



HHSC: Policy Council for Children and Families, November 16th, 2020



The [Policy Council for Children and Families](#) works to improve the coordination, quality, efficiency, and outcomes of services provided to children with disabilities and their families through the state's health, education, and human services systems.

Members appear below:

Margaret McLean, MSN, Chair Family Representative Dallas Martha Aguilar Advocacy Organization Representative Austin Lisa Brodie Family Representative Deer Park Sara Daugherty-Pineda, MSN Community Services Representative Coppell Nicole Dilts, PhD Family Representative San Angelo Julie Ivey-Hatz, PhD, LSSP Mental Health Expert Representative China Spring Lisa Gore Family Representative Tulia Mary Klentzman Faith-based Representative Plano Michael Lindsey Representative providing general expertise Dallas	Chris Masey Family Representative Austin Nicolas Morales Youth Representative San Antonio Christine Murphy Physician Representative Dickinson Jessica Ochoa Family Representative Mission Matthew Okoro Family Representative Friendswood Keisia Sobers-Butler Family Representative Corpus Christi Janis Townsend, MA Family Representative Coppell Elizabeth Tucker Advocacy Organization Representative Austin Lori Urbina-Patlan Family Representative Edinburg
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Welcome and introductions. The meeting was convened by the Chair, Margaret McLean. A quorum was present. Access the [meeting presentation here](#).

Review and approval of meeting minutes from September 10, 2020, meeting. The minutes were approved as written.

Update on Implementation of the Medicaid Autism Services Benefit. Rider 32 directed IBI Services including ABA in the home and clinical settings employing health professionals,

family members and others. Appropriated funds may be used for the benefit, but no additional funding was provided.

Accomplished so far:

- Medical benefit policy has been developed using public input
- Draft medical policy has been posted and 68 comments were submitted
- Comments have been analyzed
- Draft MCO contract language has been developed
- State plan and waiver amendment has been drafted
- Enrollment system has been updated for LBA (Licensed behavioral analysis)
- Systems for prior authorization and non-risk payment approaches have been developed
- Letter to LBB seeking to approve rates for the new benefit
- Developed a non-risk payment process

Still needed to be done:

- 6-8 months to implement the benefit
- Public rate hearing
- Finalization of the rates
- Additional public notices issued
- MCO time for onboarding staff
- Updates to the procedure manual.

An example of no-risk payment approach is when the capitation rate is replaced with a type of fee-for-service payment to the MCO based on what they pay to the provider. This is used for higher cost services when no history of cost is available.

Questions/Answers/Comments

When would the implementation occur? LBB would approve the rates but is it not tied to the legislative session.

Right now the process is to work with the LBB to approve the proposed fiscal impact including the rates to providers.

If LBB approves this, what kinds of funds are available in the next budget to support the approved rates? HHSC stated that all of this is still in flux and they will get back to the committee. In the LAR, there is zero dollars allocated to this. Rider 32 has been struck from the LAR. This raised some concern with the Council. HHSC is still moving forward with the benefit as required by rider 32 (rider 32 will still govern actions through September 1, 2021).

Is the newly codified language available to the public? HHSC stated they would take that back and see what could be done.

Update: New member appointment process.

ACCO Office Process:

- Draw from the expiring members 2020 group
- 4 positions still expire in 2020
- 5 expire in 2021
- For the group that expires in 2022, add the new category for the ASD professional, then we would have 5 expire in 2022 and 5 in 2023. Categories that need to be solicited:
 - Family member of child with ASD (new)
 - Family member of child with disability
 - Family member of child with MH needs
 - Youth rep
 - Faith-based rep
 - Org that is an advocate for children with disabilities
 - Org or professional who advocates for or provides services or resources to children and the families of children with ASD (new)
 - Individual with expertise providing MH services to children with disabilities

Application process will open in the next few months.

- One-month application deadline Members with expiring terms (Dec 31st):
 - Chris Masey, Elizabeth Tucker, Janis Townsend, Jessica Ortega-Ochoa, Lisa Brodie, Nicole Dilts, Julie Ivy Hatz, Mary Klentzman
 - All members continue on the PCCF until an appointment is made

Update: Legislative report process and timeline

This is a project close out meeting and the report has basically been finalized.

