in General Revenue in fiscal year 2025 to coordinate with the Texas Education Agency Regional Services Centers to develop evidence-based educational programming on the dangers of fentanyl contamination and distribute the materials to the Regional Service Centers.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Funding for Attendant Wages

Overview

Increase funding and add a rider to raise the minimum wage for community attendant services from \$8.11 to \$12.00.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Goal A, Medicaid Client Services by is \$1,146,393,602 in General Revenue and \$1,799,004,854 in Federal Funds (\$2,945,398,456 in All Funds) for the biennium.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Information on Funding for Attendant Wages.** Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) is \$1,146,393,602 in General Revenue and \$1,799,004,854 in Federal Funds (\$2,945,398,456 in All Funds) for an increase in the base wage for community attendant services to \$12.00 per hour for the 2024-25 biennium.

Notwithstanding the limitations in Rider 98, Limitations on Transfer Authority, subsection (a)(1)(A) regarding transfers from strategies in Goal A, Medicaid Client Services, to strategies in other goals, HHSC may transfer funds appropriated for attendant wages in Goal A, Medicaid Client Services, to Strategy F.1.2, Non-Medicaid Services, in each year of the biennium to increase the base wage for community attendants.

Overview

Add funding and rider to require the Health and Human Services Commission to create and execute a Language Access Plan.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy L.1.1, HHS System Supports, by \$5,000,000 in General Revenue in fiscal year 2024 and by \$5,000,000 in General Revenue in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Language Access Plan.** Included in amounts appropriated above in Strategy L.1.1, HHS System Supports, is \$5,000,000 in General Revenue Funds in fiscal year 2024 and \$5,000,000 in fiscal year 2025 for the purpose of developing and implementing a Language Access Program to translate and orally interpret all materials, forms, applications, portal application systems, and external communications into any language from a language group that has a population over 50,000 and is 33 percent Limited English Proficiency per the latest American Community Survey/Census.

Any unexpended and unobligated balances remaining as of August 31, 2024, are appropriated for the same purposes for the fiscal year beginning September 1, 2025.

Health and Human Services Commission, Article II
Proposed Rider
Stroke Treatment and Response

Prepared by LBB Staff, 03/07/2023

Overview

Provide funding to the Health and Human Services Commission in fiscal year 2024 and fiscal year 2025 to provide grant funding for mobile stroke units.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$5,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Stroke Treatment and Response.** Included in amounts appropriated above in Strategy D.1.10, Additional Specialty Care, is \$5,000,000 in General Revenue in each fiscal year for the Health and Human Services Commission to provide grant funding for services provided by mobile stroke units.

Health and Human Services Commission, Article II
Proposed Rider
Stroke Treatment and Response

Prepared by LBB Staff, 03/07/2023

Overview

Provide funding to the Health and Human Services Commission in fiscal year 2024 and fiscal year 2025 to provide grant funding for mobile stroke units.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$5,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Stroke Treatment and Response.** Included in amounts appropriated above in Strategy D.1.10, Additional Specialty Care, is \$5,000,000 in General Revenue in each fiscal year for the Health and Human Services Commission to provide grant funding for services provided by mobile stroke units.

By: Rep. Zwiener

Health and Human Services Commission, Article II
Proposed Rider
Fentanyl Informational Campaign

Prepared by LBB Staff, 03/08/2023

Overview

Add funding and a rider to raise awareness of fentanyl contamination.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.4, Substance Abuse Services, by \$5,500,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Fentanyl Informational Campaign. Out of funds appropriated above in Strategy D.2.4, Substance Abuse Services, the Health and Human Services Commission is allocated \$5,500,000 in General Revenue in each fiscal to develop and implement an evidence-based public informational media campaign based on the dangers of fentanyl contamination.

Overview

Add a rider to appropriate an additional \$12.0 million in the biennium to the Health and Human Services Commission to increase funding for the Supported Housing Rental Assistance Program.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Services (MHS) for Adults, by \$6,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____. **Supportive Housing Rental Assistance Program.** Out of funds appropriated above in Strategy D.2.1, Community Mental Health Services (MHS) for Adults, the Health and Human Services Commission shall expend \$6,000,000 in General Revenue each fiscal year to expand the Supportive Housing Rental Assistance Program.

Health and Human Services Commission
Proposed Rider
Sunrise Canyon Community Hospital Bed-Day Rate

Prepared by LBB Staff, 02/28/2023

Overview

Increase funding and add a rider to set the bed-day rate for Sunrise Canyon Community Hospital at a rate equivalent to or greater than the maximum bed-day rate established by HHSC to fund Local Mental Health Authorities to purchase local community psychiatric inpatient services (currently \$700 per day).

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals, by \$7,655,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **Sunrise Canyon Community Hospital Bed-Day Rate.** The Health and Human Services Commission (HHSC) shall set the bed-day rate used to calculate Sunrise Canyon Community Hospital's General Revenue allocation at a rate equivalent to or greater than the maximum bed-day rate established by HHSC to fund Local Mental Health Authorities to purchase local community psychiatric inpatient services. Out of funds appropriated above in Strategy G.2.2, Mental Health Community Hospitals, HHSC shall allocate an amount not less than \$7,655,000 in General Revenue in each fiscal year to fund Sunrise Canyon Community Hospital at the set rate.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Tarrant County State Hospital Planning Funding

Prepared by LBB Staff, 03/04/2023

Overview

Add funding and amend rider Informational Listing: Additional Mental Health Funding for the planning of a new state hospital in Tarrant County.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.4.2, Facility Capital Repairs and Renovation, by \$15,500,000 in General Revenue in fiscal year 2024.
2. On Page II-XX of the Health and Human Services Commission bill pattern, amend Rider 2, Capital Budget, to provide capital budget authority of \$15,500,000 in General Revenue for planning of a new state hospital in the Tarrant County area.
3. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

Informational Listing: Additional Mental Health Funding. Appropriations above for the Health and Human Services Commission (HHSC) include the following amounts in General Revenue:

(a) **HHSC Frontline Staff.**

- (1) **Salary Increases.** \$70,665,925 in fiscal year 2024 and \$70,662,295 in fiscal year 2025 in Strategy G.1.1, State Supported Living Centers, and \$47,473,261 in each fiscal year in Strategy G.2.1, Mental Health State Hospitals, to maintain salary increases for frontline staff at HHSC facilities.

(b) **Expansion of Community Inpatient Beds.**

- (1) **State Hospital Contracted Beds.** \$10,200,000 in each fiscal year in Strategy G.2.1, Mental Health State Hospitals, to expand contracted bed capacity by 40 beds.
- (2) **Purchased Psychiatric Beds.** \$126,000,000 in each fiscal year in Strategy G.2.2, Mental Health Community Hospitals, to maintain existing capacity and for 234 additional state-purchased inpatient psychiatric beds, including 85 beds in rural communities and 149 beds in urban communities.
- (3) **Inpatient Capacity Expansion.** \$29,500,000 in each fiscal year in Strategy G.2.2, Mental Health Community Hospitals, to contract for an additional 150 competency restoration beds.

(c) **Step-down Housing and State Hospital Transitions.**

- (1) **State Hospital Transition Teams.** \$2,500,000 in each fiscal year in Strategy G.2.1, Mental Health State Hospitals, to establish state hospital transition teams to support individuals statewide who are at risk of state hospital readmission by providing coordination and support to address mental health needs in the community.
- (2) **Step-Down Housing Expansion.** \$8,500,000 in each fiscal year in Strategy

D.2.1, Community Mental Health Services (MHS) for Adults, to expand step-down housing programs statewide to identify, assess, and transition patients with acute mental health and/or medical needs from hospitals to community settings with appropriate supports.

(d) **Crisis Services.**

- (1) **Crisis Stabilization Units.** \$18,000,000 in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Services (CMHCS), to fund six additional crisis stabilization units to provide a short-term alternative to hospital admission to reduce acute symptoms of mental illness.
- (2) **Crisis Respite Units for Youth.** \$5,750,000 in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Services (CMHCS), to fund four additional crisis respite units that serve youth and to pilot three peer-run units.
- (3) **Youth Mobile Crisis Outreach Teams.** \$4,000,000 in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Services (CMHCS), to establish youth mobile crisis outreach teams to reduce the risk of hospitalization from acute mental health illness and transition youth into care.

(e) **Expansion of Programs for High-Risk Children.**

- (1) **Multisystemic Therapy.** \$15,225,000 in each fiscal year in Strategy D.2.1, Community Mental Health Services (MHS) for Adults, to expand multisystemic therapy, which provides community-based treatment for at-risk youth with intensive needs and their families.
- (2) **Coordinated Specialty Care.** \$2,100,000 in each fiscal year in Strategy D.2.1, Community Mental Health Services (MHS) for Adults, to expand coordinated specialty care, which provides outpatient behavioral health services to persons experiencing an early onset of psychosis.
- (3) **Mental Health Services for the Uvalde Community.** \$5,000,000 in each fiscal year in Strategy D.2.1, Community Mental Health Services (MHS) for Adults, to partner with the Hill Country Local Mental Health Authority to provide ongoing mental health services support for the Uvalde community.

(f) **Tarrant County State Hospital.** \$15,500,000 in fiscal year 2024 in Strategy G.4.2, Facility Capital Repairs and Renovation, for the planning of a new state hospital in the Tarrant County area. Notwithstanding the limitations in Rider 98, Limitations on Transfer Authority; Article IX, Section 14.01, Appropriation Transfers; and Article IX, Section 14.03, Transfers – Capital Budget, HHSC may:

- (1) transfer unexpended and unobligated funding listed in Subsection (a) of this rider to Strategy G.4.2, Facility Capital Repairs and Renovations, for land acquisition and construction of a new state hospital in the Tarrant County area; and
- (2) transfer unexpended and unobligated funding from other state hospital construction capital projects in Strategy G.4.2, Facility Capital Repairs and Renovation, into the capital project for land acquisition and construction of a new state hospital in the Tarrant County area.

By: _____ Representative Bucy _____

Health and Human Services Commission, Article II
Proposed Motion and Rider

Overview

Appropriates \$15,000,000 in General Revenue funds and allocates those funds to provide funding to entities participating in the Community Partners Program to reduce the burden on state HHSC eligibility workers and aid families in benefit enrollment.

Required Action

- 1) Make the following adjustments to the bill pattern for the Health and Human Services Commission:
 - a. Add General Revenue appropriations on page II-42 for Strategy I.1.1., Integrated Eligibility and Enrollment in the amount of \$15,000,000 in fiscal year 2024;
 - b. Increase General Revenue in the Method of Finance table by \$15,000,000 in each fiscal year 2024 on page II-39.

- 2) Add the following new rider:

Rider ____ . Community Partner Program. (a) Out of amounts appropriated above, the Health and Human Services Commission (HHSC) is appropriated \$15,000,000 from the General Revenue Fund for the 2024-25 fiscal biennium to provide grants to entities participating in the Community Partner Program to do outreach in communities, especially rural areas, to provide information to families about health insurance options and food benefits, and to help families apply for and renew benefits.

(b) It is the intent of the legislature that HHSC prioritize allocating funding to entities who are Level 3 Community Partners or have participated in the Community Partner Program prior to January 2023.

By: Rose

***Health and Human Services Commission, Article II
Rate Review for Intermediate Care Facilities and Certain Waivers***

Overview

Multiple states are moving towards utilization of a modeled rate structure for IDD programs and services because of the unique cost structures and factors that exist when Medicaid is the sole payer for these services.

Required Action

On page II-XXX of the Health and Human Services Commission's bill pattern, add the following new rider:

In addition to the amounts appropriated above in Goal L.1.1 HHS System Supports, is \$500,000 in General Revenue Funds, and \$500,000 in Federal Funds in Fiscal Year 2024, for the Health and Human Services Commission (HHSC) to produce a report no later than June 1, 2024 that analyzes and recommends policy and regulatory requirements for the delivery of client services in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), Strategy A.3.1. Home and Community-based Services (HCS) and Strategy A.3.4. Texas Home Living Waiver, and models the appropriate level of reimbursement rates necessary to comply with those policy and regulatory requirements.

Page 1 of 2

(a) The report shall be an analysis conducted by a third party with experience in developing home and community-based services reimbursement models, and utilize provider expenditure, claims and accounting data; regulatory and programmatic requirements; occupancy and utilization rates; client acuity; staffing ratios, qualifications and training requirements; relevant inflationary factors; minimum wage requirements, wage compression, and other reliable state and federal data to develop a component-based model of reimbursement.

(ii) HHSC may not expend funds appropriated under in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), Strategy A.3.1. Home and Community-based Services (HCS) and Strategy A.3.4. Texas Home Living Waiver, to any provider selected to achieve a statistically valid sample who has not complied with submitting data required under this section.

Page 2 of 2

RIDER REQUEST

Member Name: Representative Julie Johnson

Affected Agency: Health & Human Services Commission, Article II

Purpose: To strengthen Texas' role in supporting breakthrough therapies to meet the growing Veteran mental health and suicide crisis, an expansion of the clinical trial established in 87r HB 1802 is proposed that would provide for a concurrent clinical trial on the use of 3,4-Methylenedioxymethamphetamine (MDMA) in the treatment of PTSD in Veterans. The trial would follow the same contracting and regulatory structure established in HB 1802 and would be subject to the same reporting requirements with an extended reporting deadline of December 1, 2025

Amount Requested (if applicable): \$ 2,100,000 for the biennium

Method of Finance (if applicable): Article II - Strategy D.2.1

Rider Language:

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Svcs - Adults, by \$2,100,000 in General Revenue fiscal year 2024.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. Alternative Therapeutics Clinical Trial. Included in amounts appropriated above in Strategy D.2.1, Community Mental Health Svcs - Adults, is \$2,100,000 in General Revenue in fiscal year 2024 for the Health and Human Services Commission (HHSC) for the purpose of expanding the existing clinical trial structure established under House Bill 1802, Eighty-seventh Legislature, to provide a concurrent trial using 3,4-Methylenedioxymethamphetamine (MDMA) for the treatment of Veteran post-traumatic stress disorder. Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium are appropriated for the same purposes for the second fiscal year of the biennium.

By Rose

Health and Human Services Commission, Article II
Proposed Funding and Rider
211 Texas Information and Referral Network

Overview

The following action adds a new rider that directs \$2.3 million for each year of the biennium for increased 211 call center staffing and operations and implementation of technology and communication enhancements.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following new rider :

_____ . **211 Texas Information and Referral Network.** Out of funds appropriated above in Strategy I.1.1 Integrated Eligibility and Enrollment, \$2.3 million for each year of the biennium shall be appropriated for the 211 Texas Information and Referral Network (TIRN) to fully maximize and leverage 211's capabilities statewide

From that amount, at least \$1.1 million each fiscal year shall be allocated directly to Area Information Centers (AICs) to support increased call center staffing and operations, and \$300,000 each year of the biennium shall be allocated to HHSC to maintain staffing levels at fiscal years 2021 and 2022 levels and to support efficiencies and innovation of the TIRN network. Additionally, \$900,000 each year of the biennium is allocated to implement technology and communication enhancements, including texting, enhanced taxonomy and search functions for 211 Texas resource database, and two-way Application Programming Interface (API) for multidirectional communications and other measures required by national accreditation standards and designed to better connect specialized populations with available state and local services, including Texans impacted by disasters, pregnant women on Medicaid, veterans, and families with young children. Any funds unused for technology improvements shall go directly to AICs for operational support.

The commission shall submit a biennial report to the legislature, no later than December 1, 2024 regarding the operations of the TIRN, including the effectiveness of the network and any improvements made to the network, during the preceding two state fiscal years as well as the existing needs and gaps in services in communities in this state that could be addressed through additional improvements to the network.

Overview

Add funding and a rider to provide a rate increase from \$5.31 per meal to \$7.00 per meal to the Title XX Home-Delivered Meal program.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy F.1.2, Non-Medicaid Services, by \$10,000,000 in General Revenue in each fiscal year.

2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Home-Delivered Meals.** Out of funds appropriated above in Strategy F.1.2, Non-Medicaid Services, the Health and Human Services Commission shall expend \$10,000,000 in General Revenue each fiscal year to increase the rate in the Title XX Home-Delivered Meals program for nutrition services to older individuals and people with disabilities who are not yet eligible for Medicaid.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Home-Delivered Meals

Prepared by LBB Staff, 03/04/2023

Overview

Add funding and a rider to provide a rate increase from \$5.31 per meal to \$7.00 per meal for the Home-Delivered Meal program.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy F.1.2, Non-Medicaid Services, by \$10,500,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Home-Delivered Meals.** Out of funds appropriated above in Strategy F.1.2, Non-Medicaid Services, the Health and Human Services Commission shall expend \$10,500,000 in General Revenue each fiscal year to increase the rate per meal in the Home-Delivered Meals program.

RIDER REQUEST

Member Name: Allison

Affected Agency: Bexar County

Purpose: Lease and reuse of the San Antonio State Hospital Alamo Hall facility

Amount Requested (if applicable): \$25 million per biennium; new general revenue request

Method of Finance (if applicable): [Click here to enter text.](#)

Rider Language:

Bexar County is experiencing an unprecedented and ever-increasing number of individuals found incompetent to stand trial, and whom are being held in the County's Adult Detention Center because they are awaiting transfer to a Health and Human Services operated facility for competency restoration. Individuals who are in county jails, awaiting competency restoration, are not fully addressing their mental health issues and their victims and victims' families are delayed in addressing justice.

According to December 2022 data from HHS' Joint Committee on Access and Forensic Services, there were 2,545 individuals waiting for forensic beds/competency restoration throughout Texas. As of January 2023, there were 288 individuals in the County's ADC: the cost to-date to Bexar County taxpayers is over \$25 million, which includes 44 individuals who have been waiting 50 I days for a forensic bed.

In November 2022, University Health (Bexar County Hospital District) released a study conducted by the Meadows Mental Health Policy Institute, to illustrate the number of individuals in the County's ADC, who were awaiting a state maximum security bed for competency restoration. Meadows found there were 250 individuals on the waitlist who required a state maximum security bed.

During the 86th (2017) and 87th(2019) Texas Legislative sessions, over \$325 million was included to build a new state hospital facility in Bexar County. Additionally, in 2022 HHS remodeled the Alamo Hall facility on the SASH campus, where 40 mental health beds are

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currently located. With the new facility scheduled to open in 2024, these mental health beds will be vacated.

The COVID-19 pandemic exasperated the number of those waiting, and time on the waitlist for both maximum and non-maximum security beds statewide: in doing so, it also highlighted the need for Bexar County to find solutions to address the situation. Therefore, as an alternative to detaining individuals in the County's ADC, and to address this community crisis, Bexar County is seeking to partner with HHS. During the 86th (2017) and 87th(2019) Texas Legislative sessions, over \$325 million was included to build a new state hospital facility in Bexar County. Additionally, in 2022 HHS remodeled the Alamo Hall facility on the SASH campus, where 40 mental health beds are currently located. With the new facility scheduled to open in 2024, these mental health beds will be vacated.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

RIDER REQUEST

Member Name: Allison

Affected Agency: Article II, Health and Human Services Commission

Purpose: Increase funding and add a rider at the Health and Human Services Commission to increase reimbursement for Medicaid therapy services provided to children by home health agencies under Texas Health Steps, Comprehensive Care Program.

