

Amend CSHB 1 (house committee report) as follows:

Amendment to Article II, Health and Human Services Commission, Rider 47, page II-58:

47. Women's Health Programs: Savings and Performance Reporting. The Health and Human Services Commission shall submit an annual report on the Healthy Texas Women (HTW), Family Planning Program (FPP), and Breast and Cervical Cancer Services Program, due May 1 of each year, to the Legislative Budget Board and the governor's office that includes the following information:

(a) Enrollment levels of targeted low-income women and service utilization by geographic region, including total number of unduplicated patients served, delivery system, and age from the prior two fiscal years;

(b) Savings or expenditures in the Medicaid program that are attributable to enrollment levels as reported in Section (a);

(c) Descriptions of all outreach activities undertaken for the reporting period;

(d) The total number of providers, by geographic region, enrolled in HTW and FPP networks, and providers from legacy Women's Health Programs (including Texas Women's Health Program) not to include duplications of providers or ancillary providers;

(e) The average and median numbers of program clients, and the total number or unduplicated patients served, detailed by provider;

(f) The count of women in the Healthy Texas Women Program and the Family Planning Program receiving a long-acting reversible contraceptive;

(g) The service utilization by procedure code. The annual report submitted as required above must satisfy federal reporting requirements that mandate the most specific, accurate, and complete coding and reporting for the highest level of specificity; and

(h) Total expenditures, by method of finance and program.

(i) Number of unduplicated women auto-enrolled into the Healthy Texas Women Program from Medicaid for pregnant women

It is the intent of the legislature that if the findings of the report show a reduction in women enrolled or of service utilization of greater than 10 percent relative to the prior two

fiscal years, the agency shall, within existing resources, undertake corrective measures to expand provider capacity and/or client outreach and enrollment efforts.