



# **Article II Markup by the Article II Subcommittee of the House Appropriations Committee – As of March 22, 2021**



Article II Markup as of March 22, 2021. Due to face masks, social distancing, and low speaking voices, a few decisions could not be clearly understood. These are noted. Every effort was made to report the decisions as accurately as possible. The Subcommittee used a new convention called “Pend Plus” to designate a high priority if dollars are found to fund the item. This report does not contain member-specific riders which will be considered on March 23rd.

*\* Working Paper Prepared by Legislative Budget Board Staff. Notes provided by TXI Reporter.*



Article II, Health and Human Services Department of Family and Protective Services (530) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated                      All Funds		
<b><u>Cost-Out Adjustments:</u></b>				
1.	Align GR-D Account 5084, Child Abuse and Neglect Prevention Operating, with the Biennial Revenue Estimate.  <b>This would result in a savings to the bill.</b>	\$ (2,801,403)	\$ (2,801,403)	Adopted
<b><u>Technical Adjustments:</u></b>				
1.	Reflect transfer of Adult Protective Services - Provider Investigations and Child Care Licensing Full-time Equivalent (FTE) positions from the Department of Family and Protective Services (DFPS) to the Health and Human Services Commission (HHSC).  See HHSC Technical Adjustment #2.	\$ (1,441,960)	\$ (1,575,182)	Adopted
2.	Reallocate General Revenue from HHSC to DFPS for Centralized Accountings and Payroll/Personnel (CAPPS) Compliance Updates and increase interagency contracts at HHSC by a like amount.  See HHSC Technical Adjustment #3	\$ 3,478,724	\$ 3,478,724	Adopted
<b><u>Agency Requests:</u></b>				
1.	Sustain Child Protective Services (CPS).			

Article II, Health and Human Services Department of Family and Protective Services (530) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated      All Funds		Decision/ Comments
a.	Maintain Purchased Client Services at Current Levels.  Funding would maintain the higher fiscal year 2020 base amounts which included transfers to purchased client services strategies B.1.4, Adoption Purchased Services, B.1.7, Substance Abuse Purchased Services and B.1.8, Other CPS Purchased Services.  <b>House Bill (HB) 1 includes a total of \$127.5 million in All Funds for these strategies.</b>	\$ 35,081,852	\$ 35,084,832	Pend Plus
b.	Foster Care Payments.  Funding would align to the agency's forecasted need.  <b>HB 1 includes \$1,088.8 million in All Funds to align to the LBB forecast.</b>	\$ 84,152,509	\$ 55,290,117	Pend Plus
c.	Partially Restore Travel Funding for CPS Staff.  The request would restore travel funding for CPS staff that was included agency's five percent reduction plan. DFPS will continue a reduction to the mileage reimbursement.  <b>HB 1 includes a total reduction of \$10.1 million in General Revenue for travel and mileage reimbursement across all programs.</b>	\$ 8,413,547	\$ 9,305,374	Adopted



Article II, Health and Human Services Department of Family and Protective Services (530) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated                      All Funds		
2	Comply with Federal Court Order in Foster Care Lawsuit.  <b>HB 1 does not include any funding for the requested items.</b>			
a.	Staff to Remain within Court Mandated Caseload Guidelines.  Funding would provide staff and funding to meet the fiscal year 2021 CVS target of 16.2 children per worker. FTE request totals 253.0 in fiscal year 2022 and 312.0 in fiscal year 2023  192.0 Conservatorship (CVS) Staff 27.0 CVS Supervisors 27.0 CVS Case Aids 27.0 CVS Administrative Assistants 5.0 CVS Program Directors 5.0 CVS Program Director Clerks 1.0 CVS Program Administrator 1.0 CVS Program Administrator Assistant 27.0 Non-Direct Delivery Staff (Administrative Support)	\$ 36,404,104	\$ 40,194,026	Adopted
b.	Heightened Monitoring of Residential Facilities.  Funding would provide 103.0 additional staff which DFPS has identified as necessary to comply with the heightened monitoring requirements included in the lawsuit. These include Facility Intervention Team Staffing (FITS), staff to respond to FITS team findings, and a Child Safety Response Team.	\$ 15,266,058	\$ 16,489,280	Adopted

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	GR & GR- Dedicated	All Funds	
c. Residential Child Care Investigations Staff.  Funding would support the increased number of Investigations staff required after the DFPS implemented policy changes that eliminated the majority of reclassifications of intakes to Priority None.	\$ 7,951,931	\$ 8,073,096	Adopted
d. Permanent Management Conservatorship Case Reads.  Funding would provide staff to meet the lawsuit requirement to maintain documentation involving all children in PMC who were alleged victims or aggressors/perpetrators of child sexual aggression and/or sexual abuse.	\$ 676,448	\$ 747,752	Adopted
e. IT Projects to Meet Case Orders.  Funding would update Information Management Protecting Adults and Children in Texas (IMPACT) and the DFPS Case Management System.	\$ 3,122,001	\$ 3,557,213	Under the responsibility of a different subcommittee
f. Court Monitor Fees.  Represents only the DFPS portion of costs. See also HHSC agency request #2a which totals \$6,239,798 in All Funds.	\$ 19,680,000	\$ 19,680,000	Adopted





