

Rate Hearing: Attendant Services in CLASS, CFC, DAHS, DBMD, PHC, CAS, FC, RC, STAR Kids and STAR Health MDCP, STAR Kids and STAR Health state plan services, and STAR PLUS HCBS and Non-HCBS programs, Effective 9/1/25 July 16, 2025



Summary:

HHSC conducted a public hearing on July 16, 2025 to present and receive feedback on proposed Medicaid payment rate changes for attendant services under the following programs: Community Living Assistance & Support Services Waiver (CLASS), Community Choice First (CFC), Day Activity and Health Services (DAHS), Deaf-blind Multiple Disabilities Waiver (DBMD), Personal Care Services (PCS), Primary Home Care, Community Attendant Services and Family Care (PHC, CAS, FC), Residential Care (RC), STAR Kids and STAR Health Medically Dependant Children's Program (MDCP), STAR Kids and STAR Health state plan services, and STAR+PLUS Home and Community-Based Services (HCBS) and Non-HCBS programs. The new rates will take effect on September 1, 2025.

Attendant services are non-technical, medically related, or personal care services provided to people at home or in community living settings. The Legislature provided \$2.4B in All Funds (SB 1, 89R, Article II, HHSC Rider 23) to increase the base wage for attendants from \$10.60/hr to \$13/hr, increase the payroll costs, taxes, and benefits percentage to 15% for services provided in facility settings and 14% for services provided in non-facility settings, and increase the associated administrative rate by \$0.24 per hour.

View [Agenda](#) and [Rate Packet](#) here.

Key Takeaways:

- Numerous testimonies requested further rate increases from \$13/hr to \$20/hr.
- Cook Children's Health Plan explained that small increases create a lot of work for state agencies, MCOs, and even parents.
- Raising minimum wage without a comparable increase to the agencies would cripple the agencies contracted with the state to provide these services.
- Administrative rate has not kept up with inflation.

Comments on Proposed Rates

HHSC proposes increases to payment rates for personal attendant services in CLASS, CFC, DAHS, DBMD, PHC, CAS, FC, RC, STAR Kids and STAR Health MDCP, STAR Kids and STAR Health state plan services, and STAR PLUS HCBS and Non-HCBS programs in accordance with the 2025-26 General Appropriations Act, Senate Bill 1, 89th Legislature, Regular Session, 2025 (Article II, HHSC, Rider 23), effective September 1, 2025.

- **Nora Estrada, Region 11**

- Happy that ACRE was discontinued. Registered 5-6 times, but was unable to reach the level that she requested for rate enhancement. Each time, no specific reason was given. Provider finance has provided as much information as they could, but no “real information.”
 - Started agency at level 0 (\$8.11—reimbursement at \$12.65) and operated as such for 2 years as rate enhancement was not granted at any higher rate. Overall program increase provided the opportunity to increase reimbursement rate. Second rate at \$10.60 was reimbursed at \$14.xx. The current rate has increased to \$13, but the level of reimbursement is substantially lower.
 - ACRE being discontinued is a “step in the right direction” for her agency, but discrepancy between rate and reimbursement is still an issue.

- **Cole Glosser, Coalition of Texans with Disabilities**

- Rate increases are not enough to support providers in attendant programs.

- **Kathy Cranston, Adaptive Texas and Personal Attendant Coalition of Texas**

- ~300,000 staff, 80% female, 79% people of color. The median age is 50 years old.
- No benefits with a \$13 wage is not livable.

- **Nancy Crother, Adaptive Texans and Personal Attendant Coalition of Texas**
 - The Big Beautiful Bill is concerning and will lead to changes in Texas.
 - It is very difficult to recruit new employees.
 - Opposed to per capita caps in Medicaid block grants, which are known to cut services—once they run out, they're out.
- **Amy Litzinger, Texas Parent to Parent**
 - Difficult to find attendants. When they are found, they may switch jobs because the other waiver offers \$20/hr.
 - Asked HHSC to ensure that all attendants receive \$20/hr, not some.
- **William Litzinger, Amy's Father**
 - Fixes should be in the base budget, rather than an exception item.
 - "Raise the \$13 class CDS wages to \$20 to match the \$20 HHSC CDS wages so that my family member with quadriplegic cerebral palsy can remain in the community after I can no longer help."
- **No name or organization given**
 - Pleaded for at least \$20/hr.
 - Explained that her caregiver asked to borrow money to attend caregiver training and to keep her electricity on.
- **No name given, ADAPT**
 - Emphasized that \$13/hr is not livable. Asked for \$20/hr.
- **Edgar Pacheco, Attendant Care Coalition**
 - Praised the increase as the largest wage increase since 2009.
 - Stated that Texas is in the "lower middle" of states when it comes to this issue.
 - "It seems that all we do is just try and research, and nothing ever actually gets done."
- **Denise Ellison, Coalition of Texans with Disabilities**
 - Budget for FMSA clients will need to be redone. Time-consuming and expensive.
 - Is paid \$120.55/month to manage facility for an employer. Some of this is lost to other charges.
- **Mike Weiss**
 - His attendant has been with him for 13 years.
 - Asked for \$20/hr or more.
- **Elsa Martinez, Caregiver**

