

Health and Human Services Commission Strategic Plan for 2021–2025 Part I

As Required by

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Health and Human Services Commission

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Agency Vision and Mission

Vision: Making a positive difference in the lives of the people we serve.

Mission: Improving the health, safety and well-being of Texans with good stewardship of public resources.

The Health and Human Services Commission (HHSC) provides services and supports to millions of Texans through the efforts of more than 38,000 employees and more than 220 programs across the state. Combined, HHSC programs account for approximately \$38 billion in fiscal year 2020 (all funds), or about one-third of state spending.

HHSC supports Texans through a wide range of services, including physical and behavioral healthcare; transition to self-sufficiency; food benefits; rehabilitation; disaster preparedness and recovery; and protection from abuse, neglect, or exploitation. The agency also protects the health and safety of Texans by licensing, regulating, and investigating a wide range of providers and professionals.

Texas Government Code Chapter 2056 requires all state agencies, including HHSC, to develop a strategic plan to guide operations for five years into the future. Longrange strategic planning is essential to ensuring operational alignment that supports the mission of improving the health, safety, and well-being of Texas residents with good stewardship of public resources. Based on the transformational changes required by Senate Bill 200, 84th Legislature, Regular Session, 2015, HHSC now provides services and supports in a more coordinated and streamlined manner to improve the experience of Texas residents who rely on our services through increased efficiency and collaboration.

To meet the anticipated deadline for agency strategic plans, HHSC began developing goals, objectives, and action items in December 2019. The goals and objectives are intentionally broad, while the action items are more targeted and were developed prior to the COVID-19 pandemic, with the subsequent caveat that new priorities in response to the pandemic may emerge in the future.

To ensure a coordinated approach to planning and delivering health and human services, the Texas Government Code Section 531.022 requires the Executive Commissioner of HHSC to submit a strategic plan for the Health and Human

HHSC Strategic Plan for 2021–2025, Part I

Services (HHS) system. Since 2004, the HHS system Coordinated Strategic Plan has been combined into one volume that contains the agency strategic plans for HHSC and the other agencies that comprise the HHS system. Due to the novel coronavirus disease 2019 (COVID-19) pandemic, the Department of State Health Services (DSHS) has temporarily paused strategic planning. Notwithstanding, HHSC intends to submit an HHS Coordinated Strategic Plan by the October 1, 2020 deadline.

Agency Goals and Action Plan

Below are the agency's five operational goals, each with key objectives and action items to achieve the goals. For each goal, narrative describes how the goals, objectives, and action items support the statewide objectives of accountability, efficiency, effectiveness, excellence in customer service, and transparency.

Goal 1: Efficiency, Effectiveness, and Process Improvement

Objective 1.1: Team Texas HHS

Improve our culture, ethics, recruitment, and retention.

- Action Item 1.1.1: Recruitment and Retention. Support recruitment and retention agency-wide. (Ongoing)
- Action Item 1.1.2: Key Occupation Staffing. Address high turnover and difficult to fill positions. (Ongoing)
- Action Item 1.1.3: System Culture. Grow our culture of continuous improvement and innovation through professional development, crosssystem collaboration, and workforce diversity, while nurturing a welcoming work environment that encourages the open exchange of ideas, transparency, and clear communication. (Ongoing)
- Action I tem 1.1.4: Communications. Define and promote a uniform, consistent brand and identity. (Ongoing)

Objective 1.2: Technology and Innovation

Leverage technology and process improvement to better serve clients.

- Action Item 1.2.1: Infrastructure Improvement. Release the first version of the Business Enablement Platform supporting a Case Management Framework. (August 31, 2021)
- Action Item 1.2.2: Modernization Roadmap. Improve organizational readiness for implementation of the Information Technology (IT) and Data Services Modernization 10-Year Plan. (Ongoing)

- Action Item 1.2.3: Performance Management. Design, implement, and maintain an HHS performance management and analytics system. (Ongoing)
- Action Item 1.2.4: Data-Driven Decision Support. Enable data-driven decisions to improve the health outcomes of Texans. (Ongoing)
- Action Item 1.2.5: Process Improvement. Develop and implement an agency-wide continuous improvement and operational excellence program focused on increasing efficiency, optimizing processes, and supporting sustainable improvements throughout the HHS system. (August 31, 2021)
- Action Item 1.2.6: Centralized Accounting and Payroll/Personnel System (CAPPS). Achieve 100 percent utilization of the employee/supervisor self-service CAPPS system as designed. (August 31, 2022)

Objective 1.3: Purchasing

Improve procurement and contracting processes.

- Action Item 1.3.1: Process Improvement in Purchasing,
 Procurement, and Contracting. Optimize technology and best practices to support efficient and expedient purchasing, procurement, and contracting processes. (Ongoing)
- Action Item 1.3.2: Historically Underutilized Businesses (HUBs).
 Increase HUB compliance. (Ongoing)

How Goal 1 Supports Each Statewide Objective

Accountability

HHSC is committed to ensuring accountability by maintaining sound business practices and efficient processes, and by embracing transparency to maximize each dollar entrusted to the agency in the service of Texans.

Within the Procurement and Contracting Services (PCS) division, ongoing compliance with procurement and contracting laws and regulations is the highest priority. The comprehensive Procurement and Contracting Improvement Plan (PCIP), is a system-wide effort to enhance the maturity of the agency's procurement and contracting functions and build a sustainable operating model. Many of the projects that have been implemented based on the PCIP have focused on developing and maintaining mechanisms to ensure accountability through the procurement and contracting process. Ensuring fair and competitive procurements

and holding vendors accountable to contractual obligations for the performance of services is essential to the preservation of public trust and the protection of Texas' most vulnerable populations.

PCS is continuing to improve procurement and contract management processes across the system by maintaining updated, clearly defined, and standardized procurement policies, processes, and procedures. These efforts are intended to reduce the likelihood of internal errors that may result in solicitation cancellations and interruptions in service.

Data and technology are essential components in support of the agency's procurement and contracting system. PCS is implementing measures to ensure data associated with all procurements and contracts is complete and accurate.

Efficiency

HHSC will continue to focus on optimizing business processes to improve timelines, quality, and cost-effectiveness across the agency.

HHSC is implementing a streamlined hiring process to reduce the time between posting and hiring for a position. In fiscal year 2019, the average time elapsed between the posting and fulfillment of a vacancy was 87 days. For fiscal year 2020, the agency is targeting a 60-day turnaround average. Streamlining efforts will continue into the strategic planning period of fiscal years 2021 through 2025.

Concurrently, HHSC is adopting several measures to attract more prepared prospective hires, which increases efficiency by mitigating high rates of turnover in specific positions. Targeted initiatives will address unique recruitment challenges and high turnover in areas with critical frontline and clinical functions.

HHSC is also working to increase efficiency through advancements in IT infrastructure and governance. Improving the IT infrastructure will transition data-related services and capabilities into a more modern, integrated, secure, and effective environment. The shared service environment will be more adept at communicating across applications, making it easier for team members to work together and share insights. The new infrastructure will also allow flexible scaling of applications and shorter, more responsive development time.

To support efficiency in technology planning and resource management, the IT governance model brings together leadership and other representatives from across

HHS to review proposed IT solutions using the IT Governance Intake Process. This process ensures that when programs, divisions, and agencies request IT services, the requests are clearly defined and allow appropriate solutions to be proposed, approved, and prioritized by leadership.

