

Amend CSSB 1 as follows:

(1) In Article II of the bill, amend Rider 37 Women's Health Programs: Savings and Performance Reporting as follows:

37. 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), Healthy Texas Women Plus (HTW Plus), Family Planning Program (FPP), and Breast and Cervical Cancer Services Program, due August 1 of each year, to the Legislative Budget Board and the governor's office that includes the following information for each program:

(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, including those focused on recruiting new speciality provider types;

(d) The total number of providers, by geographic region and provider type, enrolled in each program, 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 of unduplicated patients served, detailed by provider;

(f) The number of program clients with a paid claim, detailed by provider type;

(g) The number of eligible clients who received FPP services after the provider exhausted the contracted funds awarded to provide FPP services (i.e., funds gone) and the amount of FPP funds that would have been reimbursed for these services if additional FPP funds had been available during the fiscal year;

(h) The count of women in HTW and FPP receiving a long-acting reversible contraceptive;

(i) 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;

(j) Total expenditures, by method of finance and program;

(k) Results of policies designed to reduce enrollment gaps, including but not limited to the number of unduplicated women automatically or administratively enrolled into HTW from other Medicaid programs or the Children's Health Insurance Program, recommendations for further reducing enrollment gaps, and any impacts to funding resulting from procedural denials and enrollment gaps in HTW; and

(l) Number of unduplicated women who are determined eligible and enrolled into HTW after their Medicaid for Pregnant Women ends. 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 ten 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.

This report shall also identify program changes that would maximize outreach and enrollment. HHSC shall work with women's health providers, advocates, and other stakeholders. It is the intent of the legislature, any changes to program administration that may significantly impact client services and enrollment shall be reported to the legislature within 30 days of the agency becoming aware of the change with information regarding the projected impact of the change.