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g.	FTE Authority for Current Compliance Related Staff.	\$	-	\$	-	Adopted
	This item maintains existing FTE authority created within the agency for lawsuit compliance.  This item has no cost.					
3	Expand Community-based Care.  HB 1 includes a total of \$450.6 million in All Funds for Community-based Care in Stages I and II in Regions 3B and 2 and Stage I in Regions 8A and 1.					The decision for all of Expanded Community Care Items was either pended or placed in article Eleven. The decision was not clear
a.	Region 8A, Stage II.  Funding includes costs to implement Stage II andrelated case oversight staff.	\$	40,565,152	\$	43,288,796	
b.	Region 8B, Stage I.  Funding includes costs to implement Stage I.	\$	4,525,590	\$	4,581,351	
c.	Region 1, Stage II.  Funding includes costs to implement Stage II and related case oversight staff.	\$	22,368,219	\$	23,988,535	
d.	Region 8B, Stage II.  Funding includes costs to implement Stage II andrelated case oversight staff.	\$	6,996,094	\$	7,404,496	



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e.	Region 3E, Stage I.  Funding includes costs to implement Stage I and for staff for administration, contract management, implementation support and finance.	\$ 6,822,043	\$ 7,011,726	
f.	Region 9, Stage I.  Funding includes costs to implement Stage I and for staff for administration and contract management.	\$ 1,996,667	\$ 2,044,634	
g.	Region 4, Stage I.  Funding includes costs to implement Stage I and for staff for administration and contract management.	\$ 2,109,505	\$ 2,159,089	
h.	Region 5, Stage I.  Funding includes costs to implement Stage I and for staff for administration and contract management.	\$ 1,504,614	\$ 1,543,141	
i.	Random Moment in Time Study for CBC Stage II.  Funding to establish a cost allocation methodology in alignment with the agency's approved DFPS Public Assistance Cost Allocation plan for any Region entering stage II of CBC.	\$ 350,000	\$ 350,000	
4	Expand Prevention Services.			





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a.	STAR (Family and Youth Success Program).  Funding would provide services for an additional 4,133 families.  <b>HB 1 includes \$48.8 million in All Funds.</b>	\$ 3,886,304	\$ 3,886,304	Pend Plus
b.	Healthy Outcomes through Prevention and Early Support (HOPES).  Funding would provide services for an additional 1,429 families.  <b>HB 1 includes \$47.8 million in All Funds to serve 7,948 families.</b>	\$ 4,286,312	\$ 4,286,312	Pend Plus
c.	Prevention Services for Military and Veteran Families.  Funding would provide services for an additional 1,101 families.  <b>HB 1 includes \$3.2 million in General Revenue to serve 1,762 families.</b>	\$ 1,000,000	\$ 1,000,000	Pend Plus
d.	Staffing Support for Prevention Services.  Funding would provide contract management support.  <b>HB 1 includes \$15.1 million in All Funds for Strategy 3.1.6, Provide Program Support for At-Risk Prevention Services.</b>	\$ 827,384	\$ 827,384	Article Eleven

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5.	Family First Prevention Services Act (FFPSA).  This item serves as a placeholder to discuss implementation of the federal bill.  <b>HB 1 does not include federal funding or assumed General Revenue losses for FFPSA.</b>	\$ -	\$ -	Adopt \$33.9 million and explain through a rider
6.	Data Center Services Consolidation.  Funding would maintain ongoing and cost increases due to transition to a new Microsoft Office 365 Enterprise Licensing model.  <b>HB 1 includes \$18.0 million in All Funds.</b>	\$ 3,146,126	\$ 3,433,847	Under the responsibility of a different subcommittee
7.	Realign Screener Staff from CPS to Statewide Intake.  This item would transfer the screener function, including FTEs and funding, to Statewide Intake to focus on screening cases of abuse and neglect earlier in the process.  <b>This item has no cost.</b>	\$ -	\$ -	Adopt
8.	Funding for Adult Protective Services Program Support. Funding would maintain fiscal year 2021 base funding level.  <b>HB 1 includes \$8.4 million in All Funds.</b>	\$ 636,188	\$ 654,798	Pend

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9	General Revenue for Projected Children's Trust Fund Revenue Loss.  Due to long-term declining marriage license revenue, requested funding would replace the related dedicated revenue with General Revenue.  <b>HB 1 includes \$11.4 million in GR-D Account 5084, Child Abuse and Neglect Prevention Operating.</b>	\$ 4,771,403	\$ 4,771,403	Pend plus \$2.9 million
10	Revise Rider 5, Limitation on Transfers: Foster Care, Adoption Subsidy, Permanency Care Assistance, and Relative Caregiver Payments, to require notification instead of written approval for transfers into or out of the foster care, adoption subsidy, permanency care assistance and relative caregiver strategies.	\$ -	\$ -	Article Eleven
11	Revise Rider 6, Other Reporting Requirements, to submit quarterly reports within 60 days of the end of the fiscal quarter instead of 30 days.	\$ -	\$ -	Article Eleven
12	Revise Rider 7, Limitation on Expenditures for Texas Workforce Commission (TWC) Contracted Day Care, to require written notification instead of written approval for transfers into or out of the day care strategy.	\$ -	\$ -	Article Eleven
13	Revise Rider 10, Limitation on Transfers: CPS and APS Direct Delivery Staff, to require written notification instead of written approval for transfers into or out of direct delivery strategies.	\$ -	\$ -	Article Eleven



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14	Revise Rider 11, Medicaid and Title IV-E Federal Funds, to require written notification · instead of written approval to expend General Revenue and TANF federal funds freed up by increased federal entitlement funds.	\$ -	\$ -	Article Eleven
15	Revise Rider 27, Limitations: Community-based Care Payments, to require written · notification instead of written approval for transfers into the direct delivery staff strategy and request to report actual expenditures within 60 days of the end of the fiscal quarter instead of 30 days.	\$ -	\$ -	Article Eleven
16	Revise Rider 31, Purchased Client Services Reporting and Limitations, to change the report · due date from November 1 to January 1 and request to require written notification instead of written approval for transfers into or out of the purchased client services strategies.	\$ -	\$ -	Article Eleven
17	Revise Rider 36, Community-based Care Oversight Staff, to update strategy reference. ·	\$ -	\$ -	Adopted
18	Add Rider 38, Community-based Care Stage III Incentives and Penalties, to authorize DFPS · to award incentives and issue financial remedies related to provider performance.	\$ -	\$ -	Adopted

Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced	Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated		All Funds	
<b><u>Cost-Out Adjustments:</u></b>				
<p>1. Increase General Revenue-Dedicated Account No. 5048, Permanent Hospital Fund for Capital Improvements and the Texas Center for Infectious Disease, appropriations by \$13,271 in fiscal year 2020 and \$27,706 in fiscal year 2021 to align with the Comptroller's Biennial Revenue Estimate and reduce General Revenue by a like amount.</p> <p>Also, revise Rider 20, Permanent Hospital Fund.</p> <p><b>This would result in a savings to the bill.</b></p>	\$ -	\$ -	Adopted	
<p>2. Reduce General Revenue-Dedicated Account No. 524, Public Health Services Fee, by \$5,843,372 to align with the Comptroller's Biennial Revenue Estimate and increase General Revenue by a like amount.</p> <p>See Department of State Health Services (DSHS) Technical Adjustment #3.</p>	\$ -	\$ -	Adopted	
<b><u>Technical Adjustments:</u></b>				
<p>1. Reflect transfer of 10.0 Full-time Equivalent (FTE) positions from the Health and Human Services Commission (HHSC) to the Department of State Health Services (DSHS) for Texas Center for Infectious Disease security positions.</p> <p>See HHSC Technical Adjustment #1.</p>	\$ -	\$ -	Adopted	
<p>2. Reallocate General Revenue from HHSC to DSHS for Centralized Accountings and Payroll/Personnel (CAPPS) Compliance Updates and increase interagency contracts at HHSC by a like amount.</p> <p>See HHSC Technical Adjustment #3.</p>	\$ 915,676	\$ 915,676	Adopted	

Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated                      All Funds		
3. Revise DSHS Rider 7, Appropriation: Contingent Revenue, to have additional revenue received by DSHS above the Biennial Revenue Estimate from General Revenue-Dedicated Account No. 524, Public Health Services Fee, result in an equivalent reduction in General Revenue up to \$5,843,372.  See DSHS Cost-Out Adjustment #3.		\$ -	\$ -	Adopted
<b><u>Agency Requests:</u></b>				
1. Rural and Frontier Public Health (36.0/36.0 FTEs).  Funding would provide for 14 additional rural and frontier public health field offices and 30.0 FTEs to provide essential public health services including surveillance, treatment, and prevention of infectious disease. Funding would also provide for 3 mobile clinic vehicles and 6.0 FTEs to serve harder-to-reach areas.		\$ 13,058,537	\$ 13,058,537	Pend plus (only the mobile unit)  Pend the staffing
2. Consumer Protection and Safety a. Food Safety FTEs (25.0/25.0).  Funding would provide \$3,881,181 for 25.0 additional Food Safety FTEs to address deficiencies identified in an audit related to providing an adequate level of licensure, inspection, and enforcement activities; funding would also provide \$2,012,070 to increase salaries to prevent turnover in public health sanitarian positions.		\$ 5,893,251	\$ 5,893,251	Pend

Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced	Items Not Included in HB 1 2022-23 <u>Biennial Total</u>		
	GR & GR- Dedicated	All Funds	
b. Hemp Program (3.4/3.4 FTEs).  Funding would provide for additional FTEs for the hemp program to align with anticipated license and registrations, product testing, and enforcement activities.  <b>House Bill 1 (HB 1) includes \$1.2 million in General Revenue and 4.2 FTEs for hemp regulation.</b>	\$ 590,470	\$ 590,470	Pend
c. Customer Service Efficiency (1.0/0.0 FTEs).  Funding would improve the functionality of the online licensure and registration system to address delays in processing times for inspecting, licensing, and relicensing businesses regulated by DSHS.  Also, revise Rider 2, Capital Budget.	\$ 1,181,028	\$ 1,181,028	Responsibility of another Subcommittee
3 Effective Business Operations			
a. Fiscal Management FTEs (25.0/25.0 FTEs).  Funding would provide \$4,593,714 for additional Fiscal Management FTEs and \$2,964,464 to increase salaries to reduce turnover to ensure sufficient monitoring of awarded and appropriated funds including timely billing, payment, and cost recoupment.	\$ 7,558,278	\$ 7,558,278	Article Eleven



Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated      All Funds		
b. Data Center Services.		\$ 21,860,014	\$ 21,860,014	Responsibility of another Subcommittee
<p>Funding would provide for ongoing and increased costs for Data Center Services following significant upgrades to infectious disease surveillance systems.</p> <p>Also, revise Rider 2, Capital Budget.</p> <p><b>HB 1 includes \$27.4 million in All Funds for Data Center Services.</b></p>				
c. Health Registries (1.0/1.0 FTE).		\$ 5,362,139	\$ 5,362,139	Responsibility of another Subcommittee
<p>Funding would provide for a system viability assessment for the information technology platform used for DSHS health registries including the Texas Birth Defects Registry, Blood Lead Registry, Tuberculosis/Human Immunodeficiency Virus/Sexually Transmitted Diseases Integrated System, and the Emergency Medical Services and Trauma Registry.</p>				
d. Vital Statistics FTEs (10.0/10.0 FTEs).		\$ -	\$ -	Adopted
<p>This item would provide FTE authority only for Vital Statistics to support DSHS in maintaining a low backlog of vital records requests.</p> <p><b>This item has no cost.</b></p> <p><b>HB 1 includes 180.5 FTEs in Vital Statistics.</b></p>				

Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23</u> <u>Biennial Total</u> GR & GR- Dedicated All Funds		
e. Texas Center for Infectious Disease (TCID) Repair and Renovation.  This item would provide \$888,000 in capital budget authority for TCID Repair and Renovation to replace and repair the chiller, hospital room equipment, and kitchen equipment.  Also, revise Rider 2, Capital Budget.  <b>HB 1 includes funding for TCID, agency is requesting capital budget authority only.</b>  <b>This item has no cost.</b>		\$ -	\$ -	Responsibility of another Subcommittee
4. HIV/STD Medication Funding.  This item serves as a placeholder for a request for funding due to higher than expected costs for HIV medications. The agency has not provided an amount yet.  <b>SB 1 includes \$247.9 million in All Funds for HIV/STD Medications.</b>		\$ -	\$ -	Pend Plus
5. Revise Rider 3, Appropriations Limited to Revenue Collections, to remove accounts in which recommendations exceed projected revenue collections.		\$ -	\$ -	Adopted as Amended
6. Revise Rider 7, Appropriation: Contingent Revenue, to add revenue object 3554 in the General Revenue Fund for consumable hemp products and to add a contingency that allows the agency to increase FTEs if additional revenue from hemp is available.		\$ -	\$ -	Adopted as Amended



Article II, Health and Human Services Department of State Health Services (537) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23</u> <u>Biennial Total</u> GR & GR- Dedicated                      All Funds		
7.	Revise Rider 22, Maternal Mortality and Morbidity, to update method-of-finance from Federal Funds to All Funds to allow flexibility in funds used for the programs.	\$ -	\$ -	Adopted
8.	Revise Rider 27, HIV Care Formula Grants, to have rider require notification if DSHS expends HIV Care Formula Grants in excess of the appropriated amount instead of if DSHS expends the upcoming year's award in the current year.	\$ -	\$ -	Adopted as Amended by LBB suggestion



Article II, Health and Human Services		Items Not Included in HB 1 <u>2022-23</u>		
Health and Human Services Commission		<u>Biennial Total</u>		
Items Not Included in Bill as Introduced		GR & GR-Dedicated	All Funds	
<b><u>Cost-Out Adjustments:</u></b>				
1. Reduce General Revenue Account No. 8046, Vendor Drug Rebates - Public Health to align with the Comptroller's Biennial Revenue Estimate.  <b>This would result in a savings to the bill.</b>		\$ (6,623,946)	\$ (6,623,946)	Adopted
<b><u>Technical Adjustments:</u></b>				
1. Reflect transfer of 10.0 Full-time Equivalent (FTE) positions from the Health and Human Services Commission (HHSC) to the Department of State Health Services (DSHS) for Texas Center for Infectious Disease security positions.  See DSHS Technical Adjustment #1.		\$ -	\$ -	Adopted
2. Reflect transfer of Adult Protective Services - Provider Investigations and Child Care Licensing FTEs from the Department of Family and Protective Services (DFPS) to HHSC.  See DFPS Technical Adjustment #1.		\$ 1,441,960	\$ 1,575,182	Adopted
3. Reallocate General Revenue to DSHS and DFPS for Centralized Accountings and Payroll/Personnel (CAPPS) Compliance Updates and increase interagency contracts at HHSC by a like amount.  See DFPS Technical Adjustment #2 and DSHS Technical Adjustment #2.		\$ (4,394,400)	\$ (4,394,400)	Adopted

<b>Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced</b>		<b>Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR &amp; GR- Dedicated                      All Funds</b>		
4.	Reallocate \$10.0 million in General Revenue from Strategy D.2.1, Community Mental Health Services - Adults, to Strategy D.2.3, Community Mental Health Crisis Services, to restore a transfer associated with the Harris County Jail Diversion program that had been assumed in House Bill 1 (HB 1).	\$ -	\$ -	Adopted
5.	Update method-of-finance listing in Rider 24, Use of Additional CHIP Revenue.	\$ -	\$ -	Adopted
<b><u>Other Budget Recommendations</u></b>				
1.	GR-D Compensation to Victims of Crime Account 469 Balance Deficiency. Amounts in the introduced General Appropriations Bill is projected to result in a negative fund balance at the end of FY 2023. Beginning FY 2022 balances are estimated by OAG to be \$11.2 million with revenues of \$133.7 million over the biennium (total available \$145 million). Funding in the introduced bill, including End of Article benefits includes \$158.8 million, detailed below, resulting in a negative ending balance of \$13.8 million. In addition, the OAG maintains a \$10 million emergency reserve in case crime victim claims exceed projections and an additional 5 percent excess revenue for certification (\$6.2 million) required by statute (Code of Criminal Procedure, Article 56B.460). If those amounts are factored in, the resulting negative balance is \$30.3 million.			Responsibility of Another Subcommittee
	Funding in the introduced bill includes a total of \$158,755,404: - Attorney General: \$125,245,380 - Health and Human Services Commission: \$20,459,688 - End of Article: \$13,050,336			Responsibility of Another Subcommittee