To increase efficiency across the agency, HHSC has established the Process Improvement team within the Office of Transformation and Innovation. This team, comprised of individuals with advanced training and experience in various industry-recognized process improvement methodologies, is launching an in-house training and certification program for Lean Six Sigma Yellow and Green Belts. This will allow staff throughout the agency to identify and lead efforts to reduce processing times, avoid unnecessary costs, and improve quality in their own divisions. This initiative will enhance operational excellence.

The Health, Developmental and Independence Services (HDIS) division is establishing enhanced operational procedures to ensure support for mission-critical initiatives. HDIS is developing a Results Management Office that will be responsible for ensuring strategic goals are met. Additionally, HDIS has established a consolidated contract unit to promote best practices across all programs and increase efficiency throughout the contracting process.

To increase efficiency in procurement and contracting, PCS is refining and streamlining procurement and contracting processes to create significant value for internal and external stakeholders. In addition, PCS is continuing to work closely with the IT division to make enhancements in the CAPPS Financials system that will provide enhanced transparency, functionality, and oversight.

Effectiveness

HHSC will continue to enhance effectiveness by maintaining a strong, stable, and supported workforce, equipping team members with sufficient training and ensuring that leadership always has sufficient and reliable data to support decision-making.

To improve agency culture, the Office of Communications launched the "I Am HHS" series on the agency's intranet site, the HHS Connection. The "I Am HHS" series provides staff an opportunity to learn about colleagues from across the state through personal profiles of employees working hard for the people of Texas.

The Office of Communications also revamped the "Employee Q&A," or question and answer function, on the HHS Connection. "Ask Team Texas HHS" allows employees

to submit questions that are routed to agency subject matter experts for answers. Additionally, the Q&A includes a frequently asked questions section to help the staff quickly and easily find updated answers to common inquiries. Each of these initiatives will continue to be promoted and championed by the Office of Communications.

In addition to systemwide and agency-wide efforts, divisions engage in various activities to promote a positive culture within their areas. For example, the Intellectual and Developmental Disability and Behavioral Health (IDD-BH) division established an internal new-hire orientation to facilitate new employees' navigation of the agency, understanding of division programs and services, and introduction to key staff.

The division also established a staff advisory panel to guide employee engagement activities and to serve as a source of staff input into policies and procedures. An annual awards ceremony was created across the division to celebrate outstanding team members in various categories. This function was well received, as staff enjoyed being recognized among peers and leadership for excellent work.

The Medicaid and Children's Health Insurance Program (CHIP) Services (MCS) division helps reinforce a positive culture, a focus on shared goals, and an emphasis on values through a variety of engagement efforts including a new hire orientation, a staff newsletter, and a variety of learning sessions that explore and broaden awareness of the division's projects and programs, as well as skill and leadership development.

To enhance the effectiveness of recruitment and retention efforts, the agency is implementing initiatives at the division level to address the unique retention challenges of the Health and Specialty Care System (HSCS) division, the Access and Eligibility Services (AES) division, and the Regulatory Services division, all of which have critical frontline and clinical staff. The goal is to make HHSC the employer of choice for people seeking careers where they can make a positive difference.

The Office of Guardianship Services is working with the Human Resources office to create a salary and merit structure that will be competitive and align job duties and responsibilities with the private sector and sister agencies that perform similar functions. New incentives include hazard pay, special pay for positions required to be on-call around the clock, and the creation of a reimbursement scale for individuals who obtain advanced degrees.

To increase the retention and recruitment of qualified procurement staff, PCS is developing an improved organizational design by clearly defining roles and responsibilities, balancing workloads and staffing, and creating a function to oversee contract compliance. Retaining qualified staff is crucial to improving and maintaining the quality, effectiveness, compliance, and efficiency of procurement and contracting in HHS.

Continuous learning is a key component of HHSC efforts to cultivate and maintain a strong level of employee engagement and retention. To enhance training across the agency, HHSC is conducting a comprehensive training needs assessment and gap analysis by reviewing existing materials and interviewing leadership, training experts, training recipients, and other partners. This effort will provide an accurate picture of current agency training resources and needs to allow for alignment of training strategies and the best use of resources. Some divisions are augmenting efforts to enhance training by seeking to recruit personnel for positions that will be charged solely with coordination of staff training and other initiatives geared toward improving employee engagement.

PCS is implementing a formal training strategy, developed through the Procurement and Contracting Improvement Plan, to include onboarding and development programs in support of PCS staff.

For procurement and contracting functions, training and certification is required by Texas Government Code Section 656.052. Accordingly, PCS is enhancing training for all employees who perform procurement and contracting functions. Tailored training is being developed and delivered as appropriate for different agency employees. Effectiveness of training will be assessed regularly so improvements on content and delivery can be made as needed.

HHSC is continuing efforts to implement the transformational changes ushered in by Senate Bill 200, 84th Legislature, Regular Session, 2015, by developing and building a performance management and analytics system and supporting a governance framework. These efforts will increase access to timely, relevant, and reliable data, and will serve as a foundation for data-driven decision-making.

Through the design, implementation, and maintenance of an HHS performance and analytics system, the Office of Performance is working to provide enhanced support that will allow agency leadership to make more informed decisions based on real-time data, which will ultimately lead to improved outcomes for Texans.

The HHS Procurement and Contracting System Strategic Plan, completed in late 2019, is part of a larger effort to strengthen procurement and contracting practices and was developed to provide customer organizations with a working plan to synchronize activities toward common objectives, increasing the effectiveness of ongoing reforms. PCS "customer organizations" are defined as the agencies, offices, divisions, sections, and units that receive procurement and contracting information, guidance, and services from PCS, including divisional groups within PCS. The plan was formed through a collaborative process among HHS leaders and representatives from across the customer organizations, involving more than 130 stakeholders of the procurement and contracting system. The plan effectively aligns system stakeholders with guiding principles, an operating model, clarified roles and responsibilities, shared goals, objectives, and measures of success for the HHS procurement and contracting system.

PCS is continuing to enhance the effectiveness of the Historically Underutilized Business (HUB) program through improvements that seek to exceed program goals. System agencies continue outreach efforts to educate HUBs and minority businesses about the procurement process and opportunities to do business with the agency. Other efforts include conducting post-contract award meetings with contractors to discuss HUB subcontracting plan compliance and monthly reporting requirements; enhancing HHS system HUB reporting capabilities; and implementing new processes to increase HUB utilization for spot purchases of less than \$5,000. The PCS training strategy will go beyond statutory mandates to provide enhanced training for all employees who perform procurement and contracting functions. Tailored training is being developed and delivered as appropriate for different groups of employees, and the effectiveness of such training will be assessed regularly.

Excellence in Customer Service

HHSC encourages excellence in customer service through a variety of measures and will continue to search for ways to better serve internal and external stakeholders.

The HHS Office of the Ombudsman was created by the Legislature to provide dispute resolution services and consumer protection and advocacy across the HHS system. Because many consumers connect with the Ombudsman via phone calls, the office is enhancing the quality standards used to evaluate staff performance related to customer service. The Ombudsman also offers a customer survey at the end of each call, so consumers can rate their experience.

The Office of the Ombudsman also coordinates with the Family Violence Program to ensure that survivors of family violence have a centralized way to report any concerns or complaints with the services received. The program staff and the Office of the Ombudsman work collaboratively to ensure these complaints are addressed in a timely and empathetic manner.

HHSC programs rely heavily on the support services provided by administrative support areas. HHSC encourages excellence in internal customer service through a variety of measures.

