Senate Finance Committee Article II

Adopted Rider Day Riders

March 15, 2017

By:	Uresti

Health and Human Services Commission, Article II

Proposed Rider

State Hospital Workforce

Prepared by LBB Staff, 03/10/2017

Overview

Add a new rider to direct HHSC to evaluate compensation levels and turnover rates at the state hospital facilities and to develop and submit a report to the Legislative Budget Board and the Governor including recommendations to reduce turnover and vacancy rates, and to increase recruitment.

Required Action

On page II-XX	of the	Health	and	Human	Services	Commission	bill	pattern,	add t	he	follov	ving
rider:												

. State Hospital Workforce. Out of funds appropriated above in Strategy G.2.1,

Mental Health State Hospitals, the Health and Human Services Commission shall
evaluate compensation levels, turnover and vacancy rates, and recruiting efforts at
the ten state hospitals and develop recommendations to reduce turnover and vacancy
rates. No later than August 31, 2018 HHSC shall submit to the Legislative Budget
Board and the Governor's Office a report on the recommendations to address these
workforce issues.

By:	Kolkhorst

Health and Human Services Commission, Article II Proposed Rider Jail Diversion Pilot Programs

Prepared by LBB Staff, 03/13/2017

Overview

Direct the Health and Human Services Commission to establish a rural mental health jail diversion pilot program for rural counties that are not among the ten most populous counties in the state.

Required Action

On page l	II-XX of the Health and Human Services Commis	ssion bill pattern, add the following
	Rural Texas Jail Diversion Pilot Programs.	Out of funds appropriated above in
	Strategy D.2.3, Community Mental Health Cris	sis Services, the Health and Human
	Services Commission may allocate \$	in General Revenue in each
	fiscal year of the 2018-19 biennium to establish	rural mental health jail diversion
	programs in counties that are not among the ten	most populous counties in the state.
	The pilot programs may be implemented at area	a Local Mental Health Authorities
	(LMHAs), contingent upon the LMHA providing	ng an equal amount of local matching
	funds. The purpose of these programs shall be t	to reduce recidivism and the
	frequency of arrest and incarceration among pe	rsons with mental illness in that area.

By:	Nichols			
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Health and Human Services Commission, Article II Proposed Rider Rusk State Hospital Physician Services

Prepared by LBB Staff, 03/13/2017

Overview;

Permits the Health and Human Services Commission (HHSC) to contract with the University of Texas Health Science Center at Tyler to provide physician and professional services at Rusk State Hospital.

Required Action

On page II-51 of the Health and Human Services Commission bill pattern, add the following rider:

. Rusk State Hospital. Out of funds appropriated above in Strategy G.2.1,

Mental Health State Hospitals, the Health and Human Services Commission
may contract with The University of Texas Health Science Center at Tyler to
provide physician and professional services at Rusk State Hospital.

By: Walson

Health and Human Services Commission, Article II Proposed Rider Austin State Hospital

Prepared by LBB Staff, 03/10/2017

Overview

Add a rider clarifying that no provisions of this Act should be interpreted as limiting the Health and Human Services from entering in to a lease or other agreement with other entities for use of Austin State Hospital land or facilities.

Required Action

On page II-XX	of the Health	and Humar	i Services	Commission	bill	pattern,	add the	following
rider:								

. Austin State Hospital. No provision of this Act shall be construed to limit the ability for the Health and Human Services Commission to enter into a lease or other agreement with other state, local, or private entities for the use of land or facilities owned or operated as the Austin State Hospital, consistent with all other laws and limitations.

By Hinojosa

Texas Health and Human Services Commission Graduate Medical Education Add-On for Urban Teaching Hospitals

Overview

Add a new rider to direct HHSC to update each teaching hospitals' medical education add-on in order to accurately reflect the current number of residency slots at each hospital, thus allowing for a more fair and equitable distribution system. HHSC has not calculated the medical education add-on since September 1,2013.

Graduate Medical Education (GME) is the supervised training of medical school graduates so they can gain clinical and practical experience as residents in a specific field of medicine before becoming licensed doctors. GME training occurs mostly in hospitals that operate accredited residency programs. Hospitals that have residents in these approved GME programs receive an additional payment to reflect the higher patient care cost of teaching hospitals relative to non-teaching hospitals.

The calculation regarding this additional payment is known as the indirect medical education (IME) adjustment factor. This factor is calculated by the CMS for new teaching hospitals for the purpose of obtaining Medicare GME payments. This same IME factor is then used by the Texas Health and Human Services Commission (HHSC) to determine the Medicaid IME payment that is included in the rates for teaching hospitals.

Required Action

On page II-63 of the Health and Human Services' bill pattern, add the following new rider:

. <u>Update Medical Education Add-on for Urban Teaching Hospitals.</u> Out of funds appropriated above in Goal B, Medicaid, the Health and Human Services Commission (HHSC) shall calculate the medical education add-on for hospital rates each fiscal year, beginning on September 1, 2017, using the most recent indirect medical education (IME) adjustment factor finalized by the Centers for Medicare and Medicaid Services (CMS).

By: Uresti

Department of State Health Services Proposed Rider

Regional Advisory Council Funding: Information Listing

Prepared by LBB Staff, 03/13/17

Overview

Add a new rider to provide information about funding for Regional Advisory Councils.