- Asked for rate increases, compassion and support for attendants and caregivers.
- **Mariquetta Martinez, MDCP Manager at Cook Children's Health Plan**
 - Small increases create a lot of work for state agencies, MCOs, and even parents.
 - If the increase begins in the middle of the MDCP plan year, then that member actually ends up with fewer respite hours overall for the remainder of that plan year. Caretakers and parents can be very upset about that.
 - Have to create a budget request for every MDCP member that receives their services and subtract that from the yearly total.
 - Need to create a new referral, change 2604 form, and update our budget worksheet.
 - Contact members and LARs and inform them of new respite hours.
 - Notify the respective agency.
 - Corresponding changes to IT systems, etc.
- **Jacqueline Miller, Optimal In-Home Care (Houson)**
 - The current rate is \$15.59 for the actual business. Have to pay attendants \$11/hr out of that rate, as well as state and federal taxes. Very thin margins.
 - Asked for provider reimbursement rate increase.
 - Paying overtime leads to paying more than the \$15.59 that they receive from the state of Texas.
 - Adult Protective Services rate is \$30/hr. We would like to see this rate adjusted closer to this rate.
- **Cindy Pan, Healthy Choice HomeCare (Plano)**
 - Serves elderly patients whose first language is not English.
 - The time and expense of running these facilities is enormous.
- **Jovanna Michelle, Representing various provider primary home care, adult daycare, and residential care agencies throughout Texas**
 - Raising minimum wage without a comparable increase to the agencies would cripple the agencies contracted with the state to provide these services. The highest rate is \$15.75/hr with an administrative rate of only \$2.75/hr.
 - "With the proposed increase, the attendant wage would be \$13 an hour, and if you calculate the 7.65% FICA, that would actually cost the employer \$13.99 per hour." It does not include unemployment taxes.

- “HHSC is adding a 24-cent increase to the highest rate, which would put the reimbursement at \$15.99 per unit. If you extrapolate this out, that only leaves \$2 per hour for administrative costs as opposed to what it is right now—at level 35, the administrative cost is \$2.25 per hour.”
- **Linda Litzinger, Texas Parent to Parent**
 - People are in their 20s when they receive a waiver, and their parents are in their 40s and 50s, if not older.
 - Asking HHSC to look at raising the wage to \$20/hr.
- **Tom Jenkins, LT Home Health Care**
 - Advocated against ACRE for years because it “created an uneven playing field between the agencies” and failed to solve the payment issues.
 - Generally praised the direction that HHSC has taken.
 - Administrative rate has not kept up with inflation.
- **Vivica Hartman, Deaf-Blind Multihandicapped Association of Texans**
 - Has a deaf-blind son.
 - Advocated for the importance of these services.
- **Jessica Boston, Texas Association for Home Care and Hospice**
 - Represent over 1,200 licensed HCBS services providers across Texas.
 - Asked HHSC to work closely with the MCOs to ensure that payments to providers begin quickly once this approval is granted.
 - Some providers experienced significant delays of six to nine months before receiving updated rates.
- **Anita Gonzalez, Medicinal (?) Day Care**
 - In favor of increasing wages, but pay/unit is not enough to cover that increase.
- **Hartmann Kennedy, Dave Watson and Associates**
 - Mother of two medically-fragile children.
 - One child is on MDCP. Rates in MDCP are “a constant battle.”
 - Many breaks in service due to difficulty finding attendants.
- **Cynthia Bailey Bryant, Advocate and Caregiver to Granddaughter**
 - Granddaughter is on MDCP waiver.
 - Don’t want disabled children to have to move out of the home to receive care.
- **Jose Humberto Luna, Soluna Adult Daycare (Laferia)**
 - Passionate attendants are difficult to find.
 - Family members and clients will have to stay home if they close.

- **Laura Hernandez, Daycare Facility (Unnamed)**
 - Already receiving the rate increase at level 35 for many years, so her increase will be only two cents per unit.
 - \$2.40 wage increase per hour.
- **Christian Escapite, Wisdom Tree Family Services (El Paso)**
 - Provides services such as PHC, CAS, STAR Kids and STAR+PLUS.
 - \$13 is too low. Noted that their agency can't afford to offer benefits.
 - Attendant work is physically and emotionally demanding.
 - "Rising wages, payroll taxes and administrative requirements continue to put pressure on our operations."