Amount Requested (if applicable): Increase appropriations in Goal A, Medicaid Client Services, by \$26,413,525 in General Revenue, and \$39,628,542 Federal Funds (\$66,042,067 All Funds) for the biennium.

Method of Finance (if applicable): General Revenue

Rider Language: On page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Goal A, Medicaid Client Services, by \$26,413,525 in General Revenue, and \$39,628,542 Federal Funds (\$66,042,067 All Funds) for the biennium. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider: Funding for Medical Therapy Services for Children. Included in the amounts appropriated above in Goal A, Medicaid Client Services, is \$13,165,486 in General Revenue and \$19,855,547 in Federal Funds for fiscal year 2024 and \$13,165,486 in General Revenue and \$19,722,995 in Federal Funds for fiscal year 2025 for the Health and Human Services Commission to Increase reimbursement for Medicaid therapy services provided to children by licensed Home and Community Support Services Agencies. Medicaid Provider Rates Increases. It is the intent of the Legislature that, when Medicaid provider rates are increased as a result of a legislative appropriation funds to providers, to the extent allowed by federal laws and regulations.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Overview

Increase appropriations and add a rider directing the Health and Human Services Commission provide Medicaid reimbursement for crisis respite services.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.5, Children, by \$1,000,000 in General Revenue in fiscal year 2024 and \$1,000,000 in General Revenue in fiscal year 2025 for Medicaid reimbursement for crisis respite services.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Crisis Respite Services. Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.5, Children, is \$1,000,000 in General Revenue in fiscal year 2024 and \$1,000,000 in General Revenue in fiscal year 2025 to provide Medicaid reimbursement for crisis respite services to treat behavioral health issues. It is the intent of the legislature that HHSC implement these services as soon as practicable.**

By: Rep. Howard

Health and Human Services Commission, Article II
Proposed Funding and Rider
Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities
Prepared by LBB Staff, 02/13/2023

Overview

Add a rider to appropriate an additional \$10,100,000 in General Revenue Funds to the Health and Human Services Commission for Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), by \$1,800,000 in General Revenue Funds in each fiscal year.
2. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.3.1, Home and Community-based Services, by \$3,250,000 in General Revenue Funds in each fiscal year.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities (IDD).** Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) are the following amounts to provide access to emergent and urgent clinical and care coordination services via telemedicine by board certified emergency room physicians who have specialized IDD training:

- (a) \$1,800,000 in General Revenue Funds in each fiscal year in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID); and
- (b) \$3,250,000 in General Revenue Funds in each fiscal year in Strategy A.3.1, Home and Community-based Services.

These services would be limited to individuals receiving residential services through the Home and Community-based Services (HCS) program. The services shall be evidence-based and aim to improve health outcomes for the IDD population by reducing unnecessary emergency room visits and treating individuals in place. Services provided under this rider must show cost-savings as prescribed by Rider 21, Health and Human Services Cost Containment, and reported to the Legislative Budget Board.

4. On page II-61 of the Health and Human Services Commission bill pattern, amend Rider 21, Health and Human Services Cost Containment as outlined below:

_____ **Health and Human Services Cost Containment.** It is the intent of the Legislature Health and Human Services Commission (HHSC) shall develop and implement cost containment initiatives to achieve savings of at least \$350,000,000 in General Revenue Funds for the 2024-25 biennium throughout the health and human services system. These initiatives shall include:

- (a) increasing fraud, waste, and abuse prevention and detection;
- (b) seeking to maximize federal flexibility under the Medicaid program in compliance with Government Code, Chapter 537;
- (c) achieving other programmatic and administrative efficiencies; and
- (d) savings from services identified in Rider XX, Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

HHSC shall provide an annual report on the implementation of cost containment initiatives to the Legislative Budget Board by December 1. It is the intent of the legislature that HHSC shall achieve savings without adjusting amount, scope, or duration of services or otherwise negatively impacting access to care. It is the intent of the legislature that prior to making any changes, HHSC shall consider stakeholder input, including complying with any statutory requirements related to rulemaking and public hearings. This rider shall not be construed as limiting HHSC's ability to maximize federal flexibility under the Medicaid program, including federal flexibility that may impact amount, scope, or duration of services.

By: Representative Rose

Health and Human Services Commission, Article II
Proposed Funding and Rider
Emergency Telemedicine Services for Individuals with Intellectual and Developmental
Disabilities

Prepared by LBB Staff, 02/13/2023

Overview

Add a rider to appropriate an additional \$10,100,000 in General Revenue Funds to the Health and Human Services Commission for Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), by \$1,800,000 in General Revenue Funds in each fiscal year.
2. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.3.1, Home and Community-based Services, by \$3,250,000 in General Revenue Funds in each fiscal year.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities (IDD).** Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) are the following amounts to provide access to emergent and urgent clinical and care coordination services via telemedicine by board certified emergency room physicians who have specialized IDD training:

- (a) \$1,800,000 in General Revenue Funds in each fiscal year in Strategy A.2.7, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID); and
- (b) \$3,250,000 in General Revenue Funds in each fiscal year in Strategy A.3.1, Home and Community-based Services.

These services would be limited to individuals receiving residential services through the Home and Community-based Services (HCS) program. The services shall be evidence-based and aim to improve health outcomes for the IDD population by reducing unnecessary emergency room visits and treating individuals in place. Services provided under this rider must show cost-savings as prescribed by Rider 21, Health and Human Services Cost Containment, and reported to the Legislative Budget Board.

4. On page II-61 of the Health and Human Services Commission bill pattern, amend Rider 21, Health and Human Services Cost Containment as outlined below:

_____ **Health and Human Services Cost Containment.** It is the intent of the Legislature Health and Human Services Commission (HHSC) shall develop and implement cost containment initiatives to achieve savings of at least \$350,000,000 in General Revenue Funds for the 2024-25 biennium throughout the health and human services system. These initiatives shall include:

- (a) increasing fraud, waste, and abuse prevention and detection;
- (b) seeking to maximize federal flexibility under the Medicaid program in compliance with Government Code, Chapter 537;
- (c) achieving other programmatic and administrative efficiencies; and
- (d) savings from services identified in Rider XX, Emergency Telemedicine Services for Individuals with Intellectual and Developmental Disabilities.

HHSC shall provide an annual report on the implementation of cost containment initiatives to the Legislative Budget Board by December 1. It is the intent of the legislature that HHSC shall achieve savings without adjusting amount, scope, or duration of services or otherwise negatively impacting access to care. It is the intent of the legislature that prior to making any changes, HHSC shall consider stakeholder input, including complying with any statutory requirements related to rulemaking and public hearings. This rider shall not be construed as limiting HHSC's ability to maximize federal flexibility under the Medicaid program, including federal flexibility that may impact amount, scope, or duration of services.

RIDER REQUEST

Member Name: Rep. Geanie Morrison

Affected Agency: Health and Human Services Commission

Purpose:

Amount Requested (if applicable): \$1,950,000

Method of Finance (if applicable): [Click here to enter text.](#)

Rider Language: Included in amounts appropriated above to the Health and Human Services Commission in B.1.1, Medicaid & CHIP Contracts & Administration, is \$1,950,000 in General Revenue in each fiscal year for the implementation and maintenance of a modernized electronic governance system to support corporate and employee governance, risk management, claims integrity, and cyber security for rural hospitals in the state. Rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA. No reimbursement may exceed the hospital specific limit and reimbursement for outpatient emergency department services that do not qualify as emergency visits may not exceed 65 percent of cost.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

RIDER REQUEST

Member Name: Allison

Affected Agency: Bexar County

Purpose: Construction of a state-of-the-art Center for Imaging and Innovation (CII) on the San Antonio campus of Texas Biomed.

Amount Requested (if applicable): \$30.2 million one time request

Method of Finance (if applicable): [Click here to enter text.](#)

Rider Language:

Requesting a one-time \$30.2 million appropriation from the State of Texas for construction of a state-of-the-art Center for Imaging and Innovation (CI!) on the San Antonio campus of Texas Biomed. This center will be a unique resource in Texas, housed at the State's only national primate research center.

The CII is part of Texas Biomed's 10-year strategic plan, with goals to create the leading infectious disease institute, bringing scientists and jobs to Texas and fostering technology transfer to support statewide, national and international research. At an estimated cost of approximately \$300 million being achieved through Institute and philanthropic support, the institute's strategic plan is expected to generate a more than \$3 billion economic impact (Economic Impact Analysis completed in 2019 by Dr. Steve Nivin, on behalf of the City of San Antonio, is available upon request). This Center will help secure Texas' place as the national leader in combatting infectious diseases and other related inflammatory disorders.

Scientists at Texas Biomed and the Southwest National Primate Research Center (SNPRC) have already made a local and global impact as part of the COVID-19 scientific response through extensive testing of the Pfizer/BioNTech and Novavax vaccines, and the Regeneron monoclonal antibody cocktail in primates at the SN PRC, thereby accelerating their advancement to human clinical trials. Simultaneously, Texas Biomed continues its trailblazing science, developing new approaches to combat a variety of infectious disease threats, both natural and bioterror in nature, such as Ebola, tuberculosis, HIV, malaria and more. In fact, just last year, Texas Bio med became the state's only prime contractor for the Department of HHS Biomedical Advanced Research and Development Authority (BARDA), a federal agency that protects against pandemics and bioterrorism.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Support for the CII would clearly strengthen Texas' public health response to infectious diseases, including preparedness and response to future pandemics and bioterror threats. A significant advance in science has been the development of sensitive new instrumentation that greatly enhances the scientist's ability to measure in-life disease and discover new approaches for diagnostic testing as well as the ability to effectively monitor new potential therapies and vaccines. Current capabilities are, however, limited in scope and availability. Thus, Texas Biomed is requesting that the State invest in one-time costs to establish the nation's best Center for Imaging and Innovation.

The CII will enhance life-saving research, further collaboration among researchers around our State and attract investments from research companies and foundations. Importantly, it would enhance the humane and ethical treatment of animals used in research and reduce the number required. The amount of the request (one-time, non-recurring) is modest, but it would have an outsized impact on life-saving research in our State.

Texas Biomed, founded in 1941, is a San Antonio-based, independent, not-for-profit biomedical research institute with a strong history of pioneering biomedical breakthroughs in science and human health. The Institute has been a powerful tool in the State's war chest against infectious diseases, and we are seeking funding to ensure we continue sharpening this tool. We appreciate your consideration of the request to fund this important project.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Overview

Increase funding by \$15,650,000 in General Revenue and \$20,750,000 in Federal Funds (\$36,400,000 in All Funds) in each fiscal year at the Health and Human Services Commission (HHSC) to increase reimbursement for Medicaid services provided by rural hospitals. Amend HHSC Rider 8, Hospital Payments, Sections (c) and (d), to identify appropriations for this purpose.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.1, Aged and Medicare-Related, by \$15,650,000 in General Revenue and \$20,750,000 in Federal Funds (\$36,400,000 in All Funds) in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

- _____ . **Hospital Payments.** Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategies in Goal A, Medicaid Client Services, is ~~\$112,399,393~~\$128,049,393 in General Revenue Funds, \$72,586,320 in Interagency Contracts, and ~~\$278,870,136~~\$299,620,136 in Federal Funds (~~\$463,855,849~~\$500,255,849 in All Funds) in fiscal year 2024 and ~~\$116,333,409~~\$131,983,409 in General Revenue Funds, \$72,250,499 in Interagency Contracts, and ~~\$281,465,713~~\$302,215,713 in Federal Funds (~~\$470,049,621~~\$506,449,621 in All Funds) in fiscal year 2025 to provide Medicaid hospital add-on payments for trauma care and safety-net hospitals and add-on payments and rate increases for rural hospitals as follows:
- (a) \$71,784,000 in Interagency Contracts and \$108,216,000 in Federal Funds in fiscal year 2024 and \$72,216,000 in Interagency Contracts and \$107,784,000 in Federal Funds in fiscal year 2025 for trauma care;
 - (b) \$59,017,680 in General Revenue Funds, \$802,320 in Interagency Contracts, and \$90,180,000 in Federal Funds in fiscal year 2024 and \$60,145,501 in General Revenue Funds, \$34,499 in Interagency Contracts, and \$89,820,000 in Federal Funds in fiscal year 2025 for safety-net hospitals;
 - (c) ~~\$11,964,000~~XX in General Revenue Funds and ~~\$18,036,000~~XX in Federal Funds in fiscal year 2024 and ~~\$12,036,000~~XX in General Revenue Funds and ~~\$17,964,000~~XX in Federal Funds in fiscal year 2025 for rural hospitals to maintain increases and add-ons related to general outpatient reimbursement rates, outpatient emergency department services that do not qualify as emergency visits, the outpatient hospital imaging services fee schedule, and the outpatient clinical laboratory services fee schedule;
 - (d) ~~\$11,644,960~~XX in General Revenue Funds and ~~\$17,555,040~~XX in Federal Funds in fiscal year 2024 and ~~\$13,440,200~~XX in General Revenue Funds and ~~\$20,059,800~~XX in Federal Funds in fiscal year 2025 for rural hospitals to maintain inpatient rates trended forward from 2013 to 2020 using an inflationary factor;
 - (e) \$5,446,155 in General Revenue Funds and \$8,210,201 in Federal Funds in fiscal year 2024 and \$5,651,359 in General Revenue Funds and \$8,434,781 in Federal Funds in fiscal year 2025 for rural hospitals to maintain increases to inpatient rates in addition to those identified in Subsection (d); and
 - (f) \$24,326,598 in General Revenue Funds and \$36,672,895 in Federal Funds in fiscal year 2024 and \$25,060,349 in General Revenue Funds and \$37,403,132 in Federal Funds in

fiscal year 2025 to increase reimbursement for Medicaid services provided by rural hospitals.

HHSC shall develop a methodology to implement the add-on payments pursuant to funding identified in Subsection (b) that targets the state's safety-net hospitals, including those hospitals that treat high percentages of Medicaid and low-income, uninsured patients. Total reimbursement for each hospital shall not exceed its hospital specific limit.

For purposes of Subsections (c), (d), (e) and (f), rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2010 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA. No reimbursement may exceed the hospital specific limit and reimbursement for outpatient emergency department services that do not qualify as emergency visits may not exceed 65 percent of cost.

To the extent possible, HHSC shall ensure any funds identified in this rider that are included in Medicaid managed care capitation rates are distributed by the managed care organizations to the hospitals. The expenditure of funds identified in this rider that are not used for targeted increases to hospital provider rates as outlined above shall require the prior written approval of the Legislative Budget Board.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Preventative Dental Services in STAR+PLUS

Prepared by LBB Staff, 03/03/2023

Overview

Increase funding and add a rider to provide Medicaid reimbursement for preventative dental services for adults enrolled in a STAR+PLUS managed care program, who are not in STAR+PLUS Home and Community-based Services.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.1, Aged and Medicare-Related, by \$15,300,000 in General Revenue and \$23,641,206 in Federal Funds (\$38,941,206 in All Funds) in fiscal year 2024 and by \$15,300,000 in General Revenue and \$22,835,593 in Federal Funds (\$38,135,593 in All Funds) in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ **Preventative Dental Services in STAR+PLUS. Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.1, Aged and Medicare-Related, is \$15,300,000 in General Revenue and \$23,641,206 in Federal Funds (\$38,941,206 in All Funds) in fiscal year 2024 and by \$15,300,000 in General Revenue and \$22,835,593 in Federal Funds (\$38,135,593 in All Funds) in fiscal year 2025 to provide Medicaid reimbursement for preventative dental services for adults enrolled in a STAR+PLUS managed care program, who are not in STAR+PLUS Home and Community-based Services.**

By: Deshotel

H.B. No. 3145

A BILL TO BE ENTITLED

AN ACT

1
2 relating to Medicaid reimbursement for dental services provided to
3 certain adults with disabilities.

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

5 SECTION 1. Section 32.054, Human Resources Code, is amended
6 by adding Subsection (f) to read as follows:

7 (f) To prevent serious medical conditions and reduce
8 emergency room visits necessitated by complications resulting from
9 a lack of access to dental care, the commission shall provide
10 medical assistance reimbursement for preventive dental services,
11 including reimbursement for at least one preventive dental care
12 visit per year, for an adult recipient with a disability who is
13 enrolled in the STAR+PLUS Medicaid managed care program. This
14 subsection does not apply to an adult recipient who is enrolled in
15 the STAR+PLUS home and community-based services (HCBS) waiver
16 program. This subsection may not be construed to reduce dental
17 services available to persons with disabilities that are otherwise
18 reimbursable under the medical assistance program.

19 SECTION 2. If before implementing any provision of this Act
20 a state agency determines that a waiver or authorization from a
21 federal agency is necessary for implementation of that provision,
22 the agency affected by the provision shall request the waiver or
23 authorization and may delay implementing that provision until the
24 waiver or authorization is granted.

1 SECTION 3. This Act takes effect September 1, 2021.

By: Hunter

Health and Human Services Commission, Article II
Proposed Funding and Rider
Additional Mental Health Community Hospital Beds in Aransas Pass

Overview

Provide funding to the Health and Human Services Commission to lease 60 additional inpatient psychiatric beds in a mental health community hospital in the city of Aransas Pass, Texas, for individuals who are on civil or forensic commitments and individuals with chronic long-term mental health needs. Add a rider in the Health and Human Services Commission bill pattern to identify appropriations for this purpose.

Required Action

- 1) On page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals, by \$15,000,000 in General Revenue Funds in fiscal year 2024 and \$15,000,000 in General Revenue Funds in fiscal year 2025.

- 2) On page II-XX of the Health and Human Services bill pattern, add the following rider:

_____. **Additional Mental Health Community Hospital Beds in Aransas Pass.** Included in amounts appropriated above in Strategy G.2.2, Mental Health Community Hospitals, is \$15,000,000 in General Revenue Funds in each fiscal year of the biennium for the Health and Human Services Commission to lease 60 additional inpatient psychiatric beds to serve individuals who are on civil or forensic commitments and individuals with chronic long-term mental health needs. The beds shall be located in a mental health community hospital in the city of Aransas Pass, Texas, that is centrally located to serve individuals residing in Aransas, Nueces, and San Patricio counties.

Overview

Add funding and a rider to to fund HHSC 9-8-8 and crisis services. This would address the funding recommendations section of the 988 Implementation (Rider 58 from last session) report (excerpts listed below):

- Anticipated funding necessary to implement and sustain 988 calls, texts, chat, intervention services, follow-up, and other services will require funding considerations by the Legislature and pursuing other opportunities to create diversified funding sources.
- Although HHSC will continue to leverage existing federal dollars to continue funding Lifeline centers and priorities, the lack of dedicated funding for 988 may create difficulties if federal funding is reduced. In Texas, there is potential for the existing crisis infrastructure to become strained post-988 launch requiring funding support to meet the increased demand.
- HHSC will continue to explore the availability of other additional Mental Health Block Grant (MHBG) funds beyond state fiscal year 2024 in an amount sufficient to sustain capacity and any increased volume in crisis, residential, outpatient, or inpatient services provided by Local Mental Health Authorities (LMHAs) and Local Behavioral Health Authorities (LBHAs), to include training, recruitment, and retention needs for the workforce.