A significant cross-agency mechanism to ensure excellence in internal customer service is an update of the statutorily directed Support Services Agreements (SSAs), which provide a structure for the services and support that administrative areas offer HHSC program areas, as well as DSHS and the Office of the Inspector General (OIG). Staff from the Office of Transformation and Innovation led the initiative to engage stakeholders from across the system to update the SSAs to more accurately describe the availability and array of services that HHSC administrative areas provide, clearly delineate roles and responsibilities, and provide an issue-resolution process that articulates the process for escalation to leadership in the event that there is ambiguity or disagreement over service provision. The Office of Transformation and Innovation will continue to work with all areas of the agency and the Office of Performance over the coming years to establish and track performance against the standards set in the SSAs and to utilize performance trend data to identify best practices and opportunities for improvement.

The HHSC IT Business Operations unit strives for excellence in internal customer service by engaging stakeholders in the process of updating or creating policies and procedures. Gathering input from users throughout the agency improves the clarity of the policies and procedures and helps avoid unintended consequences, which in turn enhances the success and satisfaction of team members when reaching out for support with IT services.

Further, the IT Customer Service and Support unit emphasizes the importance of customer service through constant tracking and monitoring of Help Desk service metrics. The team monitors call volume and response time daily and reviews customer satisfaction survey results for each ticket. These metrics consistently meet or surpass established targets, and performance is tracked by Help Desk management to drive a culture of customer service.

Transparency

Many of the efforts described above support transparency within and across HHSC and the larger HHS system.

Ongoing and planned procurement and contracting improvements support a culture of transparency. For example, PCS is finalizing a new, consolidated HHS Procurement and Contract Management Handbook to fully align with procurement statutes, regulations, and the State of Texas Procurement and Contract Management Guide. PCS policies, processes, information systems, workflows, data, reporting, and other relevant information will be made easily accessible and openly communicated to all involved for effective and efficient procurement and contracting operations. PCS and stakeholders will work cooperatively to continuously improve contracting and procurement processes.

Efforts to support external transparency are discussed further under Goals 2 through 5.

Goal 2: Protecting Vulnerable Texans

Objective 2.1: Health and Safety through Improved Regulation

Improve regulatory processes that protect Texans.

- Action Item 2.1.1: Improved Regulation to Protect Texans. Reduce the
 incidence of serious violations in nursing facilities and child care operations
 through the use of improved communication to these providers; joint
 trainings for Regulatory Services division staff and providers; and more
 consistent and efficient licensing, survey, and enforcement processes.
 (Ongoing)
- Action I tem 2.1.2: Reducing Unregulated Child Care. Continue focused monitoring and enforcement actions to reduce the number of unregulated child care operations, which will strengthen health and safety protections for children in care. (Ongoing)
- Action Item 2.1.3: Policy Recommendations. Beginning on September 1, 2020, written recommendations submitted by the Office of the State Long-Term Care (LTC) Ombudsman to the LTC Regulatory Services unit regarding state rules for nursing facilities and assisted living facilities will be considered as comments submitted on behalf of residents and given adequate regard with respect to needed rulemaking and other policy revisions. (Ongoing)

Objective 2.2: Strengthening Advocacy

Increase State LTC Ombudsman Program capacity.

- Action Item 2.2.1: Retention. Improve retention of both volunteers and paid team members through a variety of tools and methods. (August 31, 2022)
- Action Item 2.2.2: Evaluation and Improvement. Support the State LTC Ombudsman Program's participation in the national evaluation of programs and assist the Office of the State LTC Ombudsman with implementation of recommendations from the evaluation as the program budget will allow. (August 31, 2025)

How Goal 2 Supports Each Statewide Objective

Accountability

A crucial role of HHSC is to protect the most vulnerable populations in Texas. Regulatory Services plays an important role in holding facilities accountable for the care and services provided to clients. By improving the consistency of processes and communications, Regulatory Services allows providers to focus more readily on achieving better outcomes for the individuals they serve.

The division's increased monitoring and enforcement of non-exempt daycares operating without a license ensures that unregulated daycares are brought into compliance and are held accountable to safety standards.

The Office of the State LTC Ombudsman is an independent office within the HHS Office of the Ombudsman. The Office of the State LTC Ombudsman channels the voices of residents, family members, and ombudsmen across the state, supporting accountability by ensuring policies are based on a wide range of perspectives from stakeholders. Enhancing oversight of high-risk providers, creating more opportunities for LTC Ombudsman volunteers, and improving consistency in regulation will contribute to increased accountability.

Efficiency

Regulatory Services is enhancing protection of Texans living in nursing facilities, while also focusing on improving efficiency through enhanced communication with providers, joint trainings for HHSC staff and providers, and more consistent and efficient licensing, survey, and enforcement processes. This is accomplished by fostering an environment where enforcement standards and processes are easier to understand and follow. By using consistent communication and enhanced provider training, Regulatory Services reduces administrative burdens for both providers and HHSC staff, yielding more efficient operations.

Creating an Unregulated Day Care Operations Unit provides targeted resources for the identification and regulation of these operations while allowing other staff members to focus on ensuring the health and safety of children in regulated care.

Effectiveness

Regulatory Services works to obtain better outcomes for people receiving services through clear communication and continual evaluation of provider compliance. Staff will assess licensing, surveys, inspections, enforcement, and architectural and life safety reviews and processes, then implement recommended improvements to establish the most effective processes. Additionally, the division is undergoing structural realignment to streamline similar processes and to improve the overall provision of regulatory services.

To enhance effectiveness of long-term care services in nursing facilities and assisted living facilities, HHSC will improve communication and coordination between LTC Regulatory Services and the Office of the State LTC Ombudsman. Management will meet at least quarterly to discuss issues related to these facilities, and the Office of the State LTC Ombudsman will recommend improvements to rules governing these facilities.

The Office of the State LTC Ombudsman will also work to strengthen the team of more than 300 statewide volunteers, in addition to paid staff. Beginning in September 2020, the State LTC Ombudsman Program will participate in a national study of state LTC ombudsman programs and will implement recommendations as the program budget will allow. The researchers will analyze data collected on an ongoing basis, determine gaps and needs, and tailor recommendations to those gaps and needs.

Excellence in Customer Service

Regulatory Services seeks to enhance customer service to Texans by increasing public awareness of the risks of using unregulated daycares, to help parents make informed choices when evaluating childcare options. Similarly, Regulatory Services strives to ensure that Texas families seeking long-term care for loved ones are able to select a setting where resident health and safety is protected.

To enhance the experience of volunteer ombudsmen, beginning in fiscal year 2021, the Office of the State LTC Ombudsman will conduct an annual volunteer satisfaction survey and will incorporate feedback to improve training, management and support, and retention.

Transparency

The public relies on transparency when faced with making choices about health and human services. By incorporating feedback from residents of long-term care facilities into policy-making, Regulatory Services will be enhancing the transparency of the rulemaking process while improving the quality of care for residents.

Additionally, Regulatory Services maintains the long-term care provider search portal and, with the Department of Family and Protective Services, the TxChildCareSearch.org website. These portals allow the public to access vital information on long-term care and child care providers, including regulatory compliance history.