Legislative Recommendations:

- Workgroup 1: Transition Care Clinics for adults
- Workgroup 2: Medicaid Buy-In for children and adults
- Workgroup 3: Reducing Medicaid Waiver Interest List and promoting Independence
- Workgroup 4: Crisis Intervention and Respite Care
- Workgroup 5: Disaster and Emergency Preparedness- COVID-19

Next Steps include:

- Report distributed by Chair to the standing committees of the Texas senate and house with primary jurisdiction over health matters
- Report posted to the PCCF website
- Council educational activities

- February 2021- Legislative Report to be presented to the Executive Council

For a copy of the completed report, please follow [this link](#).

There was a discussion on holding a zoom meeting with legislative staff to present the recommendations and issues addressed by the council. Also members were told to reach out to their local House and Senate representatives. A subcommittee was suggested to create a strategy for outreach.

Planning 2021

Potential Future Presentation Topics

- Children's Medical to Aetna Transition.
- Updates about MDCP extensions. Parents are not receiving confirmation of extension date
- Status of prior authorizations. Hearing from families that prior authorizations are not making it to providers to continue services
- Status of kids with commercial insurance as primary not being able to add their commercial PCP to account.
- Status of medication authorizations. Hearing from some parents that were told medication authorizations would be extended for 90 days but were not
- A representative from TDLR to discuss the Texas Architectural Barrier Law. There is a lot of new construction in Texas, especially schools, and there are still a great deal of issues with accessibility.
- Peggy McManus from Got Transition to speak on the work they are doing to improve healthcare transition for children
- TEA and TEA and the pandemic
- EVV since people using CDS are going to have to start using EVV in January due to Cures Act
- Assessment for children through the school district and the proper personnel.
- Flexibilities through the Medicaid waivers and telehealth. Monitoring developments that have emerged from the pandemic. What will be sustained and what will continue to be offered.
- A forum for service providers to air some of their issues
- Jointly present issues for providers as well as stakeholders and consumers
- A parent CNA program.
- Non-emergency transportation services carve in to MCOs (Goes live June 1st).
- Medical providers notes being made available to parents and privacy concerns (CRES Act).

Tentative Meeting Dates:

- 2/10/2021
- 4/27/2021

- 8/31/2021
- 11/17/2021

Public Comment

There was one written public comment and it is summarized below.

Texas Association for Behavioral Analysis commented on rider 32. The speaker stated that the ABA services are not being received and they encourage HHSC to complete the preparation of the policy and implementation of the service. They suggested that HHSC conduct a rate hearing this fall and it should include telehealth. Rates must be sufficient to attract the professionals needed to provide the services. There are several billing codes and the proposed rates are inadequate— the 97153 code is the most commonly used and is one of the least adequate.

Oral Public Comment

Berenice Dela Cruz, Texas Association for Behavioral Analysis, spoke on the Autism benefit. She stated the importance of moving forward with a rate hearing so services will be made available. Telehealth has to be part of the strategy. There are many families who live remotely and there is an absence of behavior analysts. We have to look at rates and where they are set. There are waiting lists even for public insurance. 91% of ABA providers stated that they want to be Medicaid providers. When they were told the rate the number dropped to 17%.

Action items for staff and/or member follow-up.

- Notify members with expiring terms
- Follow up to get distribution list for report
- Virtual meeting for legislative staff
- Web page for the archived meetings
- Future meetings on IDD carve in status and other points raised above

Adjourn. There being no further business, the meeting was adjourned.

This summary contains supplemental information from third-party sources where that information provides clarity to the issues being discussed. Not every comment or statement from the speakers in these summaries is an exact transcription. For the purpose of brevity, their statements are often paraphrased. These documents should not be viewed as a word-for-word account of every meeting or hearing, but a summary. Every effort has been made to ensure the accuracy of these summaries. The information contained in this publication is the property of the organization and is considered confidential and may contain proprietary information. It is meant solely for the intended recipient. Access to this published information by anyone else is unauthorized unless the organization grants permission. If you are not the intended recipient, any disclosure, copying, distribution or any action taken or omitted in reliance on this is prohibited. The views expressed in this publication are, unless otherwise stated, those of the author and not those of the organization or its management.