Required Action

1. On page II-XX of the Health and Human Services Commission’s bill pattern, increase appropriations in Strategy D.2.3, Community Mental Health Crisis Svcs, by \$13,413,379 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission’s bill pattern, increase appropriations in Strategy D.2.7, Community Behavioral Health Administration, by \$5,200,000 in General Revenue in each fiscal year.
3. On page II-XX of the Health and Human Services Commission’s bill pattern, increase the Number of Full-Time Equivalents (FTE) by 3.0 in each fiscal year.
4. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

9-8-8 and Crisis Services. From funds appropriated above in Strategy D.2.1, Community Mental Health Crisis Svcs, the Health and Human Services Commission (HHSC) shall use \$13,413,379 in General Revenue in each fiscal year for 9-8-8 operations and contracts. From funds appropriated above in Strategy D.2.7, Community Behavioral Health Administration, HHSC shall use \$5,000,000 in General Revenue in each fiscal year for a 9-8-8 marketing campaign and \$200,000 in General Revenue in each fiscal year for 3.0 full-time equivalents to oversee the implementation of 9-8-8.

RIDER REQUEST

Member Name: Rep. Morgan Meyer

Affected Agency: Health and Human Services Commission

Purpose: Funding request to complete purchase of 3T MRI for Dallas State Hospital to serve patients.

Amount Requested (if applicable): \$4,500,000

Method of Finance (if applicable): General Revenue

Rider Language:

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.4.2, Facility Capital Repairs and Renovation, by \$4,500,000 in General Revenue in fiscal year 2024.

2. On Page II-XX of the Health and Human Services Commission bill pattern, amend Rider 2, Capital Budget, to provide capital budget authority of \$4,500,000 in General Revenue for the purchase of a 3T MRI at the new state hospital in Dallas.

3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____. Dallas State Hospital Equipment Support. Out of funds appropriated above in Strategy G.4.2, Facility Capital Repairs and Renovation, the Health and Human Services Commission is allocated \$4,500,000 in General Revenue in fiscal year 2024 to complete the purchase of a 3T MRI to improve patient care and service delivery at the new state hospital in Dallas. Any unexpended balances remaining at the end of the first fiscal year of the biennium are appropriated for the same purpose for the second fiscal year of the biennium.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Overview

The 87th Legislature appropriated funds to HHSC to partner with UT Southwestern Medical Center (UTSW) to design and construct a state psychiatric hospital to serve the Dallas-Ft. Worth area, the largest metro area in the state without a state hospital. UTSW has designed a facility to leverage the State’s investment to both expand the mental health provider workforce and for patients, to:

- Increase availability of state-of-the-art care by renowned clinical faculty who will concurrently advance the research needed to develop the next generation of treatments, and
- Apply the breadth of UTSW’s multidisciplinary team approach and use of available technologies for better patient outcomes and use of resources.

Inclusion of a 3T MRI in the facility is essential to the diagnosis and care of the complex patients expected to be cared for in the Dallas hospital – including medical/psychiatric case referrals from across Texas. Space within the facility has been identified and designed to accommodate the MRI that will serve both adult and pediatric patients (with a pediatric hospital wing made possible by a donation to the State from Children’s Health). UTSW has secured federal and other funding support, but a need of \$4.5 million remains as follows:

Total Project Cost (instrument/infrastructure)	\$ 8,000,000
<u>Funding secured: Federal FY22 Congressionally Funded Project</u>	<u>\$ (1,500,000)</u>
Balance needed	\$ 6,500,000
Sources for Balance Needed:	
UT Southwestern contribution	\$ (1,000,000)
<u>Children’s Health contribution</u>	<u>\$ (1,000,000)</u>
State Appropriations Request (one-time cost)	\$ 4,500,000

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.4.2, Facility Capital Repairs and Renovation, by \$4,500,000 in General Revenue in fiscal year 2024.
2. On Page II-XX of the Health and Human Services Commission bill pattern, amend Rider 2, Capital Budget, to provide capital budget authority of \$4,500,000 in General Revenue for the purchase of a 3T MRI at the new state hospital in Dallas.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **Dallas State Hospital Equipment Support.** Out of funds appropriated above in Strategy G.4.2, Facility Capital Repairs and Renovation, the Health and Human Services Commission is allocated \$4,500,000 in General Revenue in fiscal year 2024 to complete the purchase of a 3T MRI to improve patient care and service delivery at the new state hospital in Dallas. Any unexpended balances remaining at the end of the first fiscal year of the biennium are appropriated for the same purpose for the second fiscal year of the biennium.

RIDER REQUEST

Member Name: Allison

Affected Agency: Health and Human Services, Department of State Health Services, Mental Health State Hospitals

Purpose: Community Beds assist in alleviating the strain on the San Antonio State Hospital

Amount Requested (if applicable): \$4.5 million (one-time) new general revenue request

Method of Finance (if applicable):

Rider Language: Bexar County is experiencing an unprecedented and ever-increasing number of individuals found incompetent to stand trial, and whom are being held in the County's Adult Detention Center because they are awaiting transfer to a Health and Human Services operated facility for competency restoration. Individuals who are in county jails, awaiting competency restoration, are not fully addressing their mental health issues and their victims and victims' families are delayed in addressing justice.

According to December 2022 data from HHS' Joint Committee on Access and Forensic Services, there were 2,545 individuals waiting for forensic beds/competency restoration throughout Texas. As of January 2023, there were 288 individuals in the County's ADC; the cost to-date to Bexar County taxpayers is \$25 million, which includes 44 individuals who have been waiting 501 days for a forensic bed.

In November 2022, University Health (Bexar County Hospital District) released a study conducted by the Meadows Mental Health Policy Institute to illustrate the number of individuals in the County's ADC who were awaiting a non-maximum security bed for competency restoration. Meadows found there were 50 individuals who were not well enough to be placed in out-patient competency restoration, however they could be placed in a local program (community bed).

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

RIDER REQUEST

Member Name: Rep. Morgan Meyer

Affected Agency: Health and Human Services Commission

Purpose: Request for funding to implement provisions of House Bill 3121, 87th Legislature, Regular Session, to establish a psychiatric residential youth treatment facility voluntary quality standards certification process.

Amount Requested (if applicable): \$2,356,178

Method of Finance (if applicable): General Revenue

Rider Language:

On page II-XXX of the Health and Human Services bill pattern, add the following new rider:

Psychiatric Residential Youth Treatment Facility Voluntary Quality Standards Implementation. In addition to the amounts appropriated above in Strategy H.2.1, CHILD CARE REGULATION, \$2,356,178 in General Revenue Funds is appropriated in FY2024 and \$2,356,178 in General Revenue Funds is appropriated in FY2025 to make the necessary enhancements in Childcare Licensing Automated Support System (CLASS) systems required by the passage of House Bill 3121, 87th Legislature, Regular Session. The capital budget authority for the Health and Human Services Commission is increased by \$2,356,178 each fiscal year.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

The Covid-19 pandemic exasperated the number of those waiting, and time on the waitlist for both maximum and non-maximum security beds statewide; in doing so, it also highlighted the need for Bexar County to find solutions to address the situation. Therefore, to address this community crisis, Bexar County to find solutions to address the situation. Therefore, to address this community crisis, Bexar County is seeking to contract with a local provider as an alternative detaining individuals in the ADC, get the individual to restoration sooner, and help to reduce the waitlist for those awaiting beds at an HHS facility.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

By _____

Health and Human Services Commission
Rider 24, COVID-19 Nursing Facility Rate Amendment

Overview

Both introduced budgets included a new Rider 24 in the Health and Human Services Commission bill pattern that would provide additional funding for nursing facilities in the 2024-2025 biennium contingent upon the end of the public health emergency (PHE). In February, the current administration announced the PHE would end in May of this year. Though this will bring an end to the federal COVID-19 emergency, nursing homes continue to face increased costs and increase uncertainty in caseloads. These factors combined have led to significant hardship and could lead to some facilities closing down. The proposed changes in the rider language would allocate unexpended funds from fiscal year 2024 in Rider 25 and ensure the agency could use of all funds already allocated, even if the caseload estimates are adjusted down. It would bring much needed stability to the industry and would not cost the state additional funding.

Required Action

1. On page III-63 of the Health and Human Services Commission bill pattern, amend new Rider 24 as follows:

24. COVID-19 Nursing Facility ~~Add-on~~ Rate Stabilization. Included in the appropriations above are the following amounts that are only available to the Health and Human Services Commission (HHSC) ~~contingent on the conclusion of the federally declared COVID-19 public health emergency (PHE):~~

- (a) ~~\$129,385,946~~ \$169,234,120 in General Revenue and ~~\$195,052,234~~ \$294,972,430 in Federal Funds (~~\$324,438,180~~ \$464,206,550 in All Funds) in fiscal year 2024 and \$135,703,968 in General Revenue and \$202,541,217 in Federal Funds (\$338,245,185 in All Funds) in fiscal year 2025 in Strategy A.1.1, Aged and Medicare-Related; and
- (b) \$29,569,937 in General Revenue and \$44,577,347 in Federal Funds (\$74,147,284 in All Funds) in fiscal year 2024 and \$30,032,821 in General Revenue and \$44,824,659 in Federal Funds (\$74,857,480 in All Funds) in fiscal year 2025 in Strategy A.2.4, Nursing Facility Payments.

~~HHSC shall only expend the funds in Subsections (a) and (b) to maintain the emergency add-on reimbursement rate increase for nursing facilities originally implemented for the duration of the PHE. HHSC may not expend funds appropriated under this section for nursing facility services until the Temporary Rate Increases for COVID-19 Response for Nursing Facilities, which were implemented on April 1, 2020, are no longer in effect. HHSC may not expend funds appropriated for nursing facility services in Medicaid managed care in lieu of payments that are~~

currently authorized by the Centers for Medicare and Medicaid Services for the Quality Improvement Payment Program; and HHSC may not expend funds appropriated for nursing facility services in Medicaid fee-for-service that would not result in receipt of Federal Funds.

To receive reimbursement rate increases appropriated under Subsections (a) and (b), nursing facilities must report to HHSC on their biennial cost report information regarding the use of these funds, as specified by HHSC, including information related to efforts to improve or maintain client care and quality of services.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Healthy Community Collaboratives

Prepared by LBB Staff, 03/02/2023

Overview

Provide \$50 million in additional funding for Healthy Community Collaboratives pursuant to Government Code 539.002 which authorizes HHSC to award grants local governmental entities, nonprofit community organizations, and faith-based community organizations, to fund public/private community collaboratives to provide services to persons experiencing homelessness, substance abuse issues, or mental illness.

This action increases funding from \$25 million to \$75 million (\$37.5 million per year) for this purpose, which would significantly expand access to program funding for public/private partnerships funding critical programs to address homelessness in Texas communities.

This action makes a conforming change to existing Rider 36, which identifies all programs funded within Strategy D.2.6, Community Mental Health Grant Programs of which Healthy Community Collaboratives (homelessness services) is a component.

Required Action

1. On page II-XX of the Health and Human Services Commission’s bill pattern, increase appropriations in Strategy D.2.6, Community Mental Health Grant Programs, by \$25,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Community Mental Health Grant Programs.**

- (a) **Informational Listing.** Included in amounts appropriated above in Strategy D.2.6, Community Mental Health Grant Programs, is the following:
 - (1) \$10,000,000 in General Revenue in each fiscal year of the biennium for a grant program for mental health services for veterans and their families established pursuant to Government Code, Section 531.0992;
 - (2) \$40,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment established pursuant to Government Code, Section 531.0993;
 - (3) \$5,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment in the most populous county established pursuant to Government Code, Section 531.09935;
 - (4) \$27,500,000 in General Revenue in each fiscal year of the biennium for a community mental health grant program established pursuant to Government Code, Section 531.0991;
 - (5) ~~\$12,500,000~~ \$37,500,000 in General Revenue in each fiscal year of the biennium to provide grants for Healthy Community Collaboratives funding

public/private collaboratives to address homelessness pursuant to Government Code, Section 539.002; and

- (6) \$7,500,000 in General Revenue in each fiscal year of the biennium for an innovation grant program to support a variety of community-based initiatives that improve access to care for children and families, such as programs that reduce juvenile justice involvement, relinquishment, and preventable emergency room visits.

- (b) **Unexpended Balance Authority within the Biennium.** Any unexpended balances remaining at the end of the first fiscal year of the biennium in Strategy D.2.6, Community Mental Health Grant Programs, are appropriated for the same purposes for the second fiscal year of the biennium.

- (c) **Reporting Requirement.** By November 1, 2024, HHSC shall submit a report detailing the expenditure of funds appropriated in Strategy D.2.6, Community Mental Health Grant Programs. The report shall include the following: the number of grants awarded, amount awarded per entity, effectiveness of the grants, the number of individuals served by each grant program, and any other information requested by the Legislative Budget Board. The report shall be submitted to the Legislative Budget Board, the Office of the Governor, the Senate Finance Committee, and the House Appropriations Committee.

- (d) **Other Requirements.** Contingent upon the availability of local matching funds pursuant to Government Code, Section 539.002, \$10,000,000 in General Revenue for the biennium from the amount identified above in subsection (a)(5) may be allocated to fund Healthy Community Collaboratives in rural areas. HHSC shall consider funding received by a collaborative from the Texas Department of Housing and Community Affairs prior to releasing funds in subsection (a)(5) to the collaborative.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Healthy Community Collaboratives

Prepared by LBB Staff, 03/02/2023

Overview

Provide \$50 million in additional funding for Healthy Community Collaboratives pursuant to Government Code 539.002 which authorizes HHSC to award grants local governmental entities, nonprofit community organizations, and faith-based community organizations, to fund public/private community collaboratives to provide services to persons experiencing homelessness, substance abuse issues, or mental illness.

This action increases funding from \$25 million to \$75 million (\$37.5 million per year) for this purpose, which would significantly expand access to program funding for public/private partnerships funding critical programs to address homelessness in Texas communities.

This action makes a conforming change to existing Rider 36, which identifies all programs funded within Strategy D.2.6, Community Mental Health Grant Programs of which Healthy Community Collaboratives (homelessness services) is a component.

Required Action

1. On page II-XX of the Health and Human Services Commission’s bill pattern, increase appropriations in Strategy D.2.6, Community Mental Health Grant Programs, by \$25,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Community Mental Health Grant Programs.**

- (a) **Informational Listing.** Included in amounts appropriated above in Strategy D.2.6, Community Mental Health Grant Programs, is the following:
 - (1) \$10,000,000 in General Revenue in each fiscal year of the biennium for a grant program for mental health services for veterans and their families established pursuant to Government Code, Section 531.0992;
 - (2) \$40,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment established pursuant to Government Code, Section 531.0993;
 - (3) \$5,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment in the most populous county established pursuant to Government Code, Section 531.09935;
 - (4) \$27,500,000 in General Revenue in each fiscal year of the biennium for a community mental health grant program established pursuant to Government Code, Section 531.0991;
 - (5) ~~\$12,500,000~~ \$37,500,000 in General Revenue in each fiscal year of the biennium to provide grants for Healthy Community Collaboratives funding

public/private collaboratives to address homelessness pursuant to Government Code, Section 539.002; and

- (6) \$7,500,000 in General Revenue in each fiscal year of the biennium for an innovation grant program to support a variety of community-based initiatives that improve access to care for children and families, such as programs that reduce juvenile justice involvement, relinquishment, and preventable emergency room visits.

- (b) **Unexpended Balance Authority within the Biennium.** Any unexpended balances remaining at the end of the first fiscal year of the biennium in Strategy D.2.6, Community Mental Health Grant Programs, are appropriated for the same purposes for the second fiscal year of the biennium.

- (c) **Reporting Requirement.** By November 1, 2024, HHSC shall submit a report detailing the expenditure of funds appropriated in Strategy D.2.6, Community Mental Health Grant Programs. The report shall include the following: the number of grants awarded, amount awarded per entity, effectiveness of the grants, the number of individuals served by each grant program, and any other information requested by the Legislative Budget Board. The report shall be submitted to the Legislative Budget Board, the Office of the Governor, the Senate Finance Committee, and the House Appropriations Committee.

- (d) **Other Requirements.** Contingent upon the availability of local matching funds pursuant to Government Code, Section 539.002, \$10,000,000 in General Revenue for the biennium from the amount identified above in subsection (a)(5) may be allocated to fund Healthy Community Collaboratives in rural areas. HHSC shall consider funding received by a collaborative from the Texas Department of Housing and Community Affairs prior to releasing funds in subsection (a)(5) to the collaborative.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Comprehensive Healthcare Services

Prepared by LBB Staff, 03/07/2023

Overview

Add \$2,500,000 General Revenue per fiscal year to partner with a nonprofit to provide comprehensive healthcare services.

Required Action

1. On page II-XX of the Health and Human Services Commission's bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$2,500,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Comprehensive Healthcare Services.** From funds appropriated above in Strategy D.1.10, Additional Specialty Care, the Health and Human Services Commission shall use \$2,500,000 in General Revenue in each fiscal year to provide comprehensive healthcare services for people who live in areas including but not limited to Addison, Carrollton, Coppell, Farmers Branch, and northwest Dallas.

By: DeAyala

Health and Human Services Commission, Article II
Proposed Funding and Rider
Program Transparency and Integrity for Incarcerated Texans

Overview

Increase funding and add a rider at the Health and Human Services Commission for the acquisition and monitoring of data related to incarcerated individuals.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in I.1.1, Integrated Eligibility and Enrollment, by \$2,500,000 in General Revenue, in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Medicaid Transparency and Integrity for Incarcerated Texans. Included in appropriations above in Strategy I.1.1, Integrated Eligibility and Enrollment, is \$2,500,000 in General Revenue each fiscal year to acquire and monitor incarceration information from external data providers, including third-party vendors of commercial systems, to assist in the agency's processes when conducting eligibility determinations for Medicaid. Data should include real-time snapshots of county jail offender data as well as near real-time release information.**

By: Rose

Health and Human Services Commission
Proposed Rider
Trauma Recovery Centers Pilot Program

Overview

Add a rider to appropriate an additional \$2.5 million in the biennium to the Health and Human Services Commission to implement a Trauma Recovery Centers Pilot Program.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.3, Community Mental Health Crisis Services, by \$1,250,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **TRAUMA RECOVERY CENTER PILOT PROGRAM:** Out of funds appropriated above in Strategy D.2.3, Community Mental Health Crisis Services, the Health and Human Services Commission (HHSC) in partnership with a Local Mental Health Authority shall allocate \$1,250,000 in General Revenue each fiscal year to implement a Trauma Recovery Centers (TRC) pilot program. A qualified entity shall provide services that are focused on providing and addressing the impact of trauma to victims of sexual assault, domestic violence, battery, crimes of violence, vehicular assault, and human trafficking, as well as family members of homicide victims. Qualified entities must offer evidence-based and evidence-informed mental health services and support services that include individual and group treatment, medication management, substance abuse treatment, case management, and assertive outreach.

A participating entity in partnership with a Local Mental Health Authority shall provide 100 percent match of the grant amount.

HHSC shall submit a report to the Office of the Governor's Office and the Legislative Budget Board on the program that includes the total population served and client outcome measures by December 1, 2025.