A number of advisory entities ensure transparency in HHSC's efforts to protect vulnerable Texans. These entities include a variety of stakeholders who contribute to policy-making in open meetings that allow the public to see how stakeholder information is gathered and considered, and how recommendations are developed and reported to the Governor, the Lieutenant Governor, the Legislature, and HHSC. Open meetings also provide the public with an opportunity to participate in these proceedings. Advisory entities are discussed more fully under Goal 5, Customer Service and Dynamic Relationships.

The Rules Coordination Office processes the addition, amendment, and deletion of administrative rules for programs. The process is open and includes a public comment period during which stakeholders may submit their thoughts and suggestions regarding the proposed rulemaking.

Goal 3: Improving the Health and Well-Being of Texans

Objective 3.1: Self-Sufficiency and Well-Being for Families

Increase self-sufficiency and positive outcomes for families.

 Action Item 3.1.1: Self-Sufficiency for Families. Strengthen selfsufficiency and positive outcomes for Texas families. (Ongoing)

Objective 3.2: Behavioral Health

Enhance behavioral health-care outcomes.

- Action Item 3.2.1: Community-Based Behavioral Health Care. Expand capacity for community-based behavioral health to promote recovery and engagement in the community to a targeted number of people every year. (Ongoing)
- Action Item 3.2.2: Medication-Assisted Treatment. Reduce negative health outcomes associated with opioid use by increasing the number of people receiving state-funded, medication-assisted treatment for an opioid use disorder. (Ongoing)
- Action Item 3.2.3: Certified Community Behavioral Health Clinics.
 Increase the quality of services that local mental health and behavioral
 health authorities provide by increasing the number of community behavioral
 health clinics certified to provide integrated acute and behavioral health care
 to improve overall health outcomes. (Ongoing)
- Action Item 3.2.4. State Hospitals. Increase the number of people served at state hospitals through programs to increase efficiency of forensic treatments. (Ongoing)

Objective 3.3: Well-Being for People with Disabilities

Increase independence and positive outcomes for people with disabilities and their caregivers.

• Action Item 3.3.1: Supporting Children with Disabilities. Increase appropriate referrals that result in enrollment in the Early Childhood Intervention program. (Ongoing)

- Action Item 3.3.2: Health and Specialty Care System. Construct and maintain healthy, safe, and efficient health-care environments. (Ongoing)
- Action Item 3.3.3: State Supported Living Center (SSLC) Planning.
 Evaluate recommendations of SSLC long-term planning. (Ongoing)
- Action I tem 3.3.4. Overcoming Barriers to Transition. Continue to identify barriers to transition from SSLCs to the community. (Ongoing)
- Action Item 3.3.5: Community-Based Waiver Programs. Release
 additional waiver slots as funding permits, to serve people who are aging out
 of the foster care system, experiencing a crisis, or are leaving or being
 diverted from institutions. (Ongoing)
- Action I tem 3.3.6: Improving Communications Access for People Who Are Deaf or Hard of Hearing. Increase client awareness of rights, public and private organizations' awareness of responsibilities, and community ability to interact with persons who are deaf or hard of hearing via in-person and web-based trainings. (Ongoing)
- Action Item 3.3.7: Implementing Disability Services Action Plan.
 Continue to evaluate delivery of services to people with disabilities and identify initiatives to improve outcomes and experiences. (Ongoing)

Objective 3.4: Independence and Well-Being for Older Adults and Their Families

Enhance and increase older Texans' independence and quality of life.

- **Action Item 3.4.1: Healthy Aging.** Increase older Texans' opportunities for engagement in healthy behaviors, including exercise, good nutrition, and social connections, including virtual options. (Ongoing)
- Action I tem 3.4.2: Outreach to Communities with Limited Resources.
 Increase research and outreach to provide organizations and partners in
 communities with limited resources enhanced opportunities to serve older
 adults. (Ongoing)
- Action Item 3.4.3: Older Adults with Developmental Disabilities. Increase options and resources for older adults with developmental disabilities and their caregivers. (Ongoing)

Objective 3.5: Women and Children

Improve health outcomes for women, mothers, and children.

- Action Item 3.5.1: Alternatives to Abortion. Increase the number of Alternatives to Abortion clients enrolled in Medicaid and Nurse-Family Partnership. (Ongoing)
- Action Item 3.5.2: Prenatal Nutrition. Increase the number of women entering the WIC program during pregnancy to improve health outcomes for both mothers and infants. (Ongoing)
- Action Item 3.5.3: Equity in Breastfeeding Rates. Reduce disparities in breastfeeding rates across the WIC population. (Ongoing)
- Action Item 3.5.4: Reproductive Health. Increase access to women's health care and family planning services to avert unintended pregnancies, positively affect the outcome of future pregnancies, and positively impact the health and well-being of women and their families. (Ongoing)
- Action Item 3.5.5: Childhood Immunizations. Improve quality of life and life expectancy by increasing public awareness of the need for early childhood immunizations, as required by Texas Government Code Section 2056.0022. (Ongoing)

Objective 3.6: Improving Health and Well-Being of Service Members, Veterans, and Their Families

Enhance and expand information and service coordination and programs for Texas service members, veterans, and their families.

- Action Item 3.6.1: Information Sources and Outreach. Continuously improve and expand information sources through the Texas Veterans App and other agency social and electronic media, programs, and materials. (Ongoing)
- Action Item 3.6.2: Coordination with Partners to Improve Services. Enhance and expand initiatives with federal, state, and local governments and with private and faith-based partners. (Ongoing)

How Goal 3 Supports Each Statewide Objective

Accountability

HHSC is continuously working to improve accountability in the administration and oversight of all programs to improve the overall health, safety, and well-being of Texans. A significant component of accountability in behavioral health services is the Texas Statewide Behavioral Health Strategic Plan Progress Report, submitted in

compliance with the 2020-2021 General Appropriations Act, House Bill 1, 86th Legislature, Regular Session, 2019 (Article IX, Section 10.04(c)). The report is prepared by the Statewide Behavioral Health Coordinating Council and discusses progress and successes related to implementation of the Statewide Behavioral Health Strategic Plan. The plan provides a framework to address gaps and challenges in the Texas behavioral health care system, ensuring HHSC and other agencies work together to make progress over time.

Each program within HDIS conducts robust stakeholder engagement, develops annual legislative reports, and tracks and reports data-driven performance measures. HDIS reports annually to the Legislature on program enrollment, service utilization, and cost savings for the Healthy Texas Women program, the Family Planning program, and the Breast and Cervical Cancer Services program. The Family Violence program submits a biennial legislative report, while the Court Appointed Special Advocate program, the Child Advocacy Center program, and the Alternatives to Abortion program also submit annual legislative reports.

In conjunction with other areas of HHSC, MCS leverages the input of various stakeholders through advisory committees and workgroups that help the agency to identify emerging issues and best practices and to obtain feedback on program improvement efforts. This engagement helps ensure accountability for funding and policies in Medicaid and CHIP services and programs. Accountability efforts in Medicaid and CHIP are discussed more fully under Goal 4: Integrity, Transparency, and Accountability.

Efficiency

HHSC continuously seeks more efficient ways to operate and deliver services, looking to maximize each dollar invested and provide the highest quality services to Texans who rely on HHSC programs. Finding efficiencies ensures HHSC is a good steward of taxpayer resources, maximizes services to those who rely on them, and allows HHSC to be better prepared for the rapid population growth that is projected for Texas.

