

September 24, 2020

Courtney DeBower Assistant Committee Clerk Human Services Committee Texas House of Representatives Via Email: <u>Courtney.DeBower\_HC@house.texas.gov</u>

RE: Comments in Response to Request for Information – Interim Charges 2.2 – 2.5

Dear Members of the Human Services Committee:

Women's and Men's Health Services of the Coastal Bend (WAMHS) appreciates the opportunity to provide information about changes that impact the state's health program, including the Healthy Texas Women Section 1115 Demonstration Waiver, in response to the Notice of Formal Request for Information posted on Friday, August 14, 2020.

WAMHS is an independent nonprofit health care agency located in Nueces and Kleberg counties providing safety net services to 16,000 unduplicated women in South Texas each year.

WAMHS participates in Texas Medicaid and the state-funded women's health programs administered by the Texas Health and Human Services Commission (HHSC), including Healthy Texas Women and the Family Planning Program. In 2019, WAMHS helped over 9,500 women complete and submit HTW applications and supporting documents, and provided medical services to the 7,000 unduplicated women who qualified for HTW care.

## Healthy Texas Women Section 1115 Demonstration Waiver Implementation

HHSC received approval for the Healthy Texas Women Section 1115 Demonstration Waiver on January 22, 2020 and began drawing down federal funds on February 18, 2020. HHSC submitted an implementation plan to the Centers for Medicare and Medicaid Services (CMS) in July 2020 and reviewed key aspects of the plan in a post-award public forum on July 16, 2020.

The following changes to eligibility were of particular concern to stakeholders:

- The one page eligibility application to qualify women for the limited HTW benefit is being replaced with the detailed Form H1205 which is used to apply for regular Medicaid and CHIP benefits.
- Eligible women whose Medicaid for pregnant women coverage period is ending will no longer be automatically enrolled into Healthy Texas Women; and
- Women eligible for WIC, SNAP, or who have a child eligible for Medicaid will no longer be automatically financially eligible (adjunctively eligible) for Healthy Texas Women.

We believe these changes will significantly impact women's ability to enroll in HTW and project a 75% to 80% drop in enrollment. Stakeholders have urged HHSC to consider a number of solutions to limit the impact of proposed changes to Healthy Texas Women enrollment, including:

- **Re-entering negotiations with CMS over the decision to eliminate the current H1867 application form** which has been the single most important key to the success of Texas HTW program and resulted in reducing the costs of Medicaid birth costs.
- Improving the administrative renewal process, which HHSC proposes to use in lieu of auto-enrollment. Currently, Texas's policies and systems for performing administrative renewals for MAGI-based eligibility groups have a very low success rate in achieving renewals compared to other states. According to a 50- state survey from the Kaiser Family Foundation<sup>i</sup>, Texas is one of only eight states with an administrative renewal rate of less than 25% (Note: Stakeholders understand that Texas's success rate is actually significantly below 25% and is one of the lowest in the country).
- **Re-entering negotiations with CMS over the use of adjunctive eligibility.** Since the beginning of Healthy Texas Women and its predecessor programs in 2007, HHSC has used adjunctive eligibility to accurately confirm whether a woman is income eligible for the program while minimizing burdens on women, clinics, and agency employees. If at application or renewal a woman is enrolled in the Women, Infants, and Children (WIC) Program, has a child enrolled in Medicaid, or is in a household that receives SNAP or TANF, she is not required to prove her income again for Healthy Texas Women. CMS has long allowed adjunctive eligibility for certain eligibility groups. For example, CMS allows what is known as "express lane eligibility" for Children's Medicaid. Express lane eligibility allows the state to identify, enroll, and recertify children by relying on eligibility information from other programs, like SNAP or WIC. CMS also has allowed adjunctive eligibility for certain adult eligibility groups through time-limited waivers.

To date, HHSC has not shared the Healthy Texas Women Section 1115 Demonstration Waiver implementation plan with stakeholders; as a result, the foregoing recommendations were developed based on limited information provided by HHSC. We urge legislators to continue monitoring implementation of the Healthy Texas Women Section 1115 Demonstration Waiver during the 87th Legislature and, if needed, to direct HHSC to implement eligibility and enrollment policies and practices—including those that may require a waiver amendment and/or systems changes—to limit the impact of proposed changes to Healthy Texas Women enrollment. We encourage HHSC to elicit feedback from direct care providers on the impact of proposed changes.

Women's and Men's Health Services appreciates the opportunity to provide these comments. If you require additional information about the issues raised in this letter, please contact me using the information provided in my cover email.

Sincerely,

Amanda Stukenberg, CEO, Women's and Men's Health Services