Overview

Increase funding and add a rider at the Health and Human Services Commission to fund the Nursing Facility Direct Care Staff Rate Enhancement.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.2.4, Nursing Facility Payments, by \$3,095,192 in General Revenue and \$4,617,720 in Federal Funds (\$7,712,912 in All Funds) in each fiscal year.

2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Nursing Facility Direct Care Staff Rate Enhancement Program. Included in amounts appropriated above in A.2.4, Nursing Facility Payments, is \$3,095,192 in General Revenue and \$4,617,720 in Federal Funds (\$7,712,912 in All Funds) in each fiscal year to fund the Nursing Facility Direct Care Staff Rate Enhancement.**

Health and Human Services Commission, Article II
Proposed Funding and Rider
Deaf-Blind Multiple Disabilities Waiver Cost of Living Adjustment

Overview

Increase funding and add a rider for the Health and Human Services Commission for a 100 percent cost of living adjustment increase per individual on the Deaf-Blind Multiple Disabilities waiver and reduce the waitlist by 50 slots.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.3.3, Deaf-Blind Multiple Disabilities (DBMD), by \$32,950,000 in General Revenue and \$50,913,579 in Federal Funds (\$83,863,579 in All Funds) in fiscal year 2024 and \$32,950,000 in General Revenue and \$49,178,614 in Federal Funds (\$82,128,614 in All Funds)
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Deaf-Blind Multiple Disabilities Waiver Cost of Living Adjustment.** Included in the amounts appropriated above to the Health and Human Services Commission in Strategy A.3.3, Deaf-Blind Multiple Disabilities, are the following amounts:

- (a) \$28,400,000 in General Revenue and \$43,883,024 in Federal Funds (\$72,283,024 in All Funds) in fiscal year 2024 and \$28,400,000 in General Revenue and \$42,387,637 in Federal Funds (\$70,787,637 in All Funds) to increase the waiver cost cap to account for the Federal Social Security Cost of Living Adjustment;
- (b) \$4,550,000 in General Revenue and \$7,030,555 in Federal Funds (\$72,283,024 in All Funds) in fiscal year 2024 and \$4,550,000 in General Revenue and \$6,790,977 in Federal Funds (\$11,340,977 in All Funds) to add 50 slots.

Health and Human Services Commission
Proposed Funding and Rider
Concho Valley Behavioral Health Center

Prepared by LBB Staff, 03/07/2023

Overview

Direct the use of general revenue funds to the Health and Human Services Commission for the purpose of constructing a comprehensive behavioral health center to serve the Concho Valley and West Central region of the State.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.4.2, Facility Capital Repairs and Renovation, by \$68,000,000 in General Revenue in fiscal year 2024.
2. On Page II-XX of the Health and Human Services Commission bill pattern, amend Rider 2, Capital Budget, to provide capital budget authority of \$68,000,000 in General Revenue for construction of a Concho Valley Behavioral Health Center.
3. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **Concho Valley Behavioral Health Center.**

- (a) Out of funds appropriated above in Strategy G.4.2, Facility Capital Repairs and Renovation, the Health and Human Services Commission (HHSC) is allocated \$68,000,000 in General Revenue in fiscal year 2024 to construct a comprehensive behavioral health center to service the Concho Valley and West-Central health service delivery region of Texas.
- (b) It is the intent of the Legislature that HHSC shall grant Tom Green County the \$68,000,000 appropriation, and the county shall enter into a long-term contract with an existing not-for-profit healthcare provider in the Concho Valley and West-Central health service delivery region that will commit at least \$20,000,000 to the completion of a behavioral health center; provide without cost to the state an appropriately sized and situated building site and campus; agree to operate 60 psychiatric inpatient beds serving adults and children under the age of 18 at the Center without additional appropriation from the State; provide primary care services within, or in close proximity to, the Center; coordinate with the MHMR Concho Valley to assure continuity of care from community to inpatient care; and provide outpatient support for patients upon discharge, and through the transition of care to the appropriate local behavioral health authority or other community provider.
- (c) Amounts listed in Subsection (a) include \$18,000,000 in General Revenue for co-location with MHMR Concho Valley for capacity for 16 short-term crisis respite service bays and 16 beds for up to 23-hour observation of psychiatric symptoms to stabilize the patient or determine the need for inpatient care. These short-term respite and observation services are intended to assure appropriate options for law enforcement, individuals, and their families, and will facilitate appropriate use of the new inpatient services provided by this appropriation.

Overview

Provide funding to assist in the creation of an integrated healthcare facility located in Quitman and designed to provide housing and direct care for people diagnosed with Alzheimer’s disease or other dementias, and to collaborate with institutions of higher education and other qualified non-profit entities to facilitate educating medical staff and caregivers on best practices related to caring for such individuals. The center would be designated the Memory Health Life Center and will be operated by the Wood County Hospital District.

Required Action

1. On Page II-39 of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.6, Community Mental Health Grant Programs by \$6,00,000 in General Revenue in fiscal year 2024.
2. On page II-99 of the Health and Human Services Commission bill pattern, add the following rider.

_____. **Wood County Hospital District Memory Health Life Center.** Out of funds appropriated above in Strategy D.2.6, Community Mental Health Grant Programs, HHSC shall allocate \$6,000,000 in General Revenue in fiscal year 2024 to fund capital construction of the facility.

Health and Human Services Commission, Article II
Proposed Rider
Rural Hospital Telepsychiatry Consultations

Prepared by LBB Staff, 03/08/2023

Overview

Increase funding and add a rider at the Health and Human Services Commission to fund telepsychiatry consultations in rural hospitals.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Svcs – Adults, by \$3,600,000 in General Revenue in each fiscal year of the biennium.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Rural Hospital Telepsychiatry Consultations.** Included in amounts appropriated above in Strategy D.2.1, Community Mental Health Svcs – Adults, is \$3,600,000 in General Revenue in each fiscal year of the biennium to fund telepsychiatry consultations for rural hospitals. The Health and Human Services Commission shall contract with a statewide organization to aggregate telepsychiatry consultations among rural hospitals in order to access remote psychology services through collaboration with one or more telepsychiatry networks. The statewide organization must be exempt from federal income taxation and provide services to rural hospitals, including grant and fund development to assist rural hospitals in their search for funding opportunities, education and training to provide important information to rural hospital staff, and performance and quality improvement tools to help rural hospitals deliver quality health care.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2020 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

**Health and Human Services Commission
Proposed Funding and Rider
Rural Hospital Telepsychiatry Consultations**

Overview

Add funding and a new rider at the Health and Human Services Commission to fund telepsychiatry consultations in rural hospitals. Patients experiencing mental health crises present in rural hospital emergency departments, but most rural hospitals do not have on-site psychiatrist support. Timely access to a remote psychology consult would help patients get the care they need and help hospitals provide necessary care and treatment. Programs offering remote psychology consults exist but may require a minimum call volume that rural hospitals cannot meet individually. Aggregating consults through a single statewide organization would enable cost effective utilization of remote services, deliver better patient care, reduce duplication/churn among patients with behavioral health issues, and reduce the security risk associated with holding unstable patients.

Required Actions

1. On page II-41 of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Services – Adults, by \$3,600,000 in General Revenue Funds in 2024 and \$3,600,000 in General Revenue Funds in 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

- ____. **Rural Hospital Telepsychiatry Consultations.** Included in appropriations above in Strategy D.2.1, Community Mental Health Services – Adults, is \$3,600,000 in General Revenue in each fiscal year to fund telepsychiatry consultations for rural hospitals. The Health and Human Services Commission shall contract with a statewide organization to aggregate telepsychiatry consultations among rural hospitals in order to access remote psychology services through collaboration with one or more telepsychiatry networks. The statewide organization must be exempt from federal income taxation and provide services to rural hospitals, including grant and fund development to assist rural hospitals in their search for funding opportunities, education and training to provide important information to rural hospital staff, and performance and quality improvement tools to help rural hospitals deliver quality health care.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2010 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

Overview

Appropriations to the Health and Human Services Commission in the 2022-23 General Appropriations Act included \$7.5 million in General Revenue for a demonstration project providing comprehensive medical, non-medical and support services for special needs Texans intended to improve both the quality of care and program cost efficiency. The Multi-Assistance Center (The MAC) was awarded these funds in a competitive grant process in May of 2022, and the first month of program funding was June 2022. This rider would include requested funding for a total of \$15 million (a \$7.5 million increase) and would continue the state's support for The MAC for a full two years of operation.

The rider request includes direction to HHSC to pursue a Federal waiver allowing General Revenue appropriated for this initiative (and expended to support Medicaid clients) be matched by Federal Funds. The total funding request remains \$15 million in GR; the GR would be reduced on receipt of the waiver and Federal match and All Funds would not exceed \$15 million.

Required Action

1. On page II-XX of the Health and Human Services Commission's bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$3,750,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Multi-Assistance Center Demonstration Project.**

- (a) Included in amounts appropriated above to the Health and Human Services Commission is ~~\$3,750,000~~ \$7,500,000 in General Revenue in each fiscal year in Strategy D.1.10, Additional Specialty Care, to support a demonstration project providing comprehensive medical, therapeutic, and non-medical services to adults and children with special needs. The funds shall assist a demonstration project utilizing a one-stop shop model, providing on-site services to adults and children with special needs in Bexar County and the South Texas region. The model shall employ staff to serve as single point of contact to coordinate and support client needs with community partners.
- (b) Notwithstanding the limitations in Rider 98, Limitations on Transfer Authority, HHSC may transfer funds among strategies in its bill pattern to efficiently implement these provisions upon prior notification to the Legislative Budget Board.
- (c) HHSC shall identify and pursue opportunities to use any available Federal or other non-General Revenue source of funds to implement this project and shall coordinate with the project on opportunities to implement the model elsewhere in the state. HHSC shall, to the extent possible, seek a waiver or other permission from the Centers for Medicare and Medicaid Services to authorize General Revenue appropriated for this initiative and expended to support Medicaid clients to be matched by Federal Funds. To the extent such Federal Funds are accessed, they shall be expended solely on this project; contingent on receipt of federal matching funds, General Revenue appropriations made for this

purpose in Strategy D.1.10, Additional Specialty Care, shall be reduced such that All Funds appropriations for the project total \$7,500,000 in each fiscal year.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Updated Calculation of Medical Education Add-On for Reimbursement of Certain
Teaching Hospitals
Prepared by LBB Staff, 02/21/2023

Overview

Increase funding and add a rider at the Health and Human Services Commission to fund updates of the education adjustment factor used to calculate the medical education add-on for teaching hospitals that provide behavioral health and physical health services.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.4.1, Non-Full Benefit Payments, by \$4,300,000 in General Revenue and \$11,400,000 in Federal Funds (\$15,700,000 in All Funds) in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Updated Calculation of Medical Education Add-On for Reimbursement of Certain Teaching Hospitals.** Included in amounts appropriated above in A.4.1, Non-Full Benefit Payments, is \$4,300,000 in General Revenue and \$11,400,000 in Federal Funds (\$15,700,000 in All Funds) in each fiscal year to be used by the Health and Human Services Commission for costs associated with any updates under Section 32.0285 of the Human Resources Code for the education adjustment factor used to calculate the medical education add-on for teaching hospitals that provide behavioral health and physical health services.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Alternatives to Abortion

Prepared by LBB Staff, 03/08/2023

Overview

Increase funding for the Alternatives to Abortion program by \$40.0 million in General Revenue each fiscal year.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.2, Alternatives to Abortion, by \$40,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Alternatives to Abortion.**

- (a) Included in amounts appropriated above in Strategy D.1.2, Alternatives to Abortion, is ~~\$60,000,000~~ \$100,000,000 in General Revenue Funds in each fiscal year for the Alternatives to Abortion program.
- (b) **Unexpended Balance Authority within the Biennium.** Any unobligated and unexpended balances remaining at the end of the first year of the biennium in Strategy D.1.2, Alternatives to Abortion, are appropriated to HHSC for the same purpose for the second fiscal year the biennium.
- (c) **Reporting Requirement.** HHSC shall submit the following information regarding the Alternatives to Abortion program (A2A) to the Legislative Budget Board and the Governor's Office no later than December 1 of each year:
 - (1) total number of A2A providers, including subcontractors, by geographical region;
 - (2) description of outreach efforts by providers and HHSC;
 - (3) total number of unduplicated clients served by each provider, by gender and age;
 - (4) total number of services provided by service type;
 - (5) total expenditures, by MOF;
 - (6) total contract amounts by provider, including subcontractors; and
 - (7) any outcome measures included in contracts with providers.

RIDER REQUEST

Member Name: Tom Craddick

Affected Agency: Permian Basin Behavioral Health Center.

Purpose:

Add funding and a rider for 100 beds (50 adult and 50 adolescent) to be constructed on the Permian Basin Behavioral Health Center campus. The Permian Basin Behavioral Health Center is in the construction and design phases currently.

Amount Requested (if applicable): \$86,700,000

Method of Finance (if applicable):

Rider Language:

Permian Basin Behavioral Health Center. **Out of funds appropriated above in Strategy G.4.2, Facility Capital Repairs and Renovation, the Health and Human Services Commission is allocated \$86,700,000 in General Revenue in fiscal year 2024 for construction of an additional 50 adult and 50 adolescent beds at the Permian Basin Behavioral Health Center. Any unexpended balances remaining at the end of the first fiscal year of the biennium are appropriated for the same purpose for the second fiscal year of the biennium.**

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Health and Human Services Commission, Article II
Proposed Funding and Rider
Medicaid Reimbursement for Crisis Respite Services

Prepared by LBB Staff, 03/05/2023

Overview

Increase appropriations and add a rider directing the Health and Human Services Commission provide Medicaid reimbursement for crisis respite services.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.5, Children, by \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025 for Medicaid reimbursement for crisis respite services.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Crisis Respite Services. Included in the amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.5, Children, is \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025 to provide Medicaid reimbursement for crisis respite services to treat behavioral health issues. It is the intent of the legislature that HHSC implement these services as soon as practicable.**

Health and Human Services Commission, Article II
Proposed Funding and Rider
Functional Family Therapy in Medicaid

Prepared by LBB Staff, 03/05/2023

Overview

Increase funding and add a rider at the Health and Human Services Commission for Medicaid coverage and reimbursement for functional family therapy.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.5, Children, by \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Functional Family Therapy. Included in amounts appropriated above to the Health and Human Services Commission in Strategy A.1.5, Children, is \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025 to provide reimbursement for functional family therapy (FFT) to treat behavioral health issues. It is the intent of the legislature that HHSC implement FFT as soon as practicable.**

Health and Human Services Commission, Article II
Proposed Funding and Rider
Medicaid Coverage for Functional Family Therapy and Multisystemic Therapy

Prepared by LBB Staff, 03/05/2023

Overview

Increase funding and add a rider at the Health and Human Services Commission for Medicaid coverage and reimbursement for functional family therapy and multisystemic therapy.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.5, Children, by \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Functional Family Therapy and Multisystemic Therapy.** Included in amounts appropriated above to the Health and Human Services Commission in Strategy A.1.5, Children, is \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025 to provide reimbursement for functional family therapy (FFT) and multisystemic therapy (MST) to treat behavioral health issues. It is the intent of the legislature that HHSC implement FFT and MST as soon as practicable.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Intensive Outpatient Program and Partial Hospitalization Program

Prepared by LBB Staff, 03/07/2023

Overview

Increase funding and add a rider to add Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP) as a Medicaid covered services to allow for a standard rate for contracting and uniformity in access statewide.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Goal A, Medicaid Client Services, by \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Intensive Outpatient Program and Partial Hospitalization.** Included in amounts appropriated above is \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in each fiscal year in Goal A, Medicaid Client Services, to provide reimbursement for Intensive Outpatient (IOP) and Partial Hospitalization Programs to treat behavioral health issues. It is the intent of the legislature that HHSC implement IOP and PHP as soon as practicable.

Overview

Increase funding and add a rider at the Health and Human Services Commission for Medicaid coverage and reimbursement for multisystemic therapy.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in A.1.5, Children, by \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025.

2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Multisystemic Therapy.** Included in amounts appropriated above to the Health and Human Services Commission in Strategy A.1.5, Children, is \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2024 and \$XX in General Revenue and \$XX in Federal Funds (\$XX in All Funds) in fiscal year 2025 to provide reimbursement for multisystemic therapy (MST) to treat behavioral health issues. It is the intent of the legislature that HHSC implement MST as soon as practicable.

Amend **HB1** as follows:

(1) On page II-xx of the Health and Human Services Commission bill pattern, add the following rider:

Reimbursement to Counties. Amounts appropriated above in Strategy G.2.1 Mental Health State Hospitals, include funds to be allocated for distribution to Harris County, starting the 21st day of confinement, at the rate of \$527 per day per individual in the jail who are awaiting transfer to a mental health state hospital and for whom all paperwork and processing required for transfer have been completed.

The following action adds funding for services, infrastructure, and oversight supports for the STAR+PLUS pilot program described in Texas Government Code Sec 534.101 and adds a rider to the Health and Human Services Commission's bill pattern to identify the funding provided.

Required Actions

- 1) On page II-39 of the Health and Human Services Commission (HHSC) bill pattern, increase appropriations by \$1,091,571 in General Revenue, \$77,056,994 in General Revenue Match for Medicaid No. 758, \$1,702 in General Revenue Match for Title XXI (CHIP) No. 8010, \$54,908 in General Revenue Match for Food Stamp Administration No. 8014, and \$120,130,279 in Federal Funds in fiscal year 2024 and by \$907,047 in General Revenue, \$150,878,846 in General Revenue Match for Medicaid No. 758, \$1,606 in General Revenue Match for Title XXI (CHIP) No. 8010, \$52,261 in General Revenue Match for Food Stamp Administration No. 8014, and \$229,554,962 in Federal Funds in fiscal year 2025.
- 2) On page II-40 of the HHSC bill pattern, increase the Number of Full-Time-Equivalents (FTE) by 28.5 in fiscal year 2024 and by 29.5 in fiscal year 2025.
- 3) On page II-40 of the HHSC bill pattern, increase appropriations for Strategy A.1.1, Aged and Medicare-Related, by \$22,817,224 in fiscal year 2024 and \$45,410,754 in fiscal year 2025.
- 4) On page II-40 of the HHSC bill pattern, increase appropriations for Strategy A.1.2, Disability-Related, by \$162,801,673 in fiscal year 2024 and \$324,764,494 in fiscal year 2025.
- 5) On page II-41 of the HHSC bill pattern, increase appropriations for Strategy B.1.1, Medicaid Contracts and Administration, by \$8,889,190 in fiscal year 2024 and \$7,949,023 in fiscal year 2025.
- 6) On page II-42 of the HHSC bill pattern, increase appropriations for Strategy H.1.1, Facility/Community-Based Regulation, by \$405,982 in fiscal year 2024 and \$405,982 in fiscal year 2025.
- 7) On page II-43 of the HHSC bill pattern, increase appropriations for Strategy I.2.1, Long-term Care Intake and Access, by \$64,816 in fiscal year 2024 and \$64,816 in fiscal year 2025.
- 8) On page II-43 of the HHSC bill pattern, increase appropriations for Strategy L.1.1, HHS System Supports, by \$576,844 in fiscal year 2024 and \$537,982 in fiscal year 2025.
- 9) On page II-43 of the HHSC bill pattern, increase appropriations for Strategy L.1.2, IT Oversight & Program Support, by \$2,413,319 in fiscal year 2024 and \$1,910,812 in fiscal year 2025.
- 10) On page II-43 of the HHSC bill pattern, increase appropriations for Strategy L.2.1, Central Program Support, by \$366,405 in fiscal year 2024 and \$350,859 in fiscal year 2025.
- 11) On page II-49 of the HHSC bill pattern, amend Rider 2, Capital Budget, accordingly.
- 12) On page II-XX of the HHSC bill pattern, add the following new rider:

____. STAR+PLUS Pilot Program Informational Listing

Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategies A.1.1, Aged and Medicare-Related, A.1.2, Disability-Related, B.1.1, Medicaid Contracts & Administration, H.1.1, Facility/Community-Based Regulation, I.2.1, Long-term Care Intake and Access, L.1.1, HHS System Supports, L.1.2, IT Oversight & Program Support, and L.2.1, Central Program Support, is \$198,335,453 in All Funds (\$78,205,174 in General Revenue), in fiscal year 2024 and \$381,394,722 in All Funds (\$151,839,760 in General Revenue), in fiscal year 2025 for services, infrastructure, and oversight supports for the STAR+PLUS pilot program described in Texas Government Code, Sec. 534.101. Included in the “Number of Full-Time Equivalents” (FTEs) above is 28.5 FTEs in fiscal year 2024 and 29.5 FTEs in fiscal year 2025 for staffing needs associated with the pilot program.