HHSC works to ensure efficiency in behavioral health treatment by investing in programs that have yielded successful outcomes supported by data. Research indicates that community-based mental health services are effective, helping children, adolescents, and adults to avoid hospitalization, enhance performance in school and at work, and improve their living situations. For every dollar invested,

treatment for substance use disorder yields a twelve-dollar savings in associated health care and criminal justice costs.¹

MCS continuously evaluates care delivery models to identify opportunities for efficiency in the Medicaid program, such as the request for federal approval to allow pharmacies to administer certain drugs to improve patient compliance with treatment for substance use disorder and serious mental illness.

Through the various Medicaid and CHIP programs, contracted managed care organizations (MCOs) and providers ensure that the unique needs of women and children are efficiently supported to help improve long-term health benefits. In addition to efforts that encourage appropriate preventative care and well-child check-ups, supports include care coordination for high-risk pregnancies, quality initiatives that target improvements in the utilization of pre-natal care, and increasing childhood immunization rates.

Effectiveness

Effectiveness of service, as measured by improved outcomes, is the core of Goal 3. Each action item strives to strengthen the health and well-being of individuals and families. An approach that focuses on the individual is at the heart of many HHSC programs, from those that serve children to those that serve older adults, to ensure the provision of truly effective services that meet the needs of the clients served.

AES is leading the way in seeking to expand the effectiveness of HHSC services through the Texas Works Path to Success Program. This pilot program seeks to reduce the impact of situational and generational poverty, as demonstrated by increasing economic self-reliance, housing stability, educational advancement, and improved quality of life. The pilot will use education, training, employment opportunities, case management supports, and social interventions to achieve these outcomes.

Effective behavioral health continuity of care and access ensure each person receives optimal supports and services when needed. Whether by improving access to inpatient psychiatric care, increasing capacity for community-based services, or

¹ National Institute on Drug Abuse, National Institute of Health. (2007). Cost Effectiveness of Drug Treatment. Rockville, MD: National Institute on Drug Abuse. https://www.asam.org/docs/default-source/advocacy/mat-talking-points-final.pdf?sfvrsn=0.

addressing substance use through prevention, intervention, or treatment services, HHSC strives to provide a coordinated approach to service delivery across all populations. These efforts will allow the agency to address the gaps identified in the Statewide Behavioral Health Strategic Plan.

The behavioral health continuum of care model includes an array of services designed to meet the mental health and substance use treatment needs of Texans at the right time and place. The HHSC focus is to provide: (1) a service array that matches level of support with a person's evolving needs; and (2) seamless transition across outpatient, crisis, inpatient, and substance-use treatment, including medication-assisted treatment.

This approach allows HHSC to effectively meet a person's behavioral health service needs in the most integrated settings. Creating more capacity to treat people in the community, including Certified Community Behavioral Health Clinics, improves the transition for people moving from facilities to the next steps of care, while reducing the wait time for people who need inpatient care. Efforts specific to service members, veterans, and their families are discussed below.

Another strategy in which HHSC coordinates care across programs is through MCS engagement with health plans and IDD-BH to support treatment options through Medicaid/CHIP for individuals with a diagnosis of serious mental illness or emotional disturbance, or a diagnosis of substance-use disorder. Improvements are ongoing, through refinement of medical benefits/treatment options, in collaboration with IDD-BH, and lessons learned via evaluation of delivery patterns that are incorporated into policies, benefits, or contracts.

To aid in the fight against opioid abuse, HHSC is working to increase the number of Texans receiving medication-assisted treatment for opioid use disorder, and the Aging Services Coordination team is using grant funding from IDD-BH to support opioid reduction efforts with older adults.

Further, MCS has received funding for the Maternal Opioid Misuse (MOM) Model, an integrated-care initiative to help increase access to treatment for pregnant and postpartum women with opioid use disorders and served by Medicaid. Texas was one of ten states recently selected to implement this new integrated care model to increase treatment and improve outcomes for these women and their babies. Through the five-year cooperative agreement, Texas could receive up to \$5 million in federal funds if all milestones and performance goals are met.

HHSC is also working to increase effectiveness in serving patients in state hospitals by increasing bed capacity and by enhancing options for transitioning out of a state hospital and into the community. HSCS is implementing a comprehensive plan to improve current state hospital capacity by renovating some existing facilities while also building new, state-of-the-art facilities. When fully implemented, this plan will add 240 beds to the system capacity.

HHSC operates many programs serving people with disabilities, including Medicaid programs such as Community Attendant Services, Home and Community-Based Services, and intermediate care and nursing facilities. Non-Medicaid programs include Family Care, Consumer Managed Personal Attendant Services, and services from local intellectual and developmental disability (IDD) authorities. HHSC is taking steps to improve the delivery of these services and to ensure more seamless access.

HSCS is developing a long-term plan for the future of SSLCs, studying the changing demographics of the clients served and the use of the facilities on each campus. IDD-BH is working with HSCS to identify barriers to transitioning from SSLCs to community care. Identifying these barriers will better ensure that individuals receive the appropriate care.

HHSC helps bridge the communication gap between people who are deaf and hard of hearing and people who are not. In-person and web-based trainings help connect people to resources and services, raise awareness, improve communication, and ensure inclusion and interaction across the communities.

HHSC leverages the strength of cross-coordination among the teams serving older Texans to enhance effectiveness of services. These teams — Aging Services Coordination, AES, MCS, and the Office of the State LTC Ombudsman — collaborate on system policies, awareness, and programs to reduce duplication and gaps in service. Aging Services Coordination efforts address the promotion of services and collaboration among state and local services providers, while AES and MCS deliver critical health and long-term care services and supports through contracted health plans and providers. The State LTC Ombudsman Program is an advocate for residents' rights and quality of life and care. Each of these elements works together to create a holistic health environment.

In keeping with public health best practices and the requirement of Texas Government Code Section 2056.0022, HHSC programs work to increase public

awareness of the need for early childhood immunizations. Some programs, such as Medicaid and CHIP, cover immunizations as standard care. Other programs, such as WIC, screen infants and children for immunization status and make referrals to immunization providers as needed.

HHSC also works continuously to promote both eligible veteran enrollment into VA Healthcare and local provider inclusion into the VA MISSION Act community provider network. HHSC seeks to enhance barrier-free access to evidence-based mental health services for veterans and their families through referral to and coordination with VA services and programs. HHSC ensures rapid delivery of community-based services through a community collaborative-focused mental health grant program for veterans, service members, and their families.

Because veteran suicide rates are a serious concern in Texas and nationally, HHSC has worked with veterans, service members, and their families, in coordination with veteran advocacy groups, a variety of federal and state partners, and providers, to develop and deliver The Report on Short-Term Action Plan to Prevent Veteran Suicides, in accordance with Texas Government Code Section 531.0925. Published in September 2019, the report contains 20 statewide recommendations for statutory, administrative, and funding improvements to prevent veteran suicides.

HHSC will amend existing contracts and clarify internal policies regarding access to suicide prevention and crisis services for service members, veterans, and their families. Additionally, HHSC will partner with stakeholders to prevent suicide among veterans. Examples of these efforts include: (1) increasing the number of suicide prevention trainings specific to service members, veterans, and their families; and (2) enhancing delivery of mental health first aid training for veterans.

Excellence in Customer Service

HHSC strives for excellence in customer service by taking a tailored approach to service delivery. HHSC's procedures work to support excellence in customer service by requiring all areas to provide program-level inquiry and complaint information via the Ombudsman's Agency Monthly Contact Reporting process. This data is analyzed for systemic trends and shared with executive leadership on a quarterly basis.

