

# House Appropriations

Article II Subcommittee

February 28, 2023



ADVOCACY UPDATE  
TAHP

## Roll Call

**Jetton, Jacey** - Chair - Present

**Rose, Toni** - Vice-Chair - Present

**Gates, Gary** - Present

**Howard, Donna** - Present

**Orr, Angelia** - Present

**Stucky, Lynn** - Present

**Wu, Gene** - Present

## Resources

[Public hearing notice](#)

Videos of hearing

- [Part 1](#)
- [Part 2](#)

## Public testimony

### Part 1

**Jana Eubank**, Texas Association of Community Health Centers (22:30)

Recommendations: continued support for FQAC incubator program, 12 month postpartum Medicaid coverage for women, additional resources to support community partner program for community grants to help with the ending of PHE.

**Howard**: Elaborate on types of clients you see and why we need to expand.

**Eubank**: We see a large number of uninsured and publicly insured. We see a large group of women.

**Howard**: Looking specifically at increasing school-based health centers?

**Eubank**: Yes, want to establish new sites and expand opportunities. Many schools are asking. Primary care and behavioral health.



**Daniel Lund**, CEO CK Family Services (43:00)

Provides services to children in foster care with high needs. Partners with MCOs.

**Rep. Wu:** Do you find STAR Health adequate for the children you serve?

**Lund:** STAR Health has been great. They are great partner. We don't have any issues at all.

**Jamie McCormick**, Texas Alliance of Child and Family Services (46:00)

Supports programs like CK Family Services and other care providers

Supportive of the mental health investments but we need to find a way to bring more providers in.

**Rep. Howard:** Can you tell me more about bringing more providers in?

**McCormick:** There is a pretty rigorous process to bring these programs in and it's a challenge. Additionally, there are only two services reimbursed through Medicaid and I think it be worth looking into what other services would benefit the kids in the STAR Health program.

**Howard:** The regulations you are talking about, are they state or federal?

**McCormick:** State. We are working with HHSC to figure out ways.

**Wu:** Are the rules statutory or rules?

**McCormick:** There is language in statute but my understanding is that there are some things that can be done by the agency.

**Donald Murphy**, Texas Medical Association (57:40)

Funding priorities: tobacco prevention, exceptional item: support work on maternal mortality and morbidity committee, modernize state's public health system, HIV medication assistance program.

**Melissa Sanchez**, Alzheimer's Association (1:03:55)

Request increase in 10 million for the biennium.

**Lindsay Lannigin**, Legacy Community Health (1:16:48)



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Serves 200,000 individuals. Supports 12 month postpartum. Eliminate 3 visit limits for FQAC's.

**Ann Blake**, Texas Medical Association (1:30:40)

Maternal health deserts deprive women of care they need. Asks: support 12 month Medicaid postpartum coverage. Funding for programs to improve prenatal services. Funding to revitalize the Medicaid physician network.

**Howard**: Elaborate significance for your line of work, care before women are pregnant.

**Blake**: Prenatal care is preventive against prematurity, which is a leading cause of death. Primary care is a good way to get this care. Relates to the theme of maternal care deserts. Medicaid is an important part of this, and all forms of access.

**Butch Oberhoff**, Texas EMS Alliance (1:41:55)

100 more EMS trainings going on this year than there were last year. No Medicaid rate increases since 2008/9, in fact have had two decreases. Costs have gone up. Losing qualified EMS professionals at an exceptional rate.

**Ashley Luck**, Texas Pediatric Society (1:49:00)

Asks for targeted Medicaid physician rate increase for services provided to Texans ages 0-3 years old.

**Howard**: Reimbursement rates play a huge part in why people call Medicaid a broken system. Haven't been increased since when?

**Luck**: 25 years.

**Howard**: How many physicians don't take any Medicaid patients?

**Luck**: 38% of physicians

**Howard**: And 21% have to limit.

## Part 2

**Geraldine Bliss** (10:46)

Asks for funding for Project Baby Dillo, to provide genome sequencing for NICU babies.



Child has Phelan-McDermind syndrome which is not tested for on the Texas' Newborn Screening Panel.

**Brett Coghlani**, Texas Ambulance Association (21:22)

Asks for Medicaid increase for EMS. Last time we had an increase was 2009 and it has been cut twice since then.

**Charles Hinkle**, Sacred Cross EMS (39:50)

In 9 counties, run four 911 counties. Only transporter for Denton State Supported Living for the last 15 years. Asks- increase Medicaid reimbursement rates for ground ambulance service.

**Stucky**: Know that pandemic was an added burden. Agree that we need to raise the rates.

**Jennifer Banda**, Texas Hospital Association (1:00:05)

Severe workforce shortage. Support consistent funding, including maintaining Rider that confirms all-funds are level. When it comes to Medicaid, ending of PHE, etc. we support HB 12 and 12-month postpartum coverage. Support applying for IMD waiver. Support one time funding of 50 million for electronic medical record technology, for behavioral health hospitals that did not receive past funds.

**Jetton**: Was there an exceptional item for the software for the mental health side?

**Banda**: There is not, but when considering we would suggest that be a place to put those funds.

**Angela Ott**, Hogg Foundation for Mental Health (1:42:51)

Recommend using these Article II dollars to invest in a workforce pipeline- recruiting and retaining the full spectrum of providers.

**Jackie Benestante**, Autism Society of Texas (2:09:35)

Recommends allocating 70 million dollars in GR per year, add a reporting mechanism to ensure HHSC collects and shares data on how much is being spent, cost per client, and how many are being cared for. Also wants an advisory committee.



**Dennis Borrel**, Coalition of Texans with Disabilities (2:41:35)

Community attendant workforce in Medicaid. Beneficiaries in this program only receiving about 40% of the services they need.

**Rebecca Japco** (2:45:25)

Workforce shortages in SSLC's.

**Henry Van De Putte**, Meals on Wheels (3:07:44)

Meals on wheels seeking increase for common provider meal rate (rate HHS funds home delivered meals). Raise rate to 7 dollars a meal. Would add a lot to the non Medicaid portion of the budget. Would cost less than adding 250 people to a nursing home.

**Anne Dunkelberg**, Every Texan (3:30:25)

Top concerns have to do with unwinding of the PHE. Workload to get work done for this is daunting. Concerned about getting people enrolled in a timely manner, within 45 days federal standard. In support of restoring community level grants to get people to apply and do outreach (largely for rural counties, big cities can afford but less populated areas can't).

**Howard**: Grants. Did we have these, and don't now?

**Dunkelberg**: Yes, when we started the CHIP program that was the first time we really had outreach outside of state agencies. But phased out in the early teens.

**Tyler Sheldon**, Texas State Employees Union (4:08:35)

Turnover crisis in the state. This costs the state 1.3 billion dollars a year. Asking for 10,000 dollars across the board for all state employees.

**Hannah Meta** (4:39:15)

Solution- eliminate waitlists and add immediate access to navigators and support for those who receive prenatal diagnosis of rare disorders.



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## TEXAS ASSOCIATION OF HEALTH PLANS

Meeting Update—February 28, 2023

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