Health and Human Services Commission, Article II
Proposed Rider
Support Services for New Families

Overview

This rider would direct A2A funding to support diaper banks across the state. Currently the three largest diaper banks in Texas serve 29 counties. State funding will allow them to serve families in 200 of the state's 254 counties.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Alternatives to Abortion.**

- (a) Included in amounts appropriated above in Strategy D.1.2, Alternatives to Abortion, is \$60,000,000 in General Revenue Funds in each fiscal year for the Alternatives to Abortion program.
- (b) **Unexpended Balance Authority within the Biennium.** Any unobligated and unexpended balances remaining at the end of the first year of the biennium in Strategy D.1.2, Alternatives to Abortion, are appropriated to HHSC for the same purpose for the second fiscal year the biennium.
- (c) **Reporting Requirement.** HHSC shall submit the following information regarding the Alternatives to Abortion program (A2A) to the Legislative Budget Board and the Governor's Office no later than December 1 of each year:
 - (1) total number of A2A providers, including subcontractors, by geographical region;
 - (2) description of outreach efforts by providers and HHSC;
 - (3) total number of unduplicated clients served by each provider, by gender and age;
 - (4) total number of services provided by service type;
 - (5) total expenditures, by MOF;
 - (6) total contract amounts by provider, including subcontractors; and
 - (7) any outcome measures included in contracts with providers.

(d) Diaper Banks. Out of funds appropriated above in Strategy D.1.2, Alternatives to Abortion, the Health and Human Services Commission shall expend no more than 2 percent in Fiscal Year 2024 and 2 percent in Fiscal Year 2025 for the purposes of supporting diaper banks across the state. Funds appropriated can be used for:

- (1) to upgrade and expand current warehouse space;
- (2) the creation of new warehouse space;

(6) a quantitative and qualitative analysis of all performance measures expected of providers, including, but not limited to, how each of those measures was achieved through program activities and what metrics were used to determine success;

(7) number of referrals to other health programs done by providers, including the number of clients who subsequently enrolled in the program they were referred to;

(8) types of services offered by the program and their direct impact on families;

(9) description of educational materials used by contractors and subcontractors; including a description of the competitive contracting efforts done by the contractor or agency to determine which curriculum to use; and

(10) program recommendations to improve delivery of services, coordination between programs, and other service improvements.

(d) Evaluation of Best Practices HHSC shall evaluate current expenditures of the Alternatives to Abortion program funds, provide information regarding any unexpended funds, and provide this information in a report to the Legislative Budget Board, the Office of the Governor, and the Legislature no later than December 1, 2023. HHSC shall also seek recommendations from women's health care providers, children's health care advocates, women's health advocates, early childhood education advocates, and other stakeholders on strategies that maximize these funds to make sure investments are made in programs which implement best practices and have proven outcomes. HHSC will collect recommendations no later than December 1, 2023 and shall include them in the expenditure report to the Legislature. The Legislative Budget Board shall approve of the implementation of these recommendations no later than June 1, 2024.

Health and Human Services Commission, Article II
Proposed Rider
Alternatives to Abortion

Prepared by LBB Staff, 03/15/2023

Overview

This rider would amend Alternatives to Abortion reporting requirements.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Alternatives to Abortion.**

- (a) Included in amounts appropriated above in Strategy D.1.2, Alternatives to Abortion, is \$60,000,000 in General Revenue Funds in each fiscal year for the Alternatives to Abortion program.
- (b) **Unexpended Balance Authority within the Biennium.** Any unobligated and unexpended balances remaining at the end of the first year of the biennium in Strategy D.1.2, Alternatives to Abortion, are appropriated to HHSC in Strategy D.1.1, Women's Health Programs, for clients services for the same purpose for the second fiscal year of the biennium.
- (c) **Reporting Requirement.** HHSC shall submit the following information regarding the Alternatives to Abortion program (A2A) to the Legislative Budget Board and the Governor's Office no later than December 1 of each year:
 - (1) total number of A2A providers, including subcontractors, by geographical region and type of provider (e.g., medical, social services, etc.);
 - (2) description of outreach efforts by providers and HHSC, and a description of the competitive contracting efforts done by the agency that includes the number of respondents and final bid amount;
 - (3) total number of unduplicated clients served by each provider, by gender and age, including the methodology used to determine client services;
 - (4) total number of services provided by service type and the direct impact of services on families;
 - (5) total expenditures, by MOF;
 - (6) total contract amounts by provider, including subcontractors; ~~and~~
 - (7) any outcome measures included in contracts with providers;:
 - (8) a quantitative and qualitative analysis of all performance measures expected of providers, including, but not limited to, how each measure was achieved through program activities and what metrics were used to determine success;
 - (9) number of referrals to other health programs done by providers, including the number of clients who subsequently enrolled in the program they were referred to; and

(9) description of educational materials used by contractors and subcontractors, including a description of the competitive contracting efforts done by the contractor or agency to determine which curriculum to use; and

(10) program recommendations to improve the delivery of services, coordination between programs, and other service improvements.

(d) **Evaluation of Best Practices.** HHSC shall evaluate current expenditures of the Alternatives to Abortion program funds provide information regarding any unexpended funds, and provide this information in a report to the Legislative Budget Board, the Governor's Office, and the Legislature no later than December 1, 2023. HHSC shall also seek recommendations from women's health care providers, children's health care advocates, women's health advocates, early childhood education advocates, and other stakeholders on strategies that maximize these funds to make sure investments are made in programs which implement best practices and have proven outcomes. HHSC will collect recommendations no later than December 1, 2023, and shall include them in the expenditure report to the Legislature. The Legislative Budget Board shall approve of the implementation of these recommendations no later than June 1, 2024.

Overview

The introduced version of HB 1 provides a \$30 million increase for the Mental Health Grant Program for Justice-Involved Individuals (85(R) SB 292) established pursuant to Government Code, Section 531.0993; a \$15 million increase for the Community Mental Health Grant Program (85(R) HB 13) established pursuant to Government Code, Section 531.0991; and \$15 million for new innovation grants to support community-based initiatives that improve access to care for children and families (Innovation Grants).

The Health and Human Services Commission (HHSC) issued the last competitive procurement for the Mental Health Grant Program for Justice-Involved Individuals, known as a Needs and Capacity Assessment (NCA), in April 2018, and the last competitive procurement for the Community Mental Health Grant Program, known as a Request for Applications (RFA), in November 2019. The needs of the state have changed significantly since these last procurements, including a forensic waitlist exceeding 2,500 justice-involved individuals as of January 2023. In addition, many communities that were previously not in a position to apply are now interested in leveraging this funding to address gaps in services.

The new innovation grants included in HB 1 can support a variety of community-based initiatives that improve access to care for children and families. There are both nonprofit providers and governmental entities, including local mental health authorities, that can leverage this funding opportunity. The Community Mental Health Grant Program is a successful model for awarding grants to community providers who can fill local gaps in services.

The following action would require HHSC to issue: (1) a new NCA to solicit proposals for the Mental Health Grant Program for Justice-Involved Individuals; (2) a new RFA to solicit proposals for the Community Mental Health Grant Program; and (3) the first RFA for innovation grants, utilizing the design of the Community Mental Health Grant Program. With increased funding for the grant programs created in 2017 and new funding for innovation grants, it is critical that all three are competitively procured to ensure communities have the opportunity to propose fresh ideas that address current state needs and local gaps in care.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. **Community Mental Health Grant Programs.**

- (a) **Informational Listing.** Included in amounts appropriated above in Strategy D.2.6, Community Mental Health Grant Programs, is the following:
 - (1) \$10,000,000 in General Revenue in each fiscal year of the biennium for a grant program for mental health services for veterans and their families established pursuant to Government Code, Section 531.0992;
 - (2) \$40,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment established pursuant to Government Code, Section 531.0993;

- (3) \$5,000,000 in General Revenue in each fiscal year of the biennium for a grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness and to reduce wait time for forensic commitment in the most populous county established pursuant to Government Code, Section 531.09935;
 - (4) \$27,500,000 in General Revenue in each fiscal year of the biennium for a community mental health grant program established pursuant to Government Code, Section 531.0991;
 - (5) \$12,500,000-in General Revenue in each fiscal year of the biennium to provide grants for Healthy Community Collaboratives pursuant to Government Code, Section 539.002; and
 - (6) \$7,500,000 in General Revenue in each fiscal year of the biennium for an innovation grant program to support a variety of community-based initiatives that improve access to care for children and families, such as programs that reduce juvenile justice involvement, relinquishment, and preventable emergency room visits.
- (b) **Unexpended Balance Authority within the Biennium.** Any unexpended balances remaining at the end of the first fiscal year of the biennium in Strategy D.2.6, Community Mental Health Grant Programs, are appropriated for the same purposes for the second fiscal year of the biennium.
 - (c) **Reporting Requirement.** By November 1, 2024, HHSC shall submit a report detailing the expenditure of funds appropriated in Strategy D.2.6, Community Mental Health Grant Programs. The report shall include the following: the number of grants awarded, amount awarded per entity, effectiveness of the grants, the number of individuals served by each grant program, and any other information requested by the Legislative Budget Board. The report shall be submitted to the Legislative Budget Board, the Office of the Governor, the Senate Finance Committee, and the House Appropriations Committee.
 - (d) **Other Requirements.**
 - (1) Contingent upon the availability of local matching funds pursuant to Government Code, Section 539.002, \$10,000,000 in General Revenue for the biennium from the amount identified above in subsection (a)(5) may be allocated to fund Healthy Community Collaboratives in rural areas. HHSC shall consider funding received by a collaborative from the Texas Department of Housing and Community Affairs prior to releasing funds in sSubsection (a)(5) to the collaborative.
 - (2) HHSC shall issue a needs and capacity assessment in fiscal year 2024 to solicit grant program proposals for the funding identified in Subsection (a)(2).
 - (3) HHSC shall issue a request for applications in fiscal year 2024 to solicit grant program proposals for the funding identified in Subsection (a)(4).
 - (4) HHSC shall issue a request for applications in fiscal year 2024 to nonprofit and governmental entities to solicit grant program proposals for the funding identified in subsection (a)(6).

By: _____

**SPECIAL PROVISIONS RELATING TO
ALL HEALTH AND HUMAN SERVICES AGENCIES
Proposed Funding and Rider
Montgomery County Mental Health Treatment Facility**

Overview

Since 2011, the State has contracted with Montgomery County for 100 forensic hospital beds at the Montgomery County Mental Health Treatment Facility. The facility takes patients from all over the state directly off the Forensic State Hospital Waiting List. The land and facility are prepared for a 100-bed expansion for an estimated cost of \$45 million. These additional beds would also take forensic patients directly off the waitlist from all over the state.

Required Action

1. On page II-73 of House Bill 1 as Introduced, within Health and Human Services Commission bill pattern, amend the following rider:

40. Informational Listing: Additional Mental Health Funding. Appropriations above for the Health and Human Services Commission (HHSC) include the following amounts in General Revenue:

(a) HHSC Frontline Staff.

(1) Salary Increases. \$70,665,925 in fiscal year 2024 and \$70,662,295 in fiscal year 2025 in Strategy G.1.1, State Supported Living Centers, and \$47,473,261 in each fiscal year in Strategy G.2.1, Mental Health State Hospitals, to maintain salary increases for frontline staff at HHSC facilities. (b) Expansion of Community Inpatient Beds. (1) State Hospital Contracted Beds. \$10,200,000 in each fiscal year in Strategy G.2.1, Mental Health State Hospitals, to expand contracted bed capacity by 40 beds. \$1,245,701 in fiscal year 2024 and \$1,345,357 in fiscal year 2025 in Strategy G.2.2, Mental Health Community Hospitals for operational expense increases at the Montgomery County Mental Health Treatment Center.

(2) Purchased Psychiatric Beds. 126,000,000 in each fiscal year in Strategy G.2.2, Mental Health Community Hospitals, to maintain existing capacity and for 234 additional state-purchased inpatient psychiatric beds, including 85 beds in rural communities and 149 beds in urban communities.

(3) Inpatient Capacity Expansion. \$29,500,000 in each fiscal year in Strategy G.2.2, Mental Health Community Hospitals, to contract for an additional 150 competency restoration beds.

Health and Human Services Commission, Article II
Proposed Rider
Community Health Workers

Prepared by LBB Staff, 03/05/2023

Overview

Add a new rider stating the Legislature intends that the Health and Human Services Commission categorize services provided by a community health worker as a quality improvement cost.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Community Health Workers.** It is the intent of the Legislature that the Health and Human Services Commission allow each Medicaid managed organization providing health care services under the STAR Medicaid managed care program to categorize services provided by a community health worker as a quality improvement cost, to the extent allowed by state and federal law.

By:

**Health and Human Services Commission, Article II
Proposed Rider
Ground Ambulance Reimbursement Rates**

Overview

Add rider at the Health and Human Services Commission to provide reimbursement for ground ambulance services.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____. The State of Texas Medicaid Reimbursement rate for Ground Ambulance providers is 100% of the Medicare rural reimbursement rate at the time of service. This methodology applies to all dates of service on or after September 1, 2023

Health and Human Services Commission
Proposed Rider
Transition of Fee-for-Service Hospice Benefits to Managed Care

Prepared by LBB Staff, 03/05/2023

Overview

Add a rider to direct the Health and Human Services Commission to transition hospice services currently provided through fee-for-service Medicaid from the Texas Medicaid and Healthcare Partnership (TMHP) to managed care.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Transition of Medicaid Only Services into Managed Care for Dually Eligible Adults.** It is the intent of the Legislature that out of funds appropriated above, the Health and Human Services Commission (HHSC) shall transition administration and payment of benefits currently provided through fee-for-service Medicaid from the HHSC vendor Texas Medicaid and Healthcare Partnership (TMHP) to managed care organizations for the hospice benefit in STAR, STAR Kids, STAR+PLUS and STAR Health programs to better align benefits for members.

Overview

Add a new rider stating the Legislature intends that the Health and Human Services Commission obtain funds to connect border public health authorities to health information exchanges.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Health Information Exchanges.** It is the intent of the Legislature that the Texas Health Services Authority work with the Health and Human Services Commission to obtain applicable federal funds, grants, and other sources of revenue to connect border public health authorities to health information exchanges.

Health and Human Services Commission, Article II
Proposed Rider
Limitations on Usual and Customary Calculations for Pharmacy Reimbursement

Prepared by LBB Staff, 02/28/2023

Overview

Add a new rider stating the Legislature intends that the Health and Human Services Commission modify its requirements for pharmacies seeking reimbursement from the Medicaid Vendor Drug Program.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Limitations on Usual and Customary Calculations for Pharmacy Reimbursement.** It is the intent of the Legislature that the Health and Human Services Commission shall not require pharmacies to include the price paid by consumers through third-party discount plans when determining a pharmacy's Usual and Customary (UAC) price calculation for Medicaid reimbursement.

Health and Human Services Commission, Article II
Proposed Rider
Autism Medicaid Services Advisory Committee

Prepared by LBB Staff, 03/07/2023

Overview

Add a rider at the Health and Human Services Commission for the Texas Autism Medicaid Services Advisory Committee.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Texas Autism Medicaid Services Advisory Committee.** The Health and Human Services Commission (HHSC) executive commissioner shall establish the Autism Medicaid Services Advisory Committee to address problems and concerns with the implementation of the Texas Autism Medicaid Services program. The executive commissioner shall appoint members to the advisory committee who have expertise in the implementation of the Texas Autism Medicaid Services program including commission staff, commission contractors, representatives from the managed care organizations, at least six different applied behavioral analysis providers located in a variety of regions who are participating in the program, advocates, consumers, or a consumer's parent or guardian, and any additional members as needed with direct expertise or subject matter expertise in providing services for the program.

No later than November 1 of each year, the commission shall prepare and submit to the executive commissioner, HHSC executive council, Governor's Office, and Legislature, an electronic written report that includes the following:

- (a) the estimated number of people statewide who are 20-years-old and younger, with a diagnosis of Autism Spectrum Disorder, as well as the estimated number of people with ASD who would be eligible to receive Medicaid services;
- (b) the enrollment levels of Medicaid eligible clients and service utilization by geographic region, including total number of unduplicated clients serve from the prior two fiscal years;
- (c) the average and median numbers of program clients, and the total number of unduplicated clients served, detailed by provider;
- (d) the service utilization by procedure code;
- (e) the total number of providers, by geographic region, contracted and credentialed by the state's Managed Care Organizations.
- (f) the total number of providers credentialed for each service type by each Managed Care Organization;
- (g) total expenditures for each service type by method of finance and program for the preceding two years, and projected expenditures for the current fiscal year and the next fiscal year; and

(h) descriptions of all outreach activities for clients who are 20-years-old and younger, with a diagnosis of Autism Spectrum Disorder, undertaken for the reporting period.

The annual report submitted as required above must satisfy federal reporting requirements that mandate the most specific, accurate, and complete coding and reporting for the highest level of specificity. If the findings of the report show a reduction in clients enrolled or of service utilization reduction of greater than ten percent relative to the prior two fiscal years, the agency shall, within existing resources, undertake corrective measures to expand provider capacity and/or client outreach and enrollment efforts.

It is the intent of the Legislature that the agency shall conduct a formal reimbursement rate review for Applied Behavior Analysis Medicaid services by February 1, 2024 and report the conclusions of the review to the Legislative Budget Board and the Governor's Office.

By Anderson

Health & Human Services, Article II
Central Texas Community Inpatient Expansions

Overview

The following action adds a new rider that directs \$26,000,000 for Central Texas Community Inpatient Expansions. The Comprehensive Behavioral Health System of Care will work to reduce dependency upon State Mental Health Hospital Facilities through regional efforts including Behavioral Health Inpatient Bed Capacity; Crisis Expansion and Diversion Activities; Workforce Development Activities; and ensure more humane and comprehensive care through a multi-agency care coordination model.