The VetConnect feature of the Texas Veterans App allows callers to speak with a trained veteran specialist who can connect the caller to benefits and resources in

their local area. To ensure excellence in customer service, any time someone makes a request through VetConnect, the call center follows up with the caller to determine whether the request has been fulfilled.

Transparency

HHSC uses several strategies to support the statewide objective of transparency.

The Office of Communications works in partnership with program teams to curate the HHS website, connecting people to services. HHS serves more than seven million people every month, and the website provides information to every Texan who eats, gets sick, has children in daycare, or has parents in a nursing home. These efforts are discussed more fully under Goal 5, Customer Service and Dynamic Relationships.

The Disability Services Action Plan, to be developed by August 31, 2020, will be a key communication tool to share ways in which HHSC programs intend to provide better services to people who have disabilities. To create this new action plan, HHSC began by conducting seven listening sessions with more than 300 stakeholders across the state. The agency integrated stakeholder feedback with information from related legislative reports to identify opportunities for system improvements.

Goal 4: Integrity, Transparency, and Accountability

Objective 4.1: Medicaid Managed Care

Improve quality and strengthen accountability.

- Action I tem 4.1.1: Ensuring Access to Providers. Implement effective policies and continue strengthening oversight activities to ensure access to providers for individuals enrolled in Medicaid and CHIP. (Ongoing)
- Action Item 4.1.2: Ensuring Access to Services. Identify potential barriers to the delivery of medically necessary services by enhancing monitoring and using data associated with prior authorizations, service coordination, complaints, fair hearings, and utilization. (Ongoing)
- Action I tem 4.1.3. Optimizing Managed Care Performance. Refine review processes and data validation efforts that ensure the system of managed care is operating effectively, efficiently and in the best interest of enrolled individuals, providers, and the state. (Ongoing)

Objective 4.2: Fraud Prevention, Detection, and Education

Improve and expand fraud prevention, detection, and education.

- Action I tem 4.2.1: Prevention of Fraud, Waste, and Abuse across the HHS System. Engage stakeholders, clients, and HHS in collaborative efforts to prevent fraud, waste, and abuse. (Ongoing)
- Action Item 4.2.2: Detection of Fraud, Waste, and Abuse across the HHS System. Continue focus on efforts aimed at identification of fraud, waste, and abuse through timely and thorough audits, investigations, inspections, and reviews. (Ongoing)
- Action I tem 4.2.3: Supplemental Nutrition Assistance Program
 (SNAP) Fraud Framework. Support state agency efforts to improve and
 expand fraud prevention, detection, and education for SNAP recipients.
 (Ongoing)

Objective 4.3: Protecting Confidential Information

Increase privacy awareness and compliance to protect confidential client information.

 Action Item 4.3.1: Privacy Compliance. Develop and implement a systemwide privacy awareness campaign to reduce the number of unauthorized disclosures and releases. (Ongoing)

How Goal 4 Supports Each Statewide Objective

Accountability

HHSC is entrusted with the oversight and distribution of billions of taxpayer dollars annually. It is critical that the allocation and use of these resources be accountable to the taxpayer, the Legislature, clients receiving services, and HHSC stakeholders. HHSC is also entrusted with confidential personal information from clients and applicants and must be accountable for the privacy and protection of that information.

With more than 94 percent of enrolled individuals receiving their services through an MCO, effective oversight of MCO contracts is essential. MCS will be engaged in several managed-care procurements and contract transitions over the coming years. Each transition is carefully monitored to ensure quality, continuity of care, and accountability of incumbent and new MCOs. Ongoing improvement efforts include enhanced contract oversight and financial accountability for the MCOs. These efforts are routinely assessed through a variety of federal, state, and internal audits, reviews, and inspections.

Additionally, MCS is implementing new operational review modules for regular assessment of key areas of MCO performance. Beyond operational reviews, MCS uses an array of oversight tools, including: utilization reviews; financial, network adequacy, and quality monitoring; and surveys to assess member satisfaction and appointment availability.

The Office of Inspector General (OIG) holds providers and recipients of services accountable for by ensuring that state resources are used for the intended purposes. Through investigations, inspections, audits, and medical reviews, OIG ensures that clients receive needed services and that providers receive the appropriate payment.

Efficiency

Striving for efficiency enables HHSC to prioritize accountability and transparency both internally and externally by creating and maintaining clear, documented policies and procedures.

MCS has several efforts underway to help improve the efficiency of managed care contract oversight. Implementation of a new contract management system, TexConnect, allows MCOs to submit deliverables through a single system rather than through multiple email addresses, while providing a central repository of deliverables that will enable more efficient and automated support for review and approval processes.

Through robust oversight and internal and external outreach efforts, OIG ensures providers are billing and being compensated only for services rendered, and that state health and human services programs maximize all appropriations.

Effectiveness

Enhancing the integrity, transparency, and accountability of programs and business operations has a direct impact on how Texans are served.

Ongoing improvement efforts within MCS focus on connecting members to services and linking quality outcomes to MCO performance, giving MCOs appropriate incentives to ensure effective care. Additionally, MCS ensures that appropriate remedies are applied when contract non-compliance is identified through monitoring. Multiple levels of remedies are available, depending on the severity of the non-compliance, ranging from plans of action, to liquidated damages, to contract termination. Many performance issues are effectively addressed through plans of action and do not require escalation to other remedies.

To increase compliance with protecting confidential information, the Office of Chief Counsel's Privacy Department's Health Insurance Portability and Accountability Act (HIPAA) Training has been updated and is now required for the entire HHS system workforce, with an annual refresher. A satisfaction survey has been created and will be deployed later in 2020. The survey results and information from privacy incident monitoring will inform future revisions to the training initiative.

Excellence in Customer Service

HHSC seeks to strategically improve customer service and understands that prioritizing integrity, transparency, and accountability will enhance customer service.

MCS is currently working to improve customer service by implementing new support and appeal channels for members: an escalation help line for the Medically Dependent Children Program and an external medical review process for Medicaid members or providers who wish to receive an independent assessment of HHSC's or an MCO's decision to reduce, deny, or terminate coverage or to deny a prior authorization for a service. MCS has also standardized how complaints are documented across various intake channels. This will allow complaint data to be more effectively monitored, which will generate insights that MCS can use to develop additional program improvements.

OIG maintains a toll-free hotline for the public to report suspected fraud, waste, and abuse by providers and recipients. OIG also supports engagement programs for providers, such as the Texas Fraud Prevention Partnership, a joint effort between OIG and MCOs to discuss issues of concern and to exchange ideas regarding fraud, waste, and abuse.

With regard to confidential information, the Office of Chief Counsel's Privacy Department assures excellence in customer service through an internal requirement to investigate potential privacy incidents and to notify clients within 45 days — well within the 60 days HIPAA allows. Additionally, all privacy-related questions are answered within 24 to 48 hours.

Transparency

HHSC continually searches for ways to enhance transparency to the general public and to all stakeholders, internal and external.

MCS relies on several advisory committees and workgroups that allow stakeholders to remain engaged in the management of Medicaid services provided through managed care, including the STAR Kids Advisory Committee, STAR+PLUS Pilot Program Workgroup, IDD System Redesign Advisory Committee, and the State Medicaid Managed Care Advisory Committee. These forums ensure that stakeholders from a variety of perspectives have a venue to raise concerns, to offer recommendations, and to receive updates on upcoming program changes.

