82nd Session Select Interim Charges
Relating to Health and Human Services
February 17, 2012

Health & Human Services Committee

- Monitor the potential impact of the Patient Protection and Affordable Care Act (PPACA) on insurance regulations, Medicaid and Children's Health Insurance Program (CHIP), health care outcomes, health care workforce, overall health of all Texans, and the state budget in Texas. Additionally, monitor the current constitutional challenges to PPACA, and other court cases associated with PPACA, and ensure that the state does not expend any resources until judicial direction is clear. (Joint charge with Senate State Affairs Committee)

- Evaluate the implementation of cost-containment strategies across the Health and Human Services Enterprise to determine if and how each strategy can be expanded upon to achieve additional savings next biennium. The evaluation should include but is not limited to: the expansion of managed care, co-pays in Medicaid, electronic visit verification, and independent assessments for long-term care services. The evaluation should also consider new cost-containment strategies that will increase efficiencies and reduce costs. This evaluation should include but not be limited to: Medicaid, Early Childhood Intervention Services, and immunizations.

- Review the state's current investment in health care innovation, including translational research and the Cancer Prevention Research Institute, which focuses on rapid transfer of new technology experimentation directly into the clinical environment. Make recommendations to improve the health of Texans and encourage continued medical research in the most cost-effective manner possible.

- Review existing policies for prior authorization and medical necessity review across the Medicaid Program, including nursing homes and orthodontic services. Make recommendations on how these policies could be improved to save money by reducing unnecessary utilization and fraud.

- Review the Medicaid Home and Community Based Services Waivers to identify strategies to lower costs, improve quality, and increase access to services. Areas of the review should include, but are not limited to:
  - Functional eligibility determinations to ensure services are only being delivered to individuals that qualify;
  - Financial eligibility determinations to ensure parental income and resources are considered when the client is a minor;
- Coordination of acute and long-term care services;
- Development and use of lower-cost community care waiver options;
- Coordination with the Department of Family and Protective Services (DFPS) for waiver services for children in conservatorships;
- Reinvesting savings into accessibility of community care for individuals waiting for services.

- Evaluate the management structure and supervision of CPS caseworkers with an emphasis on rural areas. Identify any legislative changes that could assist DFPS in maximizing efficiency, improving quality casework and supervision, and increasing caseworker retention. Identify any legislative changes that could improve the quality of care children receive while in Child Protective Services custody, including improving permanency outcomes.

- Examine the delivery and financing of public health services in our state, including how federal funds are distributed by the state to local health departments and whether the work done by Regional Health Departments operated by the Department of State Health Services overlap unnecessarily with local health departments.

- Review the state's public mental health system and make recommendations to improve access, service utilization, patient outcomes and system efficiencies. Study current service delivery models for outpatient and inpatient care, funding levels, financing methodologies, services provided, and available community-based alternatives to hospitalization. The review should look to other states for best practices or models that may be successful in Texas. The study shall also review and recommend “best value” practices that the state's public mental health system may implement to maximize the use of federal, state, and local funds.

- Monitor the implementation of legislation addressed by the Senate Committee on Health and Human Services and make recommendations for any legislation needed to improve, enhance, and/or complete implementation, including but not limited to:
  - Health Care Quality and Efficiency – Monitor implementation of initiatives aimed at improving health care quality and efficiency in Texas, including: the transition of Medicaid and the CHIP to quality-based payments, establishment of the Texas Institute of Health Care Quality and Efficiency, implementation of the Health Care Collaborative certificate, patient-centered medical home for high-cost populations, development and use of potentially preventable event outcome measures, and reduction of health care-associated infections. Include recommendations on how to improve and build upon these initiatives, including improving birth outcomes and reducing infant and maternal mortality;
  - Federal Flexibility – Monitor implementation of initiatives to increase state flexibility, including the Health Care Compact and the Medicaid Demonstration Waiver;
  - Foster Care Redesign – Monitor implementation of the initiative to redesign the foster care system;
  - Implementation of DOJ Settlement agreement to address State Supported Living Center concerns.