Required Action

On page II-XX of the Health and Human Services Commission (HHSC) bill pattern, add the following new rider:

_____. **Central Texas Community Inpatient Expansions.** Appropriations above for the Health and Human Services Commission (HHSC) include the following amounts in General Revenue:

- (a) **Expansion of Community Inpatient Beds.**
 - Inpatient Capacity Expansion.** \$9,000,000 in each fiscal year in Strategy G.2.2, Mental Health Community Hospitals, to increase inpatient capacity.
- (d) **Crisis Services.**
 - (1) **Crisis Stabilization Units.** \$4,000,000 in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Services (CMHCS), for expanded crisis and diversionary services.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Applied Behavior Analysis Technician Services Rates

Prepared by LBB Staff, 02/27/2023

Overview

Add a rider directing the Health and Human Services Commission to utilize funds to ensure that the Medicaid reimbursement rate for Applied Behavior Analysis technician services is at least \$60.00 per hour.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Applied Behavior Analysis.** Out of funds appropriated to the Health and Human Services Commission (HHSC) in Strategy A.1.2, Disability- Related, and Strategy A.1.5, Children, HHSC shall ensure that the Medicaid reimbursement rate for Applied Behavior Analysis technician services is at least \$60.00 per hour.

By: _____

Health and Human Services Commission, Article II
**Behavioral Health Services in School Health Related Services
Program Study**

Overview

The School Health and Related Services (SHARS) program allows school districts to obtain federal reimbursement for certain health-related services provided to Medicaid-enrolled students. Texas policy currently limits reimbursement to students with disabilities on individualized education plans (IEPs). Services covered by SHARS, which must be medically necessary and provided with parental consent, include both physical and mental health services as well as audiology, speech therapy, and occupational therapy.

In 2014, the Centers for Medicare and Medicaid Services (CMS) issued guidance clarifying that school districts could obtain reimbursement for covered services provided to all Medicaid-enrolled students, not just those with IEPs. This change gives districts the ability to draw down federal funds for services they are already providing using their operating budgets, to Medicaid-enrolled students. Since CMS issued the clarification, seventeen states—including Louisiana, Florida, and Arizona—have adopted this policy.

The following action adds a new rider that directs the Health and Human Services Commission to study the feasibility and cost of allowing local education agencies to seek federal reimbursement for the provision of behavioral health services to Medicaid-enrolled students under the SHARS program.

Required Action

On page II-XXX of the Health and Human Services Commission’s bill pattern, add the following new rider:

. Behavioral Health Services in the School Health And Related Services Program.

(a) Out of funds appropriated above in Strategy B.1.1, Medicaid Contracts and Administration the Health and Human Services Commission (HHSC), in consultation with stakeholders and the Behavioral Health Advisory Committee, shall study the feasibility and costs of allowing local education agencies to obtain federal reimbursement for certain health-related services provided to Medicaid-enrolled students, regardless of the existence of an individualized education plan, through the School Health and Related Services program.

(b) In studying this proposal, HHSC, stakeholders, and the Behavioral Health Advisory Committee shall consider:

(1) guidance provided by the Centers for Medicare & Medicaid Services or any other appropriate federal agency to states;

(2) how other states have implemented reimbursement through the School Health and Related Services program, including states that offer Medicaid services through managed care programs;

(3) implementation considerations for Texas and required policy changes;

(4) policies needed to ensure parental consent before any health-related services are provided; and

(5) the total amount of reimbursement that is projected to be provided to school districts in Texas.

(c) HHSC shall report the findings of the study conducted in Subsection (a) to the Legislative Budget Board, Governor, Lieutenant Governor, Speaker of the House and relevant standing committees and post the report on its website not later than November 1, 2024.

Overview

Add a rider to direct the Health and Human Services Commission to maximize state dollars through the use of available federal Children's Health Insurance Program (CHIP) administrative funds for CHIP Health Services Initiatives to improve children's health.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

CHIP Health Services Initiatives. Out of funds appropriated above in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, the Health and Human Services Commission (HHSC) shall work with health care providers, children's advocates, family members of children enrolled in the medical assistance program, and other stakeholders to gather recommendations for CHIP Health Services Initiatives (HSI) aimed at improving child health with a focus on initiatives with proven outcomes and return on investment. The agency will work with stakeholders listed above to explore initiatives targeting newborns to improve child outcomes, develop partnerships to facilitate better coordination with schools and child care centers serving low-income children, and develop initiatives in regions of the state with high rates of mixed status families. The agency will determine the amount of funds available for CHIP HIS based on the current budget and expected expenditures.

To the extent funds are available under the 10.0 percent CHIP administrative cap, and the initiatives will not impact direct client services funding, HHSC shall develop and submit a plan for federal approval of at least two HSIs to improve child health no later than December 1, 2023. One HSI shall seek to improve outcomes for children by support strategies that provide voluntary short term home nursing visitation for newborn caregivers.

By _____

Health and Human Services
Data Solutions for Medicaid and CHIP Benefits

Overview

The Texas Health and Human Services Commission (“HHSC”) will soon be tasked with re-determining 5.9 million Texans for Medicaid eligibility. While this new task may seem daunting, the inclusion of additional language in the agency’s bill pattern can help provide better data solutions including up-to-date income levels, employment status, address, and information related to incarceration and/or death.

Allowing the agency to readily access this key information reliably and quickly can reduce improper payments, improve administrative efficiencies for agencies and caseworkers, reduce the number of applications denied due to insufficient documentation, improve time-to-benefit delivery, and provide enhanced caseworker support.

Required Action

Add the appropriately numbered rider to Article II, Health and Human Services:

_____. To the extent allowable under state and federal law and regulations, using funds allocated in Goal B.1.1., Medicaid & CHIP Contracts & Admin, the Health and Human Services Commission (HHSC) shall directly obtain additional data including income, employment, address, phone, death records, and incarceration data from external data providers, including third-party vendors of commercial systems, so as to maximize and to help HHSC’s required eligibility determinations, identity validations, and other investigations for Medicaid as required by Federal law (P.L. 117-328) enacted on December 29, 2022.

Overview

Add a rider to direct the Health and Human Services Commission to adopt policies to measurably improve success rates of data-driven administrative renewal of Medicaid eligibility.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Data-Driven Eligibility Efficiencies.** Out of amounts appropriated above in Goal I Program Eligibility Determination & Enrollment, the Health and Human Services Commission is directed to establish a benchmark goal of increasing successful Medicaid aggregate administrative renewal rates, with a target of exceeding 25 percent by August 1, 2024 and 50 percent or more by August 1, 2025.

The agency shall consider factors including, but not limited to policies of other state Medicaid programs that have been effective in achieving higher data-driven administrative approval rates, reducing eligibility staff workloads, and/or producing administrative savings.

By: Rep. Orr _____

Health and Human Services Commission, Article II
Proposed Rider
Database of Community Inpatient Beds

Prepared by LBB Staff, 03/01/2023

Overview

Add a rider to direct HHSC to establish a state database of community inpatient beds.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Database of Community Inpatient Beds.** Out of funds appropriated above in Strategy D.2.7, Community Behavioral Health Administration, the Health and Human Services Commission shall develop and implement an integrated statewide database of community inpatient beds and other resources to expedite access to care for individuals in need of behavioral health services. The database should include treatment availability, referral and communication tools, clinical decision support, capability for advanced data analytics, and electronic integration with existing behavioral health systems.

By Rep. Orr _____

Health and Human Services Commission
Dental Therapy Facility Rate Increase

Overview

The current Texas Medicaid Dental facility fee code 41899 has not been reviewed or received an adjustment in decades. This is causing access to care issues for Medicaid dental patients in Texas. The delay in dental care not only leaves the patient in pain for an unnecessary amount of time, it also can cause their condition to worsen, thus costing the Medicaid program additional money because of the delayed care.

The following action requires a thorough and complete review of the reimbursement methodology for dental therapy facilities in Texas to follow the guidance of the Centers of Medicare & Medicaid Services (CMS) recently established new Healthcare common Procedure Coding system Code G0330.

Required Action

On page XX-XX of the Health and Human Services bill pattern, add the following new rider:

_____. **Dental Therapy Facility Rate Increase:** Out of funds appropriated above in Strategy B.1.1, Medicaid Contracts & Administration, the Health and Human Services Commission shall examine the reimbursement methodology for dental therapy in a facility to compare to the Medicare reimbursement for facility services dental rehab.

Health and Human Services Commission, Article II
Proposed Rider
Interest List Elimination Plan

Prepared by LBB Staff, 03/07/2023

Overview

Add a rider to require the Health and Human Services Commission to develop a plan to eliminate interest lists for the Home and Community-Based Services, Community Living Assistance and Support Services, Deaf-Blind Multiple Disabilities, Texas Home Living, Medically Dependent Children Program, and STAR+PLUS Home and Community-Based Services waivers.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Interest List Elimination Plan. Out of funds appropriated above in Strategy B.1.1, Medicaid & CHIP Contracts & Administration, the Health and Human Services Commission (HHSC) shall develop a plan to eliminate the interest lists for Home and Community-Based Services, Community Living Assistance and Support Services, Deaf-Blind Multiple Disabilities, Texas Home Living, and Medically Dependent Children Program, and the STAR+PLUS Home and Community-Based Services waivers.

The plan shall include a major investment in fiscal year 2024, followed by a proposed timeline with related estimated costs of releasing persons from the interest lists on a highest-need or first-come, first-served basis; recommend which, if any, interest lists could be eliminated on an immediate or priority basis; and provide current waiver programs and services to persons released from the interest lists. The commission shall submit the plan to the Senate Finance Committee, the House Appropriations Committee, the Legislative Budget Board, and the Governor's Office by December 31, 2024. The plan must include the following information:

- (a) estimated time periods for eliminating the interest lists;
- (b) identification of any interest lists that could be eliminated;
- (c) analysis of the existing provider network and the provider network needed to serve persons removed from the interest lists; and
- (d) the estimated client service and administrative fiscal impacts of eliminating the interest lists.

Health and Human Services Commission, Article II
Proposed Rider
Maximizing Federal Dollars to Address the Fentanyl Epidemic

Prepared by LBB Staff, 03/01/2023

Overview

This rider directs HHSC to change current processes to mirror best practices in other states in which grant-funded providers receive grant funds and the flexibility to use the funds based on the individual clinical needs of the clients they serve, while the state agency monitors utilization and submits amendments to their federal funders to maximize the use of the federal grant funds.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Maximizing Federal Dollars to Address the Fentanyl Epidemic.** Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall maximize federal Texas Targeted Opioid Response (TTOR) grant dollars from the Substance Abuse and Mental Health Services Administration (SAMHSA) to increase access to substance use disorder treatment. HHSC shall:

- (a) submit an amendment to the SAMHSA to amend the existing TTOR plan to allow grant-funded providers the flexibility to utilize funds on the medication and services clinically indicated for the individual client accessing treatment;
- (b) allow grant-funded providers the flexibility to use TTOR funds on any of the following services and based on the clinical need of the client accessing treatment:
 - (1) medication assisted therapy (both methadone and buprenorphine);
 - (2) mental health assessments;
 - (3) counseling services;
 - (4) physician services; and
 - (5) peer support services;
- (c) continue to monitor utilization of grant funds and submit amendments to SAMHSA as needed to maximize the use of federal grant funds; and
- (d) ensure future federal grant applications and plans aimed at addressing substance use disorders do not favor a specific medication and give flexibility to providers to use funds based on the individual clinical needs of the client accessing treatment.

Rider Request

Member Name: Rep. Christina Morales

Affected Agency: Texas Health and Human Services Commission

Purpose: Non-medical Intervention Services Study: The following action adds a new rider that directs a study at Texas Health and Human Services Commission of a demonstration pilot of non-medical intervention services in Medicaid.

Amount Requested (if applicable):

Method of Finance (if applicable):

Rider Language:

1. On page XX of H.B. 1 as Introduced, within the Texas Health and Human Services bill pattern, include rider ## as follows:

##. Non-medical Intervention Services Study. Out of funds appropriated above in Goal A Medicaid, Texas Health and Human Services Commission (HHSC) shall study the structures and processes needed for a comprehensive state pilot program to test and evaluate the impact of providing select evidence-based, non-medical interventions to high-needs Texas Medicaid Managed Care. HHSC shall seek input from Texas health-related institutions of higher education in conducting the study. HHSC shall issue a report to the Legislature by December 1, 2024, regarding the outcome of the study, make recommendations on whether a pilot program would improve health outcomes and reduce healthcare costs for Texas Medicaid Managed Care, and make recommendations about how to establish a pilot program in the Texas Medicaid managed care program.

Overview

Add the following rider to ensure efficient and cost-effective service coordination within Medicaid managed care programs.

Required Action

- _____ . **Service Coordination Efficiency.** Out of funds appropriated above in Strategy B.1.1, Medicaid Contracts and Administration, the Health and Human Services Commission shall ensure efficient and cost-effective Service Coordination within Medicaid managed care programs. The state shall make every effort to ensure that Service Coordination requirements optimize resources, allow Service Coordinators to practice within the full scope of their license, promote efficiency and maximize managed care flexibility.
- (a) Prior to implementing a material change in Service Coordination requirements, the Health and Human Services Commission (HHSC) shall complete an analysis of the estimated cost impact, level of effort to implement, and expected benefit of the change to the population being served. The analysis shall include the following:
- (1) Identify the need or deficiency being addressed and detail the outcome or measurement data supporting the proposed change;
 - (2) Consider the impact upon the state's existing workforce, particularly with regard to the availability of required nursing resources and the burden on other healthcare settings;
 - (3) Solicit and consider the input of contracted managed care organizations; and
 - (4) Assess the feasibility of allowing members to choose telehealth options for Service Coordination activities.
- (b) HHSC shall submit a written report detailing the impact of each proposed change to the Legislative Budget Board, the Governor's Office, the Chair of the House Appropriations Committee, the Chair of the Senate Finance Committee, the Speaker of the House, the Lieutenant Governor, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services..
- (c) It is the intent of the Legislature that Medicaid managed care organizations retain the flexibility to maximize nurse workforce resources and determine Service Coordination staffing credentials as appropriate for the population and served in accordance with applicable licensing standards and regulations.

This rider creates efficiency at HHSC and helps address nurse workforce shortages.

On page ____ of the Health and Human Service Bill pattern, add the following rider:

XXX. Service Coordination Efficiency. Out of funds appropriated above in Strategy B.1.1, Medicaid Contracts and Administration, the Health and Human Services Commission shall ensure efficient and cost-effective Service Coordination within Medicaid managed care programs. The state shall make every effort to ensure that Service Coordination requirements optimize resources, allow Service Coordinators to practice within the full scope of their license, promote efficiency and maximize managed care flexibility.

- a) Prior to implementing a material change in Service Coordination requirements, the Health and Human Services Commission (HHSC) shall complete an analysis of the estimated cost impact, level of effort to implement and expected benefit of the change to the population being served. The analysis shall also;
 - 1. Identify the need or deficiency being addressed and detail the outcome or measurement data supporting the proposed change,
 - 2. Consider the impact upon the state's existing workforce, particularly with regard to the availability of required nursing resources and the burden on other healthcare settings,
 - 3. Solicit and consider the input of contracted managed care organizations,
 - 4. Assess the feasibility of allowing members to choose telehealth options for Service Coordination activities.

HHSC shall submit a written report detailing the impact of each proposed change to the Legislative Budget Board and Governor.

- b) It is the intent of the Legislature that Medicaid managed care organizations retain the flexibility to maximize nurse workforce resources and determine Service Coordination staffing credentials as appropriate for the population served and in accordance with applicable licensing standards and regulations.

Health and Human Services Commission, Article II
Proposed Rider
Substance Abuse and Mental Health Services Administration Rules

Prepared by LBB Staff, 03/03/2023

Overview

Add a rider to require HHSC to promulgate rules to align with the federal Substance Abuse and Mental Health Services Administration update to federal rules to expand access to opioid use disorder treatment.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Substance Abuse and Mental Health Services Administration Rules. Out of funds appropriated above in Strategy D.2.7, Community Behavioral Health Administration, the Health & Human Services Commission (HHSC) shall promulgate rules to align with the federal Substance Abuse and Mental Health Services Administration update to federal rules to expand access to opioid use disorder treatment and help close the gap in care as soon as those federal regulations are adopted. It is the intent of the Legislature that when drafting the proposed rules, HHSC shall include the expansion of the definition of a treatment practitioner; add evidence-based delivery models of care; strengthen the patient-practitioner relationship; and allow for early access to take-home doses of medication.

HHSC shall submit a report to the Legislative Budget Board, the Governor's Office, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services, by January 1, 2024, explaining any portion of the federal regulations about which they seek legislative guidance.

Overview

Add a rider to direct the Health and Human Services Commission to transition services currently provided through fee-for-service Medicaid from the Texas Medicaid and Healthcare Partnership (TMHP) to managed care for dually eligible adults.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. **Transition of Medicaid Only Services into Managed Care for Dually Eligible Adults.** It is the intent of the Legislature that out of funds appropriated above, the Health and Human Services Commission (HHSC) shall transition Medicaid-only services for dually eligible adults from services currently provided through fee-for-service Medicaid from the HHSC vendor Texas Medicaid and Healthcare Partnership (TMHP) to managed care organizations as part of the benefits offered to enrollees, without imposing cost-sharing on dually eligible people.

**House Appropriations Committee
Riders - Article II**

Not Adopted

March 16, 2023

Legislative Budget Board

By: Jones of Harris

Department of Family and Protective Services
Proposed Funding and Rider
At-Risk Prevention Program Support

Overview

Increase General Revenue appropriations in Strategy C.1.6, At-Risk Prevention Program Support of the Texas Department of Family and Protective Services bill pattern by \$900,000 in fiscal year 2024 for the purpose of providing a grant for Aid to Victims of Domestic Abuse (AVDA) in Harris County.

Required Action

1. On page II-2 of the Department of Family and Protective Services bill pattern in House Bill 1, increase General Revenue funds in Strategy C.1.6, At-Risk Prevention Program Support, by \$900,000 in fiscal year 2024.
2. On page II-17 of Department of Family and Protective Services pattern in House Bill 1, add the following new rider:

At-Risk Prevention Program Support. It is the intent of the Legislature that amounts appropriated above to Department of Family and Protective Services in Strategy C.1.6, At-Risk Prevention Program Support, include General Revenue funding in fiscal year 2024 for the following not-for-profit organization in the following amount. Any unobligated and unexpended balances for these grants remaining as of August 31, 2024, are appropriated for the same purpose in the fiscal year beginning September 1, 2024.

- (a) \$900,000 for Aid to Victims of Domestic Abuse (AVDA).

Overview

Direct the Department of Family and Protective Services to work with Child Placing Agencies to improve data quality and accuracy.