HHSC Strategic Plan for 2021-2025, Part I

Transparency is fundamental to OIG's work. All audit and inspection reports are posted to the public website, as is a quarterly report that details agency activities and recoveries. Annual reports covering OIG collaboration with MCOs and other agencies are also made available. OIG uses social media to keep the public apprised of initiatives and successes.

The Office of Chief Counsel's Privacy Department supports transparency through two notices — the Notice of Privacy Practices and the Website Privacy and Security Statement — that are posted on the agency's internal and external websites as appropriate.

Goal 5: Customer Service and Dynamic Relationships

Objective 5.1: Services and Supports

Connect people with resources effectively.

- Action Item 5.1.1: Support for Victims and Survivors of Human Trafficking. Maintain and update a public-facing provider guidebook online to connect victims and survivors of human trafficking with resources for health care, financial assistance, and social services. (Ongoing)
- Action Item 5.1.2: American Sign Language Videos. Improve customer service and the effectiveness of the Office of Deaf and Hard of Hearing Services website by publishing American Sign Language videos on the website. (Ongoing)
- Action I tem 5.1.3: Connecting Women to Services. Increase access to primary healthcare services for women of child-bearing age through greater referrals from the Healthy Texas Women program to the Primary Healthcare Program. (Ongoing)
- Action Item 5.1.4: Improved Contractor Training. Improve training on benefits and services provided to contractors in the Family Violence Program and the Alternatives to Abortion Program. (Ongoing)

Objective 5.2: Advisory Committee Engagement and Diversity

Increase stakeholder engagement and advisory committee membership diversity.

 Action Item 5.2.1: Stakeholder Engagement. Improve stakeholder engagement by using additional targeted outreach activities to increase the diversity of participants at advisory committee meetings and of applicant pools for appointments to advisory committees. (August 31, 2025 and Ongoing)

Objective 5.3: Dynamic Relationships with Partners

Strengthen connections with partners who help serve HHSC clients.

Action Item 5.3.1: Information on Procurement and Contracting.
 Increase transparency of procurement and contracting functions for vendors

- and HHS partners by providing more information and improved guidance on the HHS website about every stage of doing business with HHS. (Ongoing)
- Action I tem 5.3.2. Academic Partnerships. Continue and expand partnerships in state-of-the-art service delivery, program design, and knowledge-sharing through relationships with institutions of higher learning. (Ongoing)

How Goal 5 Supports Each Statewide Objective

Accountability

Engagement with stakeholders and the general public helps strengthen accountability. To give Texans a view into how HHSC conducts policy-making, a wide variety of advisory committees — including councils, boards, task forces, and work groups — hold open meetings that allow the public to see how planning and decision-making are conducted. Live streaming and archiving open meetings reaches a larger audience and allows more flexibility for stakeholders and others to view and participate in advisory committee proceedings. Increasing diversity of membership of these entities will help HHSC obtain a broad array of feedback to inform future decisions.

Efficiency

Posting more information for vendors and HHS partners on the agency's website is an efficient way to share the information that will help those vendors and partners during the search for business opportunities with the HHS system. Individual divisions within HHSC are also seeking new ways to utilize dynamic relationships to enhance efficiency.

For example, HSCS is expanding partnerships with institutions of higher education to better leverage internal operational expertise and the institutions' research capabilities.

Effectiveness

When appropriate, programs try to connect clients with other important programs or services, thus increasing the effectiveness of the support services provided by HHSC. One key example is the Alternatives to Abortion program, which refers clients to Medicaid and other HHSC programs. The Texas Human Trafficking Resource Center has established a new automated distribution list to disseminate

pertinent information related to new human trafficking trainings approved in relation to House Bill 2059, 86th Legislature, Regular Session, 2019, and other critical information.

The Family Violence program increases awareness and helps connect survivors to resources by working closely with the Office of Communications to post information on educational events, trainings, and activities on the HHS public-facing website, social media accounts, and the internal HHS Connection website.

Effective partnerships with external stakeholders and other state agencies help coordinate efforts and reduce duplication of services. The Comprehensive Rehabilitation Services program identified a strategic partner and developed an initiative with the Texas Workforce Commission Vocational Rehabilitation Division on brain injury services to address the gaps in service treatment across both programs. The two programs are developing a Collaborative Training Plan and model that encompasses traditional and new services to assist individuals with brain injury. The Comprehensive Rehabilitation Services program is also partnering with Vocational Rehabilitation to focus on referral processes and caseload coordination.

Increasing stakeholder engagement will provide more insight on services that Texans utilize. Stakeholders bring unique knowledge and experiences to issues vital to the future of HHS programs. Stakeholders are as diverse as Texas, with some residing in cities, others in rural areas. Increasing diversity will improve HHS agencies' understanding of how their actions and programs affect all Texans, a crucial first step for increasing effectiveness.

Excellence in Customer Service

HHSC is committed to providing a positive client experience by improving accessibility, making useful information easy to find, and getting new and existing clients connected quickly with needed services and supports. HHSC conducts surveys that include questions about customer satisfaction with specific agency programs and services, and program areas use this feedback to help improve customer service. For more information about the surveys, see the *2020 Report on Customer Service*, Supplemental Schedule H.

The Office of Communications is improving access to information by consolidating HHS websites. Currently, information about HHS benefits is maintained on the HHS

and "How to Get Help" websites. Consolidating this information on the HHS site will create a better user experience for site visitors. The "How to Get Help" site is projected to be decommissioned in fiscal year 2022.

In addition to advisory entities, stakeholder workgroups also give HHSC an opportunity to improve relationships with external partners who support various programs. For example, in HDIS, a team member of the Texas Human Trafficking Resource Center serves with key stakeholders across the state on the Human Trafficking Prevention Task Force of the Office of Attorney General. Similarly, a team member of the Family Violence program represents HHSC on the Sexual Assault Survivors Task Force, in collaboration with other state agencies and key HDIS stakeholders such as Child Advocacy Centers, Texas Association Against Sexual Assault, the Office of the Governor, law enforcement, and the medical community. HDIS receives further visibility and input through its active engagement with the Texas Collaborative for Healthy Mothers and Babies.

Transparency

HHSC uses a variety of engagement strategies to ensure a continuous flow of information to and from its many stakeholders.

The HHSC Communications Office manages outreach campaigns, oversees the agency's social media engagement, and provides English-to-Spanish translation of client-focused program materials. Through daily web updates, the Communications Office enables the public to access information about agency programs, services, and policies.

PCS is taking steps to improve transparency with the vendor community and other partners by posting procurements and contracting-related information to the agency website. Content includes procurement process steps, frequently asked questions, webinars and information about doing business with HHS, a calendar of upcoming solicitations, procurement timelines, and other details relevant to the vendor community.

The Rules Coordination Office processes the addition, amendment, and deletion of administrative rules for programs. The process is open and includes a public comment period during which stakeholders may submit feedback and suggestions regarding the proposed rulemaking.

Redundancies and Impediments

Redundancies and Impediments, General

Office of Inspector General: Payment Holds Based on Credible Allegation of Fraud

Service, Statute, Rule, or Regulation	Texas Government Code Section 531.102, Subsection (g)
Why the Service, Statute, Rule, or Regulation is Resulting in Inefficient or Ineffective Agency Operations	The OIG places provider payment holds for credible allegations of fraud pursuant to both federal and state law. Presently, the criteria for placing the hold is higher under state statute than under the federal regulation. The Texas statute requires the OIG to show that continuing to pay the provider presents an ongoing significant financial risk to the state and a threat to the integrity of Medicaid. These requirements are not present in the federal regulation. Having additional criteria in the state statute creates the possibility that the federal criteria will be met (mandating the payment hold), but the additional state criteria will not be met.
Agency Recommendation for Modification or Elimination	Amend Texas Government Code Section 531.102 to better align with federal requirements.
Estimated Cost Savings or Other Benefit Associated with Recommended Change	Pending this change, federal matching funds could be at risk if the OIG does follow federal requirements.

