

This comment pertains to Human Services, Interim Charge #4. My name is Linda Litzinger, Public Policy Specialist representing Texas Parent to Parent, a statewide non-profit serving children and adults with disability.

We wish to discuss the topic of SHARS billing, which is federal funding that passes through HHSC so that TMHP can reimburse schools for personal attendants and other medical services. The issue is that billing companies are approaching schools to do their billing for them, not for a flat rate, but for a percentage of what they recoup. When TMHP reimburses a school, the money can be spent on anything; it doesn't have to be returned to the special education budget. There is a lot of creativity in order to use these federal funds.

The issue is that the billing must first go to private insurance, and sometimes private insurers don't realize that the DME or labor occurred in schools, so the private insurer pays the bill and the fragile child thus moves closer to their private insurance cap. In some company plans, the insurer doesn't provide notice as they pay, so the family (who may be approaching the cap) remains clueless.

We have families who have identified that billing was for DME equipment that wasn't even used on their student. Also we have students who were billed for fulltime service of a paraprofessional, yet they do not have one in any course. All of these costs may end up being paid by an insurance plan where the child received none of what was on the bill, yet the family has no knowledge. We recommend that 1) Billing companies move to a flat rate for their services. 2) Schools be limited to using all reimbursements for special education services.

Thank you for your time with this matter.

This comment pertains to Human Services, Interim Charge #4. My name is Linda Litzinger, Public Policy Specialist representing Texas Parent to Parent, a statewide non-profit serving children and adults with disability.

We serve families who are in the process of migrating from timesheets to using Electronic Visit Verification for some but not all of their services. This is creating confusing and difficulty in that HHSC is implementing the EVV portion, narrowly focused on that implementation. For example, if your attendant works a full-day shift and their work falls into 1) CFC habilitation 2) supported employment 3) transportation, or any combination, then the attendant will move between these categories all day long. The habilitation category fits into EVV, yet transportation and supported employment do not use EVV in their time reporting, meaning you have to sign in and out of EVV all day long, even though your shift is continuous. Many of the CDS providers are requiring that you call in and out of the EVV system (each time you turn the ignition on or off, for example) and a few CDS providers are allowing you to back the hours out at the end of the day.

The way that HHSC has designed EVV for Texas is egregious in that the consumer will be spending hours each day on this accounting exercise of dealing with multiple timesheet methods. This becomes a penalty for accessing the outside world (shopping, volunteering, working, medical visits, social life) which is what HCBS services were designed for. This is especially ridiculous if your attendant lives with you, because federal law exempted from EVV the attendants who live with you, yet Texas decided to not exempt them.

In several advisory group meetings, we have asked if someone at HHSC beyond the implementation team is examining what this is doing to the collective workforce. Because of rounding to the nearest fifteen minute mark, as you sign out (of EVV for example), that system might round down and a minute later when you sign in (to transportation for example), that system might round to a later time. You might lose 15 minutes of pay multiple times throughout the day and be underpaid. This causes one to have to monitor multiple systems very closely to prevent underpaid and (rightly) disgruntled attendants, an illegal headache that a consumer and their attendants don't need.

CLASS pays for example \$11/hour without benefits. The EVV system as it is rolling out may push attendants to seek Buccie's at \$16/hour with benefits. Texas already has a problem with its attendant capacity and retention, so we cannot afford to make it worse.

In summary, Texas Parent to Parent recommends that Texas 1) identify a position at HHSC who understands and monitors the larger picture of attendant retention and consumer quality of life. 2) Exempt attendants, who live with the consumer who they work for, from using EVV.

Thank you for your time with this matter.