Required Action

1. On page II-1 of the Department of Family and Protective Services bill pattern, increase appropriations by \$1,000,000 in General Revenue in each fiscal year of the 2024-25 biennium:
2. On page II-XX, of the Department of Family and Protective Services bill pattern, add the following rider:

_____. **Child Welfare Technology.** Out of funds appropriated above in Strategy E.1.4, IT Program Support, the Department of Family and Protective Services shall work with Child Placing Agencies with over 800 employees to address issues of data quality and accuracy to improve systemic issues in child welfare. Solutions may include but not limited to, implementing predictive models to predict child maltreatment, streamlining processes for collecting and analyzing data, and leveraging blockchain applications to increase transparency and security in data management.

By: Rep. Raymond

Department of State Health Services
Proposed Funding and Rider
Border Laboratory Capacity

Prepared by LBB Staff, 02/27/2023

Overview

Increase funding and add a new rider at the Department of State Health Services (DSHS) to direct funds to the City of Laredo Health Department to improve border laboratory capacity to receive a Laboratory Response Network certification.

Laredo has a biosafety laboratory level III (BSL III) that was built in partnership with DSHS with the intent of becoming a Laboratory Response Network (LRN) to enhance laboratory capacity on the Texas/Mexico Border. This certification will also facilitate Food Emergency Response Network (FERN) approval to reduce the risk of foodborne threats.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy A.4.1, Laboratory Services, by \$250,000 in General Revenue in each fiscal year.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Border Laboratory Capacity. Included in the amounts appropriated above in Strategy A.4.1, Laboratory Services is \$250,000 in General Revenue in each fiscal year of the 2024-25 biennium. It is the intent of the legislature that the identified funds are to be distributed to the City of Laredo Health Department to improve laboratory capacity to receive a Laboratory Response Network certification.**

Rider Article II – DSHS - Texas Center for Nursing Workforce Studies Advisory Committee

Solving Texas' nurse workforce challenges requires strategic investments in clinical training infrastructure and structural coordination between nursing school faculty and clinical care sites: hospitals, clinics, long term care sites and other clinical settings. It also requires investments in retaining trained nurses, steering the workforce through a generational shift with the pandemic and loss of "baby-boomer" expertise, and a reinvigorated commitment to reducing health care workplace violence.

Lack of clinical training capacity and clinical preceptors are identified by numerous sources as the primary obstacles to growing Texas' nurse workforce.

The Texas Center for Nursing Workforce Studies provides invaluable leadership and research on nursing workforce. The current 21-member Advisory Committee includes members representing associations, agencies, educators, employers, researchers, and a private member with three employer representatives including hospice, senior living, and an association, but does not contain many representatives from clinical nurse education sites.

The following rider recommends increased clinical site nurse representation in the advisory committee. Including more clinical nurse worksite expertise and perspectives will help address workforce challenges including education at clinical sites, increasing student clinical capacity, transition to practice in clinical sites, nursing retention in clinical sites, options to address the experience-complexity gap, workplace safety, and other nurse workforce challenges that will benefit from increased clinical site perspectives.

Article II. DSHS Rider

__The Texas Center for Nursing Workforce Studies Advisory Committee. It is the intent of the legislature that the Department of State Health Services add four additional members to the advisory committee with nursing clinical expertise from various nursing clinical sites including urban and rural clinical sites. The Department of State Health Services is appropriated \$800,000 and 2 FTEs for the 2024-25 biennium from General Revenue for the Texas Center for Nursing Workforce Studies to study and report on nursing workforce issues related to clinical site training, nursing residency, and nursing workforce retention. No later than September 1, 2024, the agency shall submit to the legislature a report on the results of the study and any recommendations for legislative or other action.

Department of State Health Services
Proposed Funding and Rider
Center for Imaging and Innovation at the Texas Biomedical Research Institute

Prepared by LBB Staff, 03/8/2023

Overview

Increase funding and add a new rider at the Department of State Health Services (DSHS) for the establishment of the Center for Imaging and Innovation at the Texas Biomedical Research Institute.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy A.2.3, Infectious Disease Prevention, Epidemiology and Surveillance, by \$30,200,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Center for Imaging and Innovation at the Texas Biomedical Research Institute.** Included in the amounts appropriated above in Strategy A.2.3, Infectious Disease Prevention, Epidemiology, and Surveillance, is \$30,200,000 in fiscal year 2024. It is the intent of the legislature that funds shall be used to establish the Center for Imaging and Innovation at the Texas Biomedical Research Institute to streamline future research and the development of lifesaving drugs.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024

**Department of State Health Services
Proposed Funding and Rider
Texas Biomedical Research Institute**

Prepared by LBB Staff, 03/8/2023

Overview

Increase funding and add a new rider at the Department of State Health Services (DSHS) to provide a grant to the Texas Biomedical Research Institute to purchase imaging equipment and for other capital expenditures to support and advance research in the treatment and prevention of disease.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy A.2.3, Infectious Disease Prevention, Epidemiology and Surveillance, by \$30,200,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____ . **Texas Biomedical Research Institute.** Included in the amounts appropriated above in Strategy A.2.3, Infectious Disease Prevention, Epidemiology, and Surveillance, is \$30,200,000 in fiscal year 2024. It is the intent of the legislature that funds shall be used to provide a grant to the Texas Biomedical Research Institute to purchase imaging equipment and for other capital expenditures to support and advance research in the treatment and prevention of disease.

Any unexpended balances remaining as of August 31, 2024, are appropriated for the same purpose for the fiscal year beginning September 1, 2024

1) On page II-24 of the Department of State Health Services bill pattern, increase appropriations in Strategy A.2.2. HIV/STD Prevention by \$2,000,000.00 in General Revenue Funds in each fiscal year of the 2022-23 biennium.

2) On Page II-24 of the Department of State Health Services bill pattern, add the following rider:

 . **HIV/STD Prevention Community Non-Profit Grants:** Out of the amounts appropriated above in Strategy A.2.2. HIV/STD Prevention, the Department of State Health Services shall use \$1,000,000.00 in each fiscal year to provide grants through the HIV/STD prevention program to a non-profit organization that offers services to individuals at risk of contracting HIV or sexually transmitted diseases, including medical services, mental health counseling, and nutritional services. It is the intent of the legislature that the department award grants to a single organization in each fiscal year of the biennium. Any unexpended balances as of the fiscal year ending August 31, 2024 are hereby appropriated for the same purpose for the fiscal year beginning September 1, 2024.

Overview

Increase funding and add a new rider at the Department of State Health Services (DSHS) to provide funding for the establishment of a Limb Salvage Institute that includes a freestanding clinic and outpatient surgical facility staffed by a multi-disciplinary team of highly trained medical experts and vascular surgeons that specialize in caring for complex and non-healing wounds and in treatments and procedures that prevent amputation.

Required Action

1. On page II-XX of the Department of State Health Services bill pattern, increase appropriations in Strategy B.2.1, EMS and Trauma Care Systems, by \$7,500,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Department of State Health Services bill pattern, add the following rider:

_____. **Limb Salvage Institute.** Included in the amounts appropriated above in Strategy B.2.1, EMS and Trauma Care Systems, is \$7,500,000 in General Revenue in fiscal year 2024 for the establishment of a Limb Salvage Institute that is designed to include a freestanding clinic and outpatient surgical facility with a multi-disciplinary medical staff that specializes in caring for complex and non-complex healing wounds and in treatments and procedures that prevent amputation. It is the intent of the legislature that the Department of State Health Services give preference to a grant applicant that is a healthcare entity located in Hidalgo County and has been designated as a Level 1 trauma facility since at least January 1, 2022.

Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium are appropriated for the same purposes for the second fiscal year of the biennium.

RIDER REQUEST

Member Name: Rep. A. Martinez

Affected Agency: DSHS

Purpose:

Increase funding and add a new rider at the Department of State Health Services (DSHS) to provide funding for the establishment of a Limb Salvage Institute that includes a freestanding clinic and outpatient surgical facility staffed by a multi-disciplinary team of highly trained medical experts and vascular surgeons that specialize in caring for complex and non-healing wounds and in treatments and procedures that prevent amputation.

Amount Requested (if applicable): 7,500,000

Method of Finance (if applicable): GR

Rider Language:

Limb Salvage Institute. Included in the amounts appropriated above in Strategy B.2.1, EMS and Trauma Care Systems, is \$7,500,000 in General Revenue in fiscal year 2024 for the establishment of a Limb Salvage Institute that is designed to include a freestanding clinic and outpatient surgical facility with a multi-disciplinary medical staff that specializes in caring for complex and non-complex healing wounds and in treatments and procedures that prevent amputation. It is the intent of the legislature that the Department of State Health Services give preference to a grant applicant that is a healthcare entity located in Hidalgo County and has been designated as a Level 1 trauma facility since at least January 1, 2022. Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium are appropriated for the same purposes for the second fiscal year of the biennium.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

RIDER REQUEST

Member Name: Allison

Affected Agency: Health and Human Services Commission

Purpose: Bexar County Psychiatric Center

Amount Requested (if applicable): \$300 million one-time for the planning of, acquisition of land for, and construction of a Psychiatric Center in Bexar County that will serve Bexar county and the surrounding area.

Method of Finance (if applicable):

Rider Language:

Provide \$300 million in funding to the Health and Human Services Commission to support a one-time investment for the planning of, acquisition of land for, and construction of a Psychiatric Center in Bexar County that will provide comprehensive inpatient care and outpatient services to patients and their families in Bexar County and surrounding area.

An investment of \$16 million for planning and \$284 million for land acquisition and construction of a 227-bed Psychiatric Center will provide comprehensive and accessible care for individuals in need of comprehensive inpatient care, outpatient treatment, medical services, as well as on-site support programs for families.

Required Action

- 1) On page XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.4.2, Capital Repair and Renovation at SSLCs, State Hospitals, and Other, by \$300 million in general revenue in fiscal year 2024

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

RIDER REQUEST

Member Name: Harold V. Dutton, Jr.

Affected Agency: Health and Human Services Commission

Purpose: To direct the Commissioner of Health and Human Services to appropriate funds for the continued support of Julia C. Hester House Wellness Center, which provides opportunities for underserved and economically disadvantaged children and senior citizens to seek and obtain health and wellbeing education services.

Amount Requested (if applicable): \$250,000.000

Method of Finance (if applicable): General Revenue Appropriation

Rider Language: It is the intent of the Legislature that funds appropriated for the, the commissioner of health and human services shall allocate \$250,000 in General Revenue to the Julia C. Hester House for underserved and economically disadvantaged children and senior citizens to seek and obtain health and wellbeing education services.

Any unexpended balances as of August 31, 2024, are appropriated for fiscal year 2025 for the same purpose.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Health and Human Services Commission, Article II
Proposed Rider
Ronald McDonald House Charities South Texas

Prepared by LBB Staff, 03/07/2023

Overview

Add a rider to appropriate \$500,000 for a grant for construction of a new house for the Ronald McDonald House Charities South Texas in Corpus Christi.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.1.10, Additional Specialty Care, by \$500,000 in General Revenue in fiscal year 2024.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____. **Ronald McDonald House Charities South Texas.** Out of funds appropriated above in Strategy D.1.10, Additional Specialty Care, the Health and Human Services Commission shall use \$500,000 in General Revenue in fiscal year 2024 to provide a grant to the Ronald McDonald House Charities South Texas to construct a home in Corpus Christi.

By: _____

**Health and Human Services Commission
Proposed Funding and Rider
Tri-County Behavioral Healthcare**

Overview

The following action would increase the funding allocated for crisis stabilization units from \$18 million to \$20.5 million to ensure the continued operations of the Crisis Stabilization Unit at the Tri-County Behavioral Healthcare facility, which serves Montgomery, Liberty, and Walker counties. Tri-County's Crisis Stabilization Unit, one of only four in the state and one of only two freestanding facilities, has been used to treat indigent adults in need of crisis stabilization in the community. While opening new facilities remains a priority, ensuring the long term viability of existing facilities is of equal importance.

Required Action

1. On page II-73 of House Bill 1 as Introduced, within Health and Human Services Commission bill pattern, amend the following rider:

(d) Crisis Services

- (1) Crisis Stabilization Units.** ~~\$18,000,000~~ **\$20,500,000** in each fiscal year in Strategy D.2.3, Community Mental Health Crisis Services (CMHCS), to fund six additional crisis stabilization units, including \$2,500,000 each fiscal year for the crisis stabilization unit at the local mental health authority that serves Montgomery, Walker, and Liberty counties to provide a short-term alternative to hospital admission to reduce acute symptoms of mental illness.

Health and Human Services Commission, Article II
Proposed Rider
Clinical Drug Development for Treatment and Prevention of Veteran Suicide

Prepared by LBB Staff, 03/07/2023

Overview

According to a report by the U.S. Department of Veterans Affairs (VA), suicide was the leading cause of death among US Veterans under age 45. The rate among this group is 57% higher than among civilians. The often-quoted, decade-old statistic of ‘22 veteran suicides per day is vastly eclipsed by recent estimates suggesting a far worse epidemic of 44 veteran suicides per day. Texas veteran suicides account for 8% of the total U.S. veteran suicides in the last two decades, and Texas ranks the third-highest of any state in the US. Recent clinical studies of psychedelic therapies demonstrate that these treatments are a quantum leap beyond the efficacy of existing mental health treatments.

H.B. 1802, enacted in 2021, is a promising start for furthering research into psychedelic therapies. However, this initiative neglected to advance funding for ibogaine and 5-MeO-DMT, which are two of the most promising and frequently utilized psychedelic therapies by Special Operations Forces Veterans. While HB 1802 advanced an initial University study in this population, in order for these studies to translate to clinical delivery and be more widely available, FDA drug development studies are required to achieve the required goal of these compounds being FDA-approved and made available for those who urgently require them now.

This rider seeks to address this by funding FDA drug development studies to advance ibogaine and 5-MeO-DMT for the prevention and treatment of mental health issues and suicide in Veterans and First Responders.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy D.2.1, Community Mental Health Svcs - Adults, by \$120,000,000 in General Revenue fiscal year 2024.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ . **Clinical Drug Development for Treatment and Prevention of Veteran Suicide.**
Included in amounts appropriated above in Strategy D.2.1, Community Mental Health Svcs - Adults, is \$120,000,000 in General Revenue in fiscal year 2024 for the Health and Human Services Commission (HHSC) for the purpose of funding U.S. Food and Drug Administration drug development studies to advance ibogaine and 5-MeO-DMT for the prevention and treatment of mental health issues and suicide in veterans and first responders. Any unexpended balances of these funds remaining at the end of the first fiscal year of the biennium are appropriated for the same purposes for the second fiscal year of the biennium.

By: Representative Rose

Health and Human Services Commission, Article II
Maintenance of Critical Services: Local Authority Workforce Capacity

Required Action

On page II-XXXXX of the Health and Human Services Commission (HHSC) bill pattern, add \$63,666,660 in General Revenue for each year of the 2024-25 biennium to the HHSC budget strategies identified in the following new rider:

Maintenance of Critical Services: Local Authority Workforce Capacity. Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall allocate new funds as follows \$63,666,660 in General Revenue for each year of the 2024-25 biennium for Maintenance of Critical Infrastructure to Local Mental Health Authorities/Local Behavioral Health Authorities (LMHA/LBHA) and/or Local Intellectual and Development Disability Authorities(LIDDA): \$37,928,029 each year in strategy D.2.1 Community Mental Health Services for Adults; \$9,653,956 each year in strategy D.2.2 Community Mental Health Services for Children; \$7,169,246 each year in strategy D.2.3 Community Mental Health Crisis Services; \$4,733,944 each year in strategy F.1.3 Non-Medicaid Developmental Disability Community Services; and \$4,171,485 each year in strategy I.2.1 Intake, Access, and Eligibility to Services and Supports. Funds shall be allocated to each LMHA/LBHA/LIDDA proportionally based on FY23 funding levels in the above referenced funding strategies.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Rural Labor and Delivery Medicaid Add-on Payment

Overview

Increase funding by \$6,379,200 in General Revenue and \$9,620,800 in Federal Funds (\$16,000,000 in All Funds) in fiscal year 2024 and by \$6,419,200 in General Revenue and \$9,580,800 in Federal Funds (\$16,000,000 in All Funds) in fiscal year 2025 at the Health and Human Services Commission (HHSC) to increase from \$500 to \$1,500 the Medicaid add-on payment for labor and delivery services provided by rural hospitals. Amend HHSC Rider 16, Rural Labor and Delivery Medicaid Add-on Payment, to identify appropriations for this purpose.

Required Action

1. On page II-XX of the Health and Human Services bill pattern, increase appropriations in A.1.3, Pregnant Women, by \$6,379,200 in General Revenue and \$9,620,800 in Federal Funds (\$16,000,000 in All Funds) in fiscal year 2024 and by \$6,419,200 in General Revenue and \$9,580,800 in Federal Funds (\$16,000,000 in All Funds) in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, amend the following rider:

_____ . **Rural Labor and Delivery Medicaid Add-on Payment.** Included in amounts appropriated above to the Health and Human Services Commission (HHSC) in Strategy A.1.3, Pregnant Women, is ~~\$3,190,400~~\$9,569,600 in General Revenue and ~~\$4,809,600~~\$14,430,400 in Federal Funds in fiscal year 2024 and ~~\$3,209,600~~\$9,628,800 in General Revenue and ~~\$4,790,400~~\$14,371,200 in Federal Funds in fiscal year 2025 for HHSC to provide a ~~\$500~~\$1,500 Medicaid add-on payment for labor and delivery services provided by rural hospitals.

For purposes of this rider, rural hospitals are defined as (1) hospitals located in a county with 60,000 or fewer persons according to the 2010 U.S. Census; or (2) a hospital designated by Medicare as a Critical Access Hospital (CAH), a Sole Community Hospital (SCH), or a Rural Referral Center (RRC) that is not located in a Metropolitan Statistical Area (MSA); or (3) a hospital that has 100 or fewer beds, is designated by Medicare as a CAH, a SCH, or a RRC, and is located in an MSA.

Health and Human Services Commission, Article II
Proposed Funding and Rider
Audiology Reimbursements in the School Health and Related Services Program

Prepared by LBB Staff, 03/07/2023

Overview

Increase funding and add a rider at the Health and Human Services Commission to fund audiology reimbursements in the School Health and Related Services (SHARS) program.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy A.4.1, Non-Full Benefit Payments, by \$1,000,000 in General Revenue and \$1,545,177 in Federal Funds (\$2,545,177 in All Funds) in fiscal year 2024 and \$1,000,000 in General Revenue and \$1,492,522 in Federal Funds (\$2,492,522 in All Funds) in fiscal year 2025.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____ **School Health and Related Services (SHARS) - Audiology Reimbursements.**
Included in amounts the appropriations above to the Health and Human Services Commission in Strategy A.4.1, Non-Full Benefit Payments, is \$1,000,000 in General Revenue and \$1,545,177 in Federal Funds (\$2,545,177 in All Funds) in fiscal year 2024 and \$1,000,000 in General Revenue and \$1,492,522 in Federal Funds (\$2,492,522 in All Funds) for audiology reimbursements in SHARS.