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced	Items Not Included in HB 1 2022-23 <u>Biennial Total</u>		Comments/ Decision
	GR & GR- Dedicated	All Funds	
2. GR-D Sexual Assault Program Account 5010 Balance Deficiency. Amounts in the introduced General Appropriations Bill is projected to result in a negative fund balance at the end of FY 2023. Beginning FY 2022 balances are estimated by OAG to be \$3.7 million with revenues of \$37.8 million over the biennium (total available \$41.5 million). Funding in the introduced bill, including End of Article benefits includes \$52.7 million, detailed below, resulting in a negative ending balance of \$11.2 million.			Responsibility of Another Subcommittee
Funding in the introduced bill includes a total of \$52,677,297: - Attorney General: \$19,208,611 - Governor Trusteed Programs: \$2,000,000 - Health and Human Services Commission: \$10,000,000 - Supreme Court: \$10,000,000 - Department of Public Safety: \$9,900,022 - End of Article (benefits for DPS staff): \$1,558,664			Responsibility of Another Subcommittee
<b><u>Agency Requests:</u></b>			
1. Provide for Client Services Cost Growth in the 2022-23 biennium.			Article Eleven A through D. The Conference Committee will have updated projections
a. Medicaid Entitlement.  <b>HB 1 includes \$66,008.4 million in All Funds for Medicaid entitlement services.</b>	\$ 1,440,969,855	\$ 2,654,236,205	
b. Medicaid Non-entitlement.  <b>HB 1 includes \$3,572.4 million in All Funds for Medicaid non-entitlement client services.</b>	\$ 9,930,076	\$ (27,101,944)	

Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced	Items Not Included in HB 1 2022-23 <u>Biennial Total</u>		Comments/ Decision
	GR & GR- Dedicated	All Funds	
c. Children's Health Insurance Program (CHIP).  <b>HB 1 includes \$1,791.3 million in All Funds for CHIP client services.</b>	\$ 45,919,309	\$ 138,720,061	
d. Temporary Assistance for Needy Families (TANF) Cash Assistance.  <b>HB 1 includes \$93.4 million in All Funds for TANF Cash Assistance.</b>	\$ 8,552,054	\$ 8,552,054	
2 Residential Child Care Regulation (RCCR).			
a. Respond to Foster Care Litigation. (140.9/144.0 FTEs)  Funding would support activities to comply with court order in the foster care lawsuit, including implementing caseload guidelines, performing heightened monitoring of certain residential child care facilities, reimbursing court monitors, and necessary technology changes to the Childcare Licensing Automated Support System (CLASS). Funding would also support a Compliance/Quality Assurance team and support staff.  Also, revise Rider 2, Capital Budget.	\$ 30,952,789	\$ 30,952,789	Adopted
b. Migrate RCCR IT Systems from DFPS to HHSC and Perform Upgrades to WebLogic. (9.0/9.0 FTEs)  Funding would provide for the migration of CLASS, CLASSMate, and Public and Provide systems from DFPS to HHSC. Funding would also upgrade WebLogic.  Also, revise Rider 2, Capital Budget.	\$ 7,280,267	\$ 7,280,267	Responsibility of Another Subcommittee



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced	Items Not Included in HB 1 2022-23 <u>Biennial Total</u>		
	GR & GR- Dedicated	All Funds	
3. Provide Direct Acting Antiviral (DAA) Treatment for Hepatitis C Virus (HCV).			
a. Medicaid.  Funding would provide DAA treatment for an estimated 6,656 Medicaid clients with HCV.	\$ 44,404,579	\$ 112,902,565	Adopted
b. State Hospitals.  Funding would provide DAA treatment for an estimated 280 state hospital residents with HCV.	\$ 2,853,914	\$ 2,853,914	Pend awaiting additional information
4. Community Care Waiver Slots. (56.5/64.5 FTEs)  Funding would provide for additional community care waiver slots, including:  - 224 Community Living Assistance and Support Services (CLASS) slots - 13 Deaf-blind Multiple Disabilities (DBMD) slots - 2,057 Home and Community-based Services (HCS) slots, including 919 slot for Promoting Independence diversion and transition and 1,138 slots for interest list reduction - 185 Texas Home Living (TxHmL) slots - 220 Medically Dependent Children Program (MDCP) slots - 812 STAR+PLUS Home and Community-based Services (HCBS) slots  Funding would also provide additional FTEs to support the new waiver slots by performing eligibility determination and enrollment, utilization review, contract management, and regulatory support.	\$ 74,446,481	\$ 191,097,390	Pend Plus



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated All Funds		
5. Medicaid Management Information System (MMIS) Modernization.				
a. Procurement and Transition.  Funding would support modernization of MMIS, including initial procurements and transition to new vendors.  Also, revise Rider 2, Capital Budget.		\$ 31,644,412	\$ 266,406,192	Responsibility of Another Subcommittee
b. Vendor Drug Program Pharmacy Benefits Services Modernization.  Funding would support transition of the current Vendor Drug Program (VDP) to the VDP Pharmacy Benefits Services Modernization solution.  Also, revise Rider 2, Capital Budget.		\$ 2,928,372	\$ 25,213,488	Responsibility of another Subcommittee
6. Expand Electronic Visit Verification (EVV) to Home Health Services to Comply with 21st Century Cures Act.				
a. Transaction Costs.  Funding would support transaction costs associated with expanding EVV to home health services.		\$ 753,750	\$ 3,015,000	Adopted
b. Update Claims Administrator Systems.  Funding would provide for updates to systems managed by the Texas Claims Administrator which are necessary in order to process claims and EVV data for home health services.		\$ 150,000	\$ 1,500,000	Adopted



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated All Funds		
c.	Update Contracted Vendor Systems.  Funding would provide for update to EVV vendor systems which are necessary to expand EVV to home health services.	\$ 350,000	\$ 3,500,000	Adopted
7.	Information Technology (IT) Threat and System Stabilization and Restoration.			Responsibility of Another Subcommittee (a through d)
a.	System-wide Business Enablement Platform (SWBEP). (15.2/15.2 FTEs)  Funding would support continuation of the SWBEP and migration of the Health and Human Services Enterprise Administrative Reporting and Tracking System (HEART), Chief Financial Officer Financial Support System (CFO-FSS) Automated Services and Reports System, and applications built using the WebSphere platform to the SWBEP.  Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.  <i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i>	\$ 8,444,183	\$ 13,418,742	

Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022- 23 Biennial Total		
		GR & GR- Dedicated	All Funds	
b.	<p>Modernize End-of-Life/End-of-Support Network Equipment. (2.0/2.0 FTEs)</p> <p>Funding would provide for replacement of end-of-life/end- of-support network infrastructure, including: routers; switches; perimeter security protection equipment; firewalls; wireless local area networks; and uninterruptible power supplies.</p> <p>Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>	\$ 35,263,355	\$ 48,983,686	
c.	<p>Cybersecurity Advancement.</p> <p>Funding would support protection of computers, networks, programs, and data from unintended or unauthorized access, change, or destruction.</p> <p>Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>	\$ 2,876,122	\$ 4,426,130	

Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u>		
		GR & GR- Dedicated	All Funds	
d. Stabilization of Enterprise Server and Storage.		\$ 3,104,482	\$ 5,406,153	
<p>Funding would support consolidation of at least 170 local servers to a Department of Information Resources (DIR) data center services storage solution.</p> <p>Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>				
e. Winters Data Center Environment Protection Services.		\$ 755,896	\$ 1,500,000	Pend while the Committee works with other subcommittees.
<p>Funding would support a contract with a professional facility service company or expansion of the current contract with the Texas Facilities Commission (TFC) to provide core facility-related services for the Winters Data Center. Services would include: fire protection; power; cooling and heating ventilation and air conditioning; preventative maintenance; and 24x7 monitoring and onsite repair.</p> <p>Also, revise Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>				
8 Intellectual and Developmental Disability (IDD) System · Redesign.				



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022-23 <u>Biennial Total</u> GR & GR- Dedicated      All Funds	
a. Provide Resources and Technology Changes Necessary to Implement STAR+PLUS Pilot Program (2.0/14.0 FTEs)  Funding would provide infrastructure and resources necessary to implement the STAR+PLUS Pilot Program to test the delivery of long-term services and supports (LTSS) for individuals with intellectual and developmental disabilities (IDD) in managed care.  Also, revise Special Provisions Section 9, System Support Services.  <i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i>		\$ 5,041,340	\$ 19,556,541  Pended
b. IDD Systems Migration. (15.2/15.2 FTEs)  Funding would support technology enhancements for IDD providers, Local IDD Authorities (LIDDAs), and service coordinators.  Also, revise Special Provisions Section 9, System Support Services.		\$ 3,404,293	\$ 32,142,130  Pended
9 Transition Day Habilitation Services to Individualized Skills and Socialization (ISS).			



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 2022- 23 Biennial Total		
		GR & GR- Dedicated	All Funds	
a. Provide ISS Client Services. (0.0/6.0 FTEs)	Funding would support client services costs associated with transitioning day habilitation services in the HCS, TxHmL, and DBMD waivers to ISS in order to comply with federal requirements related to engagement in community life, integrated work environments, and control of personal resources.	\$ 35,252,954	\$ 90,484,201	Adopted
b. Create ISS Registry and Provide Monitoring and Oversight. (0.0/18.0 FTEs)	Funding would provide for creation of a registry of ISS providers. Funding would also support additional FTEs to provide monitoring and oversight of ISS providers and services.  <i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i>	\$ 873,227	\$ 1,696,683	Unclear





Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated                      All Funds		
10	<p>Restore Reductions for Certain IT Projects. (4.1/4.1 FTEs)</p> <p>Funding would restore reductions for the Performance Management and Analytics System and replace lost Federal Funds for Medicaid Enterprise Data Governance.</p> <p>Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>	\$ 9,710,742	\$ 12,548,116	Responsibility of Another Subcommittee
11	State Hospital Construction and Expanded Operations.			
a.	<p>Staff and Operations (260.0/260.0 FTEs).</p> <p>Provide \$29.3 million in General Revenue and 260.0 FTEs to staff 70 new maximum-security beds at Kerrville State Hospital, and \$52.1 million in General Revenue to contract with UT Health Science Center - Houston for a portion of the beds at the new inpatient facility in Harris County.</p>	\$ 81,360,250	\$ 81,360,250	It appears after considerable discussion this was Adopted
b.	<p>Complete Construction Projects.</p> <p>Funding would provide \$124.1 million in General Revenue to finish construction of a replacement campus at Austin State Hospital and \$152.4 million in General Revenue to finish construction of a replacement campus at San Antonio State Hospital.</p> <p>Also, revise Rider 2, Capital Budget.</p>	\$ 276,500,000	\$ 276,500,000	Pend Plus



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated      All Funds		
	c. Begin New Construction Projects.  Provide funding to begin pre-planning and planning efforts to build new inpatient hospitals in the Dallas area (\$44.8 million in General Revenue) and Panhandle region (\$19.8 million in General Revenue), and to begin pre-planning and planning efforts for the replacement of North Texas - Wichita Falls State Hospital (\$21.0 million in General Revenue) and Terrell State Hospital (\$21.0 million in General Revenue).  If funded, HHSC would also need additional FTEs. Estimate TBD.	\$ 106,500,000	\$ 106,500,000	Pend Plus
	12 Facility Repairs and Equipment Replacement at State Supported Living Centers (SSLCs) and State Hospitals.			Decision was Unclear for A, B, C
	a. Deferred Maintenance. (4.1/4.1 FTEs)  Funding would address deferred maintenance needs at the state-owned facilities, including: repairs and renovations for fire, electrical and plumbing systems; anti-ligature remediation; and roofing. Funding would provide the following FTEs: Project Manager (4.0) and Program Specialist (0.1).  Also, revise Rider 2, Capital Budget.  <i>Note: Includes \$46.9 million in MLPP Revenue Bond Proceeds. HHSC would need additional General Revenue to pay for associated debt service if this method-of-finance is adopted.</i>	\$ 47,839,632	\$ 94,756,641	



