

Sunset Advisory Commission

Overview of the Sunset Reviews of the Health and Human Services System



Health and Human Services Sunset Reviews

- ❖ **First Sunset reviews since passage of H.B. 2292**
- ❖ **Result of a year's work in HHSC**
 - Combined or eliminated the functions of 13 agencies
 - Removed 45 advisory committees from statute
- ❖ **Each Sunset report addresses specific issues related to that health and human services agency as currently organized**
- ❖ **HHSC report also addresses system reorganization, taking the five system agencies to one**

Order of Discussion

- ❖ **Dept. of State Health Services (DSHS)**
- ❖ **Dept. of Family and Protective Services (DFPS)**
- ❖ **Dept. of Aging and Disability Services (DADS)**
- ❖ **Dept. of Assistive and Rehabilitative Services (DARS)**
- ❖ **Health and Human Services Commission (HHSC)**
- ❖ **Office of Inspector General (OIG)**
- ❖ **System Reorganization**

Dept. of State Health Services

- ❖ **Unmanageable scope of DSHS' regulatory functions diverting attention from the agency's core mission to protect public health**
 - Discontinue or transfer 26 regulatory programs, most relating to occupational licensing
 - Repeal 10 state licensure, certification, and registration programs that have little impact on public health or safety
 - Transfer 12 programs to the Texas Department of Licensing and Regulation for better fit
 - Transfer four programs to the Texas Medical Board for better fit

- ❖ **Lack of integrated mental health and substance abuse services based on patient outcomes**
 - Require the long overdue consolidation of basic front-door services (such as hotlines) to screen and refer patients to mental health and substance abuse services
 - Require a comprehensive overhaul of behavioral health contracting and performance measurement
 - Establish a new, locally driven process for allocating state mental health hospital beds among regions of the state to encourage efficient and appropriate use of state resources

Dept. of Family and Protective Services

- ❖ **Ineffective approach to addressing Child Protective Services caseworker turnover**
 - Improve support and training of staff, especially new caseworkers
 - Systematically identify and address root causes of turnover
- ❖ **Crisis culture distracts CPS from effective day-to-day management**
 - Conduct annual business planning to prioritize agency efforts and focus on measurable improvement
 - Centralize and simplify policymaking and implementation processes
 - Streamline burdensome and prescriptive statutory requirements
- ❖ **High risks of foster care redesign**
 - Develop and maintain a long-range foster care redesign implementation plan to reduce inherent risks of this outsourcing approach for administering foster care
 - Evaluate system data and cost before pursuing broad implementation of foster care redesign

Dept. of Aging and Disability Services

- ❖ **Declining enrollment, high costs, and poor quality of care at state supported living centers (SSLCs)**
 - Require DADS to close the Austin SSLC by 2017
 - Establish the SSLC Restructuring Commission to develop recommendations to right-size the number of SSLCs
- ❖ **Few long-term care providers face enforcement action**
 - Require DADS to revoke licenses of nursing homes with three or more serious violations in two years
 - Require DADS to develop rules for progressive sanctions for serious or repeated violations for all long-term care providers
 - Repeal misused "right to correct" provisions and require DADS to define criteria for their appropriate use in rules

Dept. of Assistive and Rehabilitative Services

- ❖ **DARS vocational rehabilitation services outside the state's integrated workforce system**
 - Transfer DARS' Vocational Rehabilitation Program and other related programs to the Texas Workforce Commission
- ❖ **Vocational rehabilitation services siloed by disability**
 - Integrate vocational rehabilitation services provided through the Division for Blind Services and the Division for Rehabilitation Services.
- ❖ **Unnecessary duplication of independent living services**
 - Outsource DARS' services to the statewide network of centers for independent living

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❖ **Outdated and inefficient Medicaid programs and processes**

- Restructure NorthSTAR to obtain federal funding and integrate client Medicaid services
- Adapt Medicaid processes to managed care and align HHSC's quality initiatives
- Streamline the Medicaid provider enrollment process

❖ **Fragmented and duplicative women's health programs**

- Streamline and consolidate two of the three programs

❖ **Uncoordinated and confusing approach to public interactions with HHSC**

- Streamline advisory committees
- Better coordinate health and human services websites and hotlines

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❖ Unclear authority leading to poor contract oversight

- Achieve greater sophistication and stronger management of contracts by:
 - requiring focused, high-level policy direction and oversight of system contracting
 - escalating attention on large, problematic contracts
 - implementing a centralized contract tracking system and completing other tools required by statute since 1999
- Implement various changes across the system on program-specific contracts (such as contracts for managed care and mental health) that recognize the system's transition from direct delivery of services to managing contracts

Office of Inspector General

❖ **Weak and unclear accountability**

- Provide that the Executive Commissioner, not the Governor, appoint the Inspector General
- Require a special Sunset review in six years (in 2021)

❖ **Overreaching and lengthy credible allegation of fraud (CAF) payment hold appeal process**