RIDER REQUEST

Member Name: Allison

Affected Agency: Health and Human Services Commission, Article II

Purpose: Mental Health Community Hospital Beds in Bexar County

Amount Requested (if applicable): \$31 million in general revenue funding for the Health and Human Services Commission in each fiscal year of the biennium

Method of Finance (if applicable):

Rider Language:

Overview

Provide \$31 million in general revenue funding to the Health and Human Services Commission in each fiscal year of the 2024-2025 biennium for Strategy G.2.2, Mental Health Community Hospitals, to fund:

- A. An additional 100 purchased psychiatric beds (PPBs) in Bexar County to increase community inpatient bed capacity; and
- B. Market flexibility of the bed day rate to allow the local mental health authority to pay market rate.

Required Action

- 1) On page XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals by \$31 million in general revenue in each fiscal year.
- 2) On page XX of the Health and Human Services Commission bill pattern, add the following rider:

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Funding for Mental Health Community Hospital Beds in Bexar County. Out of funds appropriated above in Strategy G.2.2., Mental Health Community Hospitals, the Health and Human Services Commission shall allocate \$31 million in each fiscal year to the local mental health authority serving Bexar County for the purpose of funding an additional 100 purchased psychiatric beds (PPBs) to increase community inpatient bed capacity. It is the intent of the Legislature that this funding will allow flexibility for an increase in the bed day rate to allow the local mental health authority to pay a market rate for PPBs.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Health and Human Services Commission, Article II
Proposed Rider
Bexar County Non-Maximum Security Community Beds

Prepared by LBB Staff, 03/07/2023

Overview

Bexar County is experiencing an unprecedented and ever-increasing number of individuals found incompetent to stand trial, and whom are being held in the County's Adult Detention Center because they are awaiting transfer to a Health and Human Services operated facility for competency restoration. Individuals who are in county jails, awaiting competency restoration, are not fully addressing their mental health issues and their victims and victims' families are delayed in addressing justice. According to December 2022 data from HHSC's Joint Committee on Access and Forensic Services, there were 2,545 individuals waiting for forensic beds/competency restoration throughout Texas. As of January 2023, there were 288 individuals in the County's ADC; the cost to-date to Bexar County taxpayers is over \$25 million, which includes 44 individuals who have been waiting 501 days for a forensic bed.

In November 2022, University Health (Bexar County Hospital District) released a study conducted by the Meadows Mental Health Policy Institute, to illustrate the number of individuals in the County's ADC, who were awaiting a state maximum security bed for competency restoration. Meadows found there were 250 individuals on the waitlist who required a state maximum security bed. During the 86th (2017) and 87th (2019) Texas Legislative sessions, over \$325 million was included to build a new state hospital facility in Bexar County. Additionally, in 2022 HHS remodeled the Alamo Hall facility on the SASH campus, where 40 mental health beds are currently located. With the new facility scheduled to open in 2024, these mental health beds will be vacated.

The COVID-19 pandemic exacerbated the number of those waiting, and time on the waitlist for both maximum and non-maximum security beds statewide; in doing so, it also highlighted the need for Bexar County to find solutions to address the situation. Therefore, as an alternative to detaining individuals in the County's ADC, and to address this community crisis, Bexar County is seeking to partner with HHS, and contract with a local provider to relocate maximum security inmates from the County's ADC to the vacated SASH Alamo Hall facility. This will get the individual to restoration sooner, and help to reduce the waitlist for those awaiting forensic beds at an HHS facility. It is anticipated this proposed program will reduce the Bexar County ADC forensic bed waitlist by over 33% within the first year of operation, reducing wait times, and ultimately providing significant savings to taxpayers.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals, by \$2,250,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

. Bexar County Non-Maximum Security Community Beds. Out of funds appropriated above in Strategy G.2.2, Mental Health Community Hospitals, the Health and Human Services Commission shall provide \$2,250,000 in General Revenue in each fiscal year to assist Bexar County in purchasing non-maximum security community inpatient psychiatric beds to alleviate the strain caused by the rise in the number of individuals found incompetent to stand trial, and who are being held in the Bexar County Adult Detention Center awaiting a transfer to a Health and Human Services Commission operated facility for competency restoration.

Health and Human Services Commission, Article II
Proposed Rider
Bexar County Maximum Security Beds

Prepared by LBB Staff, 03/07/2023

Overview

Bexar County is experiencing an unprecedented and ever-increasing number of individuals found incompetent to stand trial, and whom are being held in the County's Adult Detention Center because they are awaiting transfer to a Health and Human Services operated facility for competency restoration. Individuals who are in county jails, awaiting competency restoration, are not fully addressing their mental health issues and their victims and victims' families are delayed in addressing justice. According to December 2022 data from HHSC's Joint Committee on Access and Forensic Services, there were 2,545 individuals waiting for forensic beds/competency restoration throughout Texas. As of January 2023, there were 288 individuals in the County's ADC; the cost to-date to Bexar County taxpayers is over \$25 million, which includes 44 individuals who have been waiting 501 days for a forensic bed.

In November 2022, University Health (Bexar County Hospital District) released a study conducted by the Meadows Mental Health Policy Institute, to illustrate the number of individuals in the County's ADC, who were awaiting a state maximum security bed for competency restoration. Meadows found there were 250 individuals on the waitlist who required a state maximum security bed. During the 86th (2017) and 87th (2019) Texas Legislative sessions, over \$325 million was included to build a new state hospital facility in Bexar County. Additionally, in 2022 HHS remodeled the Alamo Hall facility on the SASH campus, where 40 mental health beds are currently located. With the new facility scheduled to open in 2024, these mental health beds will be vacated.

The COVID-19 pandemic exasperated the number of those waiting, and time on the waitlist for both maximum and non-maximum security beds statewide; in doing so, it also highlighted the need for Bexar County to find solutions to address the situation. Therefore, as an alternative to detaining individuals in the County's ADC, and to address this community crisis, Bexar County is seeking to partner with HHS, and contract with a local provider to relocate maximum security inmates from the County's ADC to the vacated SASH Alamo Hall facility. This will get the individual to restoration sooner, and help to reduce the waitlist for those awaiting forensic beds at an HHS facility. It is anticipated this proposed program will reduce the Bexar County ADC forensic bed waitlist by over 33% within the first year of operation, reducing wait times, and ultimately providing significant savings to taxpayers.

Required Action

1. On Page II-XX of the Health and Human Services Commission bill pattern, increase appropriations in Strategy G.2.2, Mental Health Community Hospitals, by \$25,000,000 in General Revenue in each fiscal year.
2. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **Bexar County Maximum Security Beds. Out of funds appropriated above in Strategy G.2.2, Mental Health Community Hospitals, the Health and Human Services Commission shall provide \$25,000,000 in General Revenue in each fiscal year to assist Bexar County in purchasing maximum security inpatient psychiatric beds to alleviate the strain caused by the rise in the number of individuals found incompetent to stand trial, and who are being held in the Bexar County Adult Detention Center awaiting a transfer to a Health and Human Services Commission operated facility for competency restoration.**

Health and Human Services Commission, Article II
Proposed Rider
North Texas State Hospital – Wichita Falls

Prepared by LBB Staff, 03/07/2023

Overview

Add a rider directing \$700.0 million for construction of a replacement facility for the North Texas State Hospital – Wichita Falls campus.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

_____. North Texas State Hospital – Wichita Falls. It is the intent of the Legislature that out of funds appropriated above or in another appropriations act, the Health and Human Services Commission (HHSC) shall allocate \$700,000,000 for construction of a replacement campus of North Texas State Hospital - Wichita Falls.

RIDER REQUEST

Member Name: Rep. A. Martinez

Affected Agency: HHSC

Purpose: Change the mental health assessments reimbursement fee through Child Prospective Services from \$41.35 to \$75

Amount Requested (if applicable): [Click here to enter text.](#)

Method of Finance (if applicable): General Revenue

Rider Language:

The State of Texas Medicaid Reimbursement rate for Mental Health Assessments through Child Protective Services for an 81% increase of the reimbursement rate at the time of service. This methodology applies to all dates of service on or after September 1, 2023

Article II
Health and Human Services Commission
Health and Human Services Cost Containment

Purpose: In 2003, the Texas Legislature created the Office of Inspector General (OIG) to strengthen the efforts of HHSC to detect and prevent fraud, waste, and abuse in Medicaid. One important cost containment tool the OIG utilizes is the Medicaid recovery audit program. The Medicaid recovery audit program collects overpayments and reimburse underpayments made on claims for healthcare services provided to Medicaid beneficiaries. Section 1902(a) (42)(B)(i) of the Social Security Act requires states and territories to establish Medicaid recovery audit programs. Claims submitted by the state's Medicaid MCOs are not included within the scope of Medicaid recovery audit review. Only providers who bill services through Texas' fee-for-service (FFS) Medicaid program are subject to recovery audit review. Since Medicaid FFS claims represent only ~5% of all Medicaid claims submitted, while MCOs account for ~95% of total claims, it is suggested that MCOs should also be included in the Medicaid recovery audit program for maximum identification and recovery of provider overpayments and underpayments.

Amount Requested (if applicable): N/A

Method of Finance (if applicable): N/A

Rider Language: Amend H.B. 1, Health and Human Services Commission in the Article II bill pattern as follows:

21. Health and Human Services Cost Containment. It is the intent of the Legislature that the Health and Human Services Commission (HHSC) shall develop and implement cost containment initiatives to achieve savings of at least \$350,000,000 in General Revenue Funds for the 2024-25 biennium throughout the health and human services system. These initiatives shall include:

- (a) increasing fraud, waste, and abuse prevention and detection;
- (b) seeking to maximize federal flexibility under the Medicaid program in compliance with Government Code, Chapter 537;

(c) identifying and recovering underpayments and overpayments under the Medicaid managed care program pursuant to Government Code, §531.117; and

(d)(e) achieving other programmatic and administrative efficiencies.

HHSC shall provide an annual report on the implementation of cost containment initiatives to the Legislative Budget Board by December 1. It is the intent of the legislature that HHSC shall achieve savings without adjusting amount, scope, or duration of services or otherwise negatively impacting access to care. It is the intent of the legislature that prior to making any changes, HHSC shall consider stakeholder input, including complying with any statutory requirements related to rulemaking and public hearings. This rider shall not be construed as limiting HHSC's ability to maximize federal flexibility under the Medicaid program, including federal flexibility that may impact amount, scope, or duration of services.

Overview

Amend the Office of Inspector General Report rider to include Medicaid managed care programs for the total dollars identified of potential overpayments identified for recovery resulting from activities of the Office of the Inspector General provided in the quarterly report.

Required Action

1. On page II-XX of the Health and Human Services bill pattern, amend the following rider:

_____. **Office of Inspector General Report.** Out of funds appropriated above in Strategy K.1.1, Office of Inspector General, the Office of Inspector General shall submit, on a quarterly basis, the following information related to the expansion of managed care to the Legislative Budget Board and the Office of the Governor:

- (a) The challenges the Office of Inspector General is encountering in preventing, detecting, and investigating fraud, waste, and abuse throughout the entire health and human services system, including verification of services, compliance of Managed Care Organizations with program integrity requirements, quality and accuracy of encounter data, collaborative efforts with Special Investigation Units, audits of Managed Care Organizations, and any deficiencies in the agency's statutory authority;
- (b) Strategies the Office of Inspector General is implementing to address the challenges encountered in combating fraud, waste, and abuse throughout the entire health and human services system;
- (c) Average number of clients in the lock-in program in each quarter of the fiscal year and the fiscal year total in the fourth quarterly report of the fiscal year;
- (d) Total dollars identified (millions) of potential overpayments identified for recovery resulting from activities of the Office of the Inspector General including under the Medicaid managed care programs in accordance with Texas Government Code, Section 531.117;
- (e) Total number of skills trainings presented by Office of the Inspector General staff or external entities to internal staff, and trainings presented by Office of the Inspector General staff to external stakeholders; and
- (f) The number of referrals to the Office of the Attorney General's Medicaid Fraud Control Unit including the fiscal year total in the fourth quarterly report of the fiscal year.

The Office of Inspector General may submit the above information in an individual report prepared in a format specified by the Legislative Budget Board or include the information in the quarterly report required pursuant to Government Code, Section 531.102.

Overview

The following adds new language to Health and Human Services Commission, Use of Certain Additional Medicaid Revenues, to promote Medicaid Patient Education on Appropriate Medical Use.

Patient education can help health care providers inform and remind patients of the proper ways to self-manage care and avoid nonessential readmissions. Better education can also help patients understand the care setting most appropriate for their condition and avoid unnecessary trips to the hospital. Patient education is necessary and will save valuable health care costs.

A.1.6. Strategy: Medicaid ACO Patient Education on Appropriate Medical Use	2024	2025
	\$2,500,000	\$2,500,000

Required Action

1. On page II-__, Health and Human Services Commission, establish Medicaid Patient Education on Appropriate Medical Use.

2.

__. Medicaid ACO Patient Education on Appropriate Medical Use.

(__). Out of funds above, \$2,500,000 in fiscal year 2024 and \$2,500,000 in fiscal year 2025 shall be used to establish a Medicaid Patient Education on Appropriate Medical Use initiative to educate Medicaid patients understand the care setting most appropriate for their medical condition.

RIDER REQUEST

Member Name: Rep. A. Martinez

Affected Agency: HHSC

Purpose:

Add a rider to authorize and direct HHSC to procure contracts to establish three additional Program of All-Inclusive Care for the Elderly (PACE) sites and to transfer funds within Goal A, Medicaid Client Services, to fund client services. The rider would authorize up to \$16,250,000 to be transferred to fund start-up and operational costs of three new PACE sites (\$5.4 million per site) and is contingent on any new site being qualified pursuant to state and Federal requirements

Amount Requested (if applicable): up to \$16,250,000

Method of Finance (if applicable): General Revenue

Rider Language:

Establishment of Additional Program of All-Inclusive Care for the Elderly (PACE) Sites.

(a) The Health and Human Services Commission (HHSC) is authorized to procure and implement contracts to establish three additional PACE sites in geographical areas not currently served by the program. Prior to finalizing a contractual agreement, HHSC shall determine that any entity to be contracted with satisfies procurement and contracting requirements established by HHSC and is approved by the Centers for Medicare and Medicaid Services (as described in 42 CFR, Part 460, Subpart B of the Code of Federal Regulations) to be a provider agency.

(b) HHSC is authorized and directed to transfer General Revenue Funds appropriated to Strategy A.1.1, Aged and Medicare-related, or Strategy A.1.2, Disability-Related, such amounts as may be necessary, along with qualifying federal matching funds, to support up to 300 slots in each of the three additional PACE sites during the 2024-25 fiscal biennium. The total General Revenue Funds amount transferred for this purpose may be used to fund startup and operational costs and may not exceed \$16,250,000 in any fiscal year. The capitation rate to be paid for each site shall be determined pursuant to agency rate methodology for the PACE program without application of the budget reduction factor.

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(c) This transfer shall be executed notwithstanding HHSC, Rider 98, Limitations on Transfer Authority. Further, this authorization fulfills the requirements of Special Provisions Relating to All Health and Human Services Agencies, Section 12, Rate Limitations and Reporting Requirements.

(d) The Executive Commissioner of HHSC shall provide written notification to the Legislative Budget Board (LBB) and the Governor's Office of the certification and the transfer of amounts within 30 business days of the date on which any transfer occurs.

(e) On the request of HHSC, LBB, or the Governor's Office, PACE providers shall provide any requested information on actual cost, caseload, and services.

If you have any questions regarding this form, please contact the House Appropriations Committee Office at (512) 463-1091

Overview

The following action would require the Health and Human Services Commission to develop a strategic plan on defendant competency restoration.

Required Action

1. On page II-XX of the Health and Human Services Commission bill pattern, add the following rider.

_____ . **Strategic Plan on Defendant Competency Restoration.** Out of funds appropriated above, the Health and Human Services Commission (HHSC) shall develop a strategic plan to evaluate the current backlog of defendants awaiting competency restoration services in the state and evaluate solutions to minimize the waitlist. The strategic plan must determine: a timeline for working through the waitlist; the costs associated with working through the waitlist; and how to avoid a waitlist moving forward. Not later than December 1, 2023, HHSC shall submit the strategic plan to the Legislative Budget Board, the Governor's Office, the Chair of the House Appropriations Committee, the Chair of the Senate Finance Committee, the Speaker of the House, the Lieutenant Governor, and the permanent standing committees in the House of Representatives and the Senate with jurisdiction over health and human services.

Health and Human Services Commission
Proposed Rider
Gender reassignment surgeries on minors

Overview

Prohibit the expenditure of funds to hospitals that perform gender transitioning surgeries on minors.

Required Action

1. On page II-__ of the Health and Human Services bill pattern, add the following rider.

_____. **Gender reassignment surgeries on minors.** None of the funds appropriated to the Health and Human Services Commission may be used for the purpose of performing gender transitioning surgeries on minors.

In this section, "Gender transitioning surgery" means, for the purpose of transitioning a child's biological sex as determined by the sex organs, chromosomes, and endogenous profiles of the child:

(1) a surgery that sterilizes the child, including:

- (A) castration;
- (B) vasectomy;
- (C) hysterectomy;
- (D) oophorectomy;
- (E) metoidioplasty;
- (F) orchiectomy;
- (G) penectomy;
- (H) phalloplasty; and
- (I) vaginoplasty;

(2) or a mastectomy of a female

(3) or breast augmentation of a male.

Health and Human Services Commission, Article II
Proposed Rider
Prohibition of Funds

Prepared by LBB Staff, 03/02/23

Overview

Add rider to prohibit the Health and Human Services Commission from using appropriations towards certain medical treatment and procedures.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Prohibition of Use of Appropriated Funds for Transgender Treatment.

The Health and Human Services Commission (HHSC) may not use appropriated funds for the provision of gender transitioning or gender reassignment procedures and treatments to individuals for the purpose of transitioning a person's biological sex organs, chromosomes, and endogenous profiles of the individual or affirming the individual's perception of the individual's sex if that perception is inconsistent with the individual's biological sex. Specifically, funds may not be used for the following:

- a. To perform a surgery that sterilizes the child, including:
 - (1) castration;
 - (2) vasectomy;
 - (3) hysterectomy;
 - (4) oophorectomy;
 - (5) metoidioplasty;
 - (6) orchiectomy;
 - (7) penectomy;
 - (8) phalloplasty; and
 - (9) vaginoplasty;
- b. To perform a mastectomy;
- c. To provide, prescribe, administer, or supply any of the following prescription drugs that induce transient or permanent infertility:
 - (1) puberty suppression or blocking prescription drugs to stop or delay normal puberty.
 - (2) supraphysiologic doses of testosterone to females; or
 - (3) supraphysiologic doses of estrogen to males; or
- d. To remove any otherwise healthy or non-diseased body part or tissue.

This prohibition does not apply to the provision by a physician or health care provider, with the consent of the child's parent or legal guardian, of appropriate and medically necessary gender transitioning or gender reassignment procedures or treatments to a child who:

- a. is born with a medically verifiable genetic disorder of sex development, including
 - (1) 46,XX chromosomes with virilization;
 - (2) 46,XY chromosomes with undervirilization; or
 - (3) both ovarian and testicular tissue; or
- b. does not have the normal sex chromosome structure for male or female as determined by a physician through genetic testing.

The expenditure of any public funds for the purposes outlined in the provisions shall result in a freeze of all state funding of HHSC, until such time as the Office of the Attorney General can conduct an investigation into the agency's compliance with these provisions.