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR- Dedicated                      All Funds		
	b. Laundry Equipment Replacement.  Funding would provide for replacement of one continuous batch washing system, two dryers, and additional commercial laundry equipment and transport trailers.  Also, revise Rider 2, Capital Budget.	\$ 1,973,500	\$ 1,973,500	
	c. Vehicle Replacement.  Funding would replace 197 vehicles. Also, revise Rider 2, Capital Budget.	\$ 7,850,000	\$ 7,850,000	
	d. IT Infrastructure.  Funding would provide for fiber and cabling projects. Also, revise Rider 2, Capital Budget.	\$ 3,106,672	\$ 3,106,672	Responsibility of Another Subcommittee
13.	Stabilize E-Discovery.  Funding would provide for a digital management system to address litigation, public information requests, investigations, and E-Discovery.  Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.  <i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i>	\$ 4,853,581	\$ 7,150,000	Responsibility of Another Subcommittee
14.	Address Long-term Care Regulatory Backlog. 32			



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced	Items Not Included in HB 1 <u>2022-23 Biennial Total</u>		
	GR & GR- Dedicated	All Funds	
a. Additional Staff. (31.7/31.7)  Funding would provide for additional staff to address a backlog of surveys and intakes in long-term care facilities.	\$ 5,280,363	\$ 5,280,363	Pend Plus
b. Automate Survey Scheduling. (1.0/1.0 FTEs)  Funding would provide for automation of the survey scheduling function within a workload management system.  Also, revise Rider 2, Capital Budget.	\$ 933,750	\$ 1,029,946	Responsibility of Another Subcommittee
c. Restore Five Percent Reduction - Enforcement and Surveyor Staffing and Travel.  Funding would restore certain five percent reductions related to long-term care regulation.	\$ 1,725,086	\$ 2,093,722	Unclear
d. Restore Five Percent Reduction - Data, Complaint and Incident Intake, and Trust Fund Monitoring.  Funding would restore certain five percent reductions related to long-term care regulation and childcare licensing.	\$ 2,865,356	\$ 3,283,024	Unclear
e. Position Reclassification and Salary Increases.  Funding would provide for reclassification of 13.0 FTE positions to Investigator VII. Funding would also provide salary increases for 264.0 nurses.	\$ 12,340,423	\$ 12,340,423	Unclear
f. Contracted Staff.  Funding would provide for contracted staff to address a backlog of long-term care surveys and intakes.	\$ 5,000,000	\$ 5,000,000	Unclear



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR-Dedicated      All Funds		
15.	<p>Migrate the Accounts Receivable Tracking System (ARTS) to CAPPs Financials. (0.2/0.3 FTEs)</p> <p>Funding would support the migration of ARTS to CAPPs Financials.</p> <p>Also, revise Rider 2, Capital Budget, and Special Provisions Section 9, System Support Services.</p> <p><i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i></p>	\$ 5,843,542	\$ 9,579,401	Responsibility of Another Subcommittee
16.	<p>Facility Support Services.</p> <p>Funding would restore facility program support services to the agency's requested All Funds levels.</p> <p><b>HB 1 includes \$21.9 million in All Funds to maintain fiscal year 2021 appropriated levels in each fiscal year of the 2022- 23 biennium.</b></p>	\$ 6,087,150	\$ 6,087,150	Pended



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u>		
		GR & GR-Dedicated	All Funds	
17.	Article II Assessment Costs.  Funding would support provision of administrative and support services to DFPS and DSHS.  Also, revise Special Provisions Section 9, System Support Services.  <i>Note: System Exceptional Item. Includes General Revenue requested on behalf of DFPS and DSHS, which will be reallocated to the agencies as appropriate if adopted.</i>	\$ 14,819,755	\$ 14,819,755	Article Eleven
<b><u>Office of Inspector General (OIG) Exceptional Items</u></b>				
18.	<i>OIG Priority 1:</i> Replace Lost Federal Funds for Clinical Staff.  Funding would replace Federal Funds previously received for clinical staff.	\$ 1,952,790	\$ 4,881,974	Pended awaiting additional information
19.	<i>OIG Priority 2:</i> Access to The Work Number (TWN).  Funding would provide the Beneficiary Program Integrity team access to Equifax's The Work Number for employment verification and income information.	\$ 251,730	\$ 500,000	Adopted
<b><u>Texas Civil Commitment Office (TCCO) Exceptional Items</u></b>				
20.	<i>TCCO Priority 1:</i> Caseload Growth and Housing Rate Increase.  Funding would support projected caseload growth from 439 in fiscal year 2021 to 475 in fiscal year 2022 and 507 in fiscal year 2023. Funding would also provide for a 2.0 percent increase in the per diem rate each fiscal year.	\$ 3,155,832	\$ 3,155,832	Adopted



Article II, Health and Human Services Health and Human Services Commission (529) Items Not Included in Bill as Introduced		Items Not Included in HB 1 <u>2022-23 Biennial Total</u> GR & GR-Dedicated      All Funds		
21	<p><i>TCCO Priority 2:</i> Offsite Healthcare.</p> <p>Funding would support offsite medical care for sexually violence predators above the \$25,000 offsite costs covered under the current contract for the Texas Civil Commitment Center.</p> <p><b>HB 1 includes \$0.8 million in General Revenue for this purpose.</b></p>	\$ 713,424	\$ 713,424	Pended
22	<p><i>TCCO Priority 3:</i> Case Manager Career Ladder.</p> <p>Funding would support continuation of the career ladder for Case Managers based on classification and years of services with TCCO as required by Government Code, Sec. 420A.009.</p>	\$ 68,688	\$ 68,688	Adopted
23	<p><i>TCCO Priority 4:</i> Contracted Professional Audit Services.</p> <p>Funding would provide for a contract with an audit firm to perform the duties of an internal auditor.</p>	\$ 50,000	\$ 50,000	Article Eleven
24	<p><i>TCCO Priority 5:</i> Additional Case Managers. (2.0/2.0 FTEs)</p> <p>Funding would provide for additional case managers and expand case manager coverage to other areas of the state.</p>	\$ 215,543	\$ 215,543	Unclear
<b><u>Agency Rider Requests:</u></b>				