- Shorten timeframes and limit the scope of appeal hearings
- Remove requirements for providers to pay for half of their hearing costs
- Clarify “fraud” does not include unintentional technical, clerical, or administrative errors

❖ **Ineffective processes and absence of results**

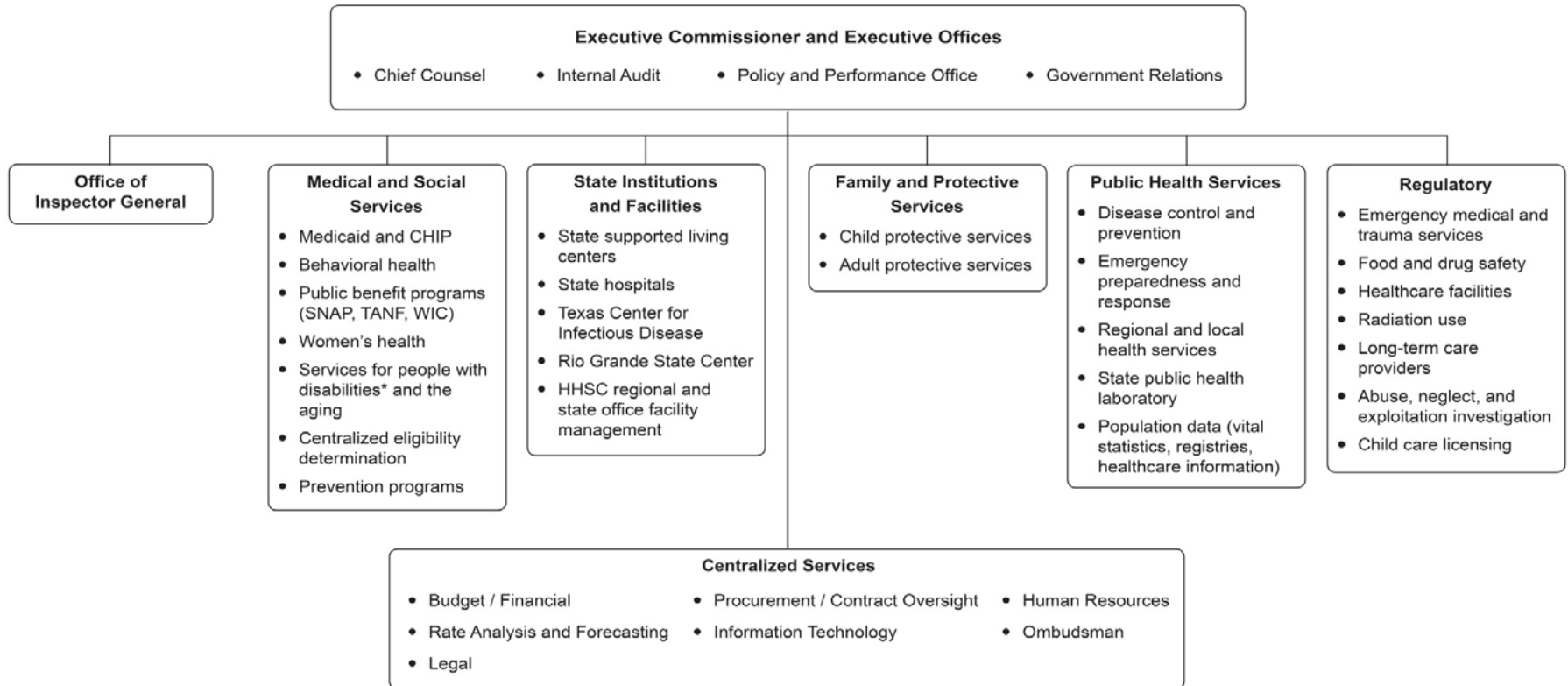
- Strengthen effectiveness through a series of process improvements to measure and achieve better results

System Reorganization

Why?

- ❖ Blurred accountability
 - Five agencies, not one system
 - Agencies act in silos
- ❖ Fragmented programs and functions
 - Incomplete administrative consolidation
 - Poorly integrated or overlapping client services (e.g., Medicaid in three agencies)
- ❖ Arrangement of the current structure
 - Scattered regulatory services, poor focus on institutions
 - Overly broad focus of DSHS
 - Questionable future for DADS
 - Small, singular focus of DARS

Example of Organizational Structure to Address Problems



* Please note that the Sunset Commission voted on January 14, 2015 to recommend transferring the Blind and General Vocational Rehabilitation Programs, Business Enterprises of Texas, and federal Disability Determination Services from the Department of Assistive and Rehabilitative Services to the Texas Workforce Commission. These activities had been bulleted either separately or grouped conceptually with services for people with disabilities under Medical and Social Services in the Sunset Commission decisions on HHSC on December 10, 2014, but would no longer be considered under that functional alignment.

Questions?

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