Required Action

On page II-XX of the Department of State Health Services bill pattern, add the following rider:

. Regional Advisory Council Funding: Informational Listing. This rider is informational only and does not make any appropriations. Funding for Regional Advisory Councils is included above in Strategy B.2.1, EMS and Trauma Care Systems from the following accounts: General Revenue; General Revenue-Dedicated Account No. 5007, Commission on State Emergency Communications; General Revenue-Dedicated Account No. 5046, Permanent Fund for Emergency Medical Services and Trauma Care; General Revenue-Dedicated Account No. 5108 EMS, Trauma Facilities, Trauma Care Systems; and General Revenue-Dedicated Account No. 5111, Designated Trauma Facility and EMS.

The Department of State Health Services shall communicate funding distribution amounts, timeframes, and any changes to Regional Advisory Councils in a timely manner.

Health and Human Services Commission, Article II

Proposed Funding and Rider Funding for the Blind Children's Vocational Discovery and Development Program

Prepared by LBB Staff, 03/10/17

Overview

Add a rider to appropriate the Health and Human Services Commission \$0.6 million each fiscal year of the 2018-19 biennium to provide Blind Children's Vocational Discovery and Development Program services for children 10 to 13 years of age.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

Funding for the Blind Children's Vocational Discovery and Development

Program. Included in the amounts appropriated above in Strategy D.1.5, Children's

Blindness Services, is \$600,000 in General Revenue in each fiscal year of the 201819 biennium for the purpose of providing Blind Children's Vocational Discovery and
Development Program services for children 10 to 13 years of age.

By *Uresti*

Department of State Health Services

Immunization Programs Improvement

Overview

The following action adds a new rider requires the Department of State Health Services to implement a program improvement process for the Vaccine for Children and the Adult Safety Net Programs that evaluates the effectiveness and quality of the programs.

Required Action

On page II-38 of The Department of State Health Services bill pattern, add the following new rider:

. Immunization Programs Improvement. The Department of State Health Services (DSHS) shall identify and report on efficiencies and program improvements for the Vaccine for Children and the Adult Safety Net Programs that improve the cost effectiveness and quality of the programs, simplify the administration of the programs for the Department and participating providers including seeking administrative and regulatory flexibility from the Centers for Disease Control and Prevention, expand the number and types of providers participating in the program, expand access to services for individuals eligible for the program, include stakeholder input and feedback, and ensure accountability throughout the program.

Health and Human Services Commission, Article II Proposed Rider State Hospital Planning

Prepared by LBB Staff, 03/14/2017

Overview

Direct the Health and Human Services to develop a master plan for the design of neuropsychiatric healthcare delivery systems as partnerships between the mental health state hospitals and other public or private entities, including Health Related Institutions.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

State Hospital Planning. Contingent on the appropriation of funds to the Health and Human Services Commission (HHSC) for the purpose of repair and replacement of state hospitals per Article IX, Section 17.10, Improving State Hospital Facilities, and Other State Facility Needs, HHSC may partner with public or private entities, including Health Related Institutions in the catchment area of each state hospital, to develop a master plan for the design of neuropsychiatric healthcare delivery systems in the area served by each facility. Where feasible, the development of the master plan shall be led by the public or private entity with which HHSC has partnered. The master plan may also address the provision of a continuum of inpatient and outpatient brain health services on the site of the state hospital. Local partners may provide matching funds in various amounts and in-kind services to support the development of the master plan.

Planning activities may include an evaluation of patient needs, a program map, proposals for the development of optimal care models, a proposal for the design of leading-edge facilities, including engineering and architectural work required to initiate construction, and the implementation of preliminary pilot projects to guide new care design principles.

The master plan may consider research and reports required by Department of State Health Services Rider 86, State Hospital System Report, in the 2016-17 General Appropriations Act and the State Hospital System Long-term Plan required by Department of State Health Services Rider 83, State Hospital System Long-Term Plan, in the 2016-17 General Appropriations Act, as well as support the strategic goals identified in the Statewide Behavioral Health Strategic Plan required by Article IX Section 10.04, Statewide Behavioral Health Strategic Plan and Coordinated Expenditures, in the 2016-17 General Appropriations Act.

By:	Hancock
Dy.	Hancock

Health and Human Services Commission Proposed Rider Prohibition on Abortions

Prepared by LBB Staff, 03/15/17

Overview

The following action adds a new rider to the General Appropriations Act that applies to the entire budget and prohibits abortion providers, affiliates, and those contracting with abortion providers and franchises or affiliates from receiving any taxpayer funding. Currently there are numerous pro-life riders in the GAA keeping abortion providers out of specific programs, however, this approach fails to keep abortion providers and others out of new and overlooked programs. Texas needs a broad rider provision to stop this funding fully protect the sanctity of life.

Required Action

On page II-XX of the Health and Human Services Commission bill pattern, add the following rider:

. Prohibition on Abortions. To the extent allowed by federal and state law, no funds appropriated under this Act shall be used to pay for elective abortion procedures that are not reimbursable under the state's Medicaid law, nor shall funds be distributed to entities that provide elective abortion procedures that are not reimbursable under the state's Medicaid law.

Services provided through the Employees Retirement System, Teacher Retirement System, Higher Education Group Insurance, Correctional Management Health Care, and any hospital are exempt from this provision.