<b>Article II, Health and Human Services</b>	
<b>Health and Human Services Commission (529) Items Not Included in Bill as Introduced</b>	
1 Reinstated former Rider 6, Hospital Reimbursement.	Adopted
2 Delete Rider 4, Hospital Uncompensated Care.	Adopted
3 Amend Rider 11, Medicaid Therapy Services Reporting, to require report to be submitted biannually instead of quarterly.	Adopted
4. Amend Rider 16, Supplemental Payment Programs Reporting and Appropriation Authority for Intergovernmental Transfers, to: <ul style="list-style-type: none"> <li>- update the list of programs included in the report,</li> <li>- add or update other reporting requirements,</li> <li>- provide additional FTE authority at HHSC to implement the extension of the Healthcare Transformation and Quality Improvement 1115 Waiver, and</li> <li>- permit HHSC to create a new capital budget item out of existing appropriations to support monitoring of local funds used in the Medicaid program.</li> </ul>	Adopted
5. Delete Rider 17, Rural Labor and Delivery Medicaid Add-on Payment.	Adopted
6. Delete Rider 23, Improving Access to Pediatric Services.	Not Adopted
<b>WOMEN'S HEALTH</b>	
7. Amend Rider 40, Women's Health Programs: Savings and Performance Reporting, to change certain reporting requirements.	Adopted
<b>OTHER CLIENT SERVICES</b>	
8. Amend Rider 45, Education Funding, to require HHSC to enter into an interagency contract with the Texas Education Agency instead of a Memorandum of Understanding.	Adopted
9. Amend Rider 47, Reporting on Early Childhood Intervention, to change report due date to March 1.	Not Adopted
10. 1. Amend Rider 53, Funding for Child Advocacy Centers Programs and Court Appointed Special Advocate Programs, to change report due date to December 1.	Adopted



<b>Article II, Health and Human Services</b>	
<b>Health and Human Services Commission (529) Items Not Included in Bill as Introduced</b>	
11. Amend Rider 56, Reporting on Population Served, to remove certain reporting requirements for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program.	Adopted
12. Add new Rider X, Independent Living Services Review, to require an annual report and one-time study on independent living services.	Adopted
<b>FACILITIES</b>	
13. Amend Rider 67, State-Owned Housing, to update the listing of positions.	Adopted
<b>OFFICE OF INSPECTOR GENERAL</b>	
14. Add new Rider X, Unexpended Balances: Office of Inspector General, to allow for transfer of unexpended balances within the biennium in Strategies K.1.1, Office of Inspector General, and K.1.2, OIG Administrative Support.	Not Adopted
<b>TRANSFERS</b>	
15. Add new Rider X, Unexpended Balances: Intellectual and Developmental Disabilities Crisis Funding, to allow for transfer of unexpended balances within the biennium for Intellectual and Developmental Disabilities crisis funding.	Not Adopted (Unclear)
<b>ADMINISTRATION</b>	
16. Amend Rider 100, Reimbursement of Advisory Committee Members, to add the Chronic Kidney Disease Task Force.	Adopted
17. Add new Rider X, Staffing in Lieu of Contracted Responsibilities, to provide HHSC with certain FTE authority.	Adopted

<b>Article II, Health and Human Services</b> <b>Special Provision</b> <b>Related to All Health and Human Services Agencies</b> <b>Items Not Included in Bill as Introduced</b>	
<b>Agency Requests:</b>	
1. Section 6, Limitation on Transfer Authority:  HHSC request to allow transfers between all health and human services agencies.	Not Adopted
2. Section 9, System Support Services:  DSHS request to change the method-of-finance to All Funds to allow flexibility in funds used to pay for system support services.  DFPS request to reflect an amended appropriated All Funds for system support services instead of the assessed amount.  HHSC request to change method-of-finance to All Funds and to remove authority to request to transfer certain appropriations.	Partial Adopted As Amended  A conforming change will be made based on funding decisions.
3. Section 11, Appropriation of Receipts: Damages and Penalties:  HHSC request to expand the sources of revenue which count towards the Office of Inspector General's (OIG) contingent appropriation and to remove authority for OIG to retain collection in excess of appropriations.	Adopted as Amended per LBB
4. Section 12, Rate Limitations and Reporting Requirements:  HHSC request to change the scope of the information the agency is required to provide to the Legislative Budget Board regarding managed care rates.	Adopted (though unclear)



<b>Article II, Health and Human Services</b>	
<b>Special Provision Related to All Health and Human Services Agencies</b>	
<b>Items Not Included in Bill as Introduced</b>	
5. Section 14, Limitation: Expenditure and Transfer of Public Health Medicaid Reimbursements:  DSHS request to decrease the amount of Public Health Medicaid Reimbursements appropriated to HHSC and to prioritize distribution of funds to the DSHS Laboratory.	Adopted
6. New Section, Unexpended Balance Authority for Certain Funds Supporting Capital Projects:  HHSC request to provide DFPS and DSHS unexpended balance authority for funds related to system capital budget projects.	Not Adopted (but decision was unclear)

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*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 Texas Insight 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 Texas Insight 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 Texas Insight or its management.*

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