Office of the State Long-Term Care Ombudsman: Access to Resident Contact Information

Service, Statute, Rule, or Regulation	Texas Human Resources Code Section 101A.257 and/or Section 101A.258
Why the Service, Statute, Rule, or Regulation is Resulting in Inefficient or	In accordance with the federal Older Americans Act and state law, a certified LTC ombudsman is required to have private and unimpeded access to long-term care facilities and their residents. Also, state administrative rules require nursing and assisted living facilities to allow LTC ombudsmen immediate and unimpeded access to the name and contact information of

Ineffective Agency Operations	the resident's legally authorized representative, if the State LTC Ombudsman or a certified LTC ombudsman determines the information is needed to perform a function of the State LTC Ombudsman Program.
	Further, the federal Coronavirus Aid, Relief, and Economic Security Act (CARES Act), enacted on March 27, 2020, requires the ombudsmen to have continuing direct access (or other access through the use of technology) to residents of long-term care facilities during any portion of the COVID-19 public health emergency so that ombudsmen can provide the services described in the Older Americans Act.
	The COVID-19 public health emergency exposed a problem with the State LTC Ombudsman Program's access to residents' names and contact information that the CARES Act addressed only in the time of the pandemic. Amendment of the state statute and any related rules is needed so the program can have continuous access to resident names and contact information for its work to protect the health, safety, welfare, and rights of residents. State statute needs to be amended to clarify that facilities must provide resident and resident representative contact information to LTC ombudsmen upon request after the pandemic ends.
Agency Recommendation for Modification or Elimination	Amend Texas Human Resources Code, Section 101A.257 and/or Section 101A.258, to ensure LTC ombudsmen have access to names and contact information of residents and their representatives.
Estimated Cost Savings or Other Benefit Associated with Recommended Change	This change would ensure that LTC ombudsmen have continuous access to residents when circumstances prevent LTC ombudsmen from accessing a physical building, thus enhancing the program's effective and efficient service to the vulnerable population of approximately 130,000 older Texans living in nursing and assisted living facilities.

Health and Specialty Care System: State Hospital Medication Orders at Transfer

Service, Statute, Rule, or Regulation	Texas Health and Safety Code Chapter 574 (Sections 574.102, 574.103, 574.104, 574.106, 574.1065, 574.107 and 574.110) and Chapter 575
Why the Service, Statute, Rule, or Regulation is Resulting in Inefficient or	State hospitals do not have authority to administer court- ordered medication to people who transfer to a state hospital from an SSLC. SSLCs have authority to compel medication with a court-order for people residing at an SSLC. If a person is

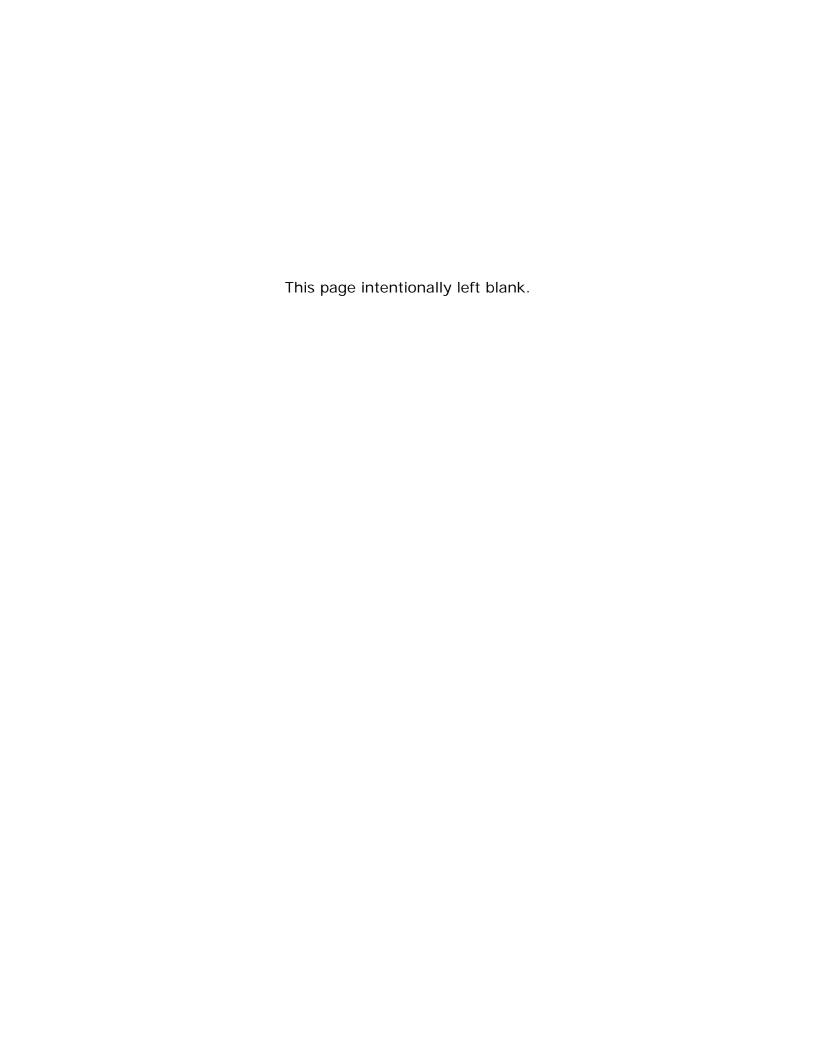
Ineffective Agency Operations	transferred to a state hospital for treatment of mental illness, however, HHSC loses the authority to compel medication.
Agency Recommendation for Modification or Elimination	Amend statute to allow state hospitals to ensure continuity of care and consistent authority across the HHS system.
Estimated Cost Savings or Other Benefit Associated with Recommended Change	Changes would facilitate treatment and could reduce the length of stay for these people.

Health and Specialty Care System: Long-Range Planning Report for State Supported Living Centers

Service, Statute, Rule, or Regulation	Texas Health and Safety Code Section 533A.032, Subsection (c)
Why the Service, Statute, Rule, or Regulation is Resulting in Inefficient or Ineffective Agency Operations	This report is redundant, due to other reporting activities, including the SSLC Long-Term 10-Year Plan, which included an overview of SSLCs, oversight, infrastructure and systems, stakeholder feedback, and recommendations. Additionally, this report requires extensive staff resources. Since HHSC engages in other planning activities due to riders, strategic planning, and other reports, the deletion of this report would increase efficiency for HHSC with no loss to stakeholders, who do not, to the agency's knowledge, use the report.
Agency Recommendation for Modification or Elimination	Amend statute to delete this redundant, obsolete report.
Estimated Cost Savings or Other Benefit Associated with Recommended Change	Staff resources would be available to support the proposed strategic plan for people with IDD, which has been proposed by the IDD-BH division and would be more comprehensive.

Redundancies and Impediments Related to Natural Disasters

At this time, HHSC reports no redundancies or impediments specific to natural disasters.



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