November 16, 2020

Cecile Young, Executive Commissioner  
Michelle Alletto, Chief Program & Services Officer  
Victoria Ford, Chief Policy and Regulatory Officer  
Texas Health and Human Services Commission

Re: Making strategic improvements during the extended Public Health Emergency to better serve clients and reduce administrative costs.

The undersigned organizations represent three major statewide health advocacy coalitions: Children’s Health Coverage Coalition, Texas Women’s Healthcare Coalition, and Cover Texas Now. As organizations dedicated to improving access to health care for all Texans, we are grateful for the tireless efforts of the Texas Health and Human Services Commission (HHSC) staff during the pandemic. Now that the federal Public Health Emergency (PHE) has been extended until January 20, 2021 (with opportunity for further extension), we call on HHSC to use the additional time and flexibility to make strategic improvements in the following areas, to better serve clients when the PHE ends:

1. Make much-needed fixes to the administrative renewal process for Medicaid and CHIP to ensure that more children and families receive the health care they need during the pandemic and beyond.
2. Improve instructions sent to clients about renewing during and after the PHE, to reduce confusion.
3. Build the provider network for new Healthy Texas Women (HTW) Plus benefits, to ensure services are available when new moms are transitioned to HTW after the PHE.

The need for programs administered by HHSC such as Medicaid, CHIP, and SNAP has grown substantially during the COVID-19 pandemic. Household incomes have dropped and an estimated 660,000 Texans became uninsured due to job loss between February and May 2020.1 Many of these individuals, especially children, have become eligible for health coverage through Medicaid or CHIP. Since the beginning of the pandemic, nearly 3.7 million Texans have

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filed for unemployment.\(^2\) Between February and September,\(^3\) SNAP enrollment grew by over 716,000 Texans, a number that continues to rise.

Unfortunately, as you know, just as the need for services has grown, state leaders have instructed HHSC to identify potential spending cuts in the current fiscal year. In response, the agency proposed reducing the number of staff that process applications. As advocates, physicians and providers we oppose these proposed cuts because they will create delays in processing applications for all programs, including Medicaid, CHIP, and Healthy Texas Women.

We call on HHSC to use the extension of the PHE as an opportunity to identify new ways to automate and streamline operations, improvements that will benefit the agency, HHSC staff, and its clients well beyond the pandemic. In particular, we urge HHSC to focus on the following strategic improvements.

**Improve the Administrative Renewal Process**

Federal rules and regulations allow states to implement administrative renewals such that eligible families can be enrolled in Medicaid and other programs without HHSC staff intervention. However, Texas’ current system of administrative renewal is not effective. According to HHSC, fewer than 9% of Medicaid and CHIP clients have their coverage automatically renewed by HHSC at the end of their certification period. This low rate of administrative renewals means HHSC staff must spend time processing the applications manually.

Texas HHSC should prioritize improvements to the Medicaid administrative renewal process to create a more efficient and effective renewal process that would allow eligibility workers to focus on new applications and other processes that cannot be automated. We endorse and urge you to act on the following three specific steps to improve administrative renewals, recommendations also shared with HHSC in a [separate memo](https://www.cbpp.org/research/food-assistance/boost-snap-to-capitalize-on-programs-effectiveness-and-ability-to-respond):

1. HHSC should allow the use of TWC quarterly wage data from the two quarters prior to the current quarter.
2. Stop using New Hire Report data during the automated administrative renewal process.
3. Continuously evaluate the administrative renewal process to identify and correct additional barriers.

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\(^2\) Texas Tribune (2020, October 17) *Texans have filed nearly 3.7 million unemployment claims during coronavirus pandemic*  

\(^3\) Texas Health and Human Service (HHS), SNAP Statistics, *Monthly SNAP cases and Eligible Individuals Statewide*.  

Rosenbaum D. (2020, July 118). *Boost SNAP to Capitalize on Program’s Effectiveness and Ability to Respond to Need*.  
Increasing the number of eligible clients who successfully renew coverage on time will reduce churn and improve continuity of care for the Medicaid and CHIP population in addition to improving accuracy of the system and saving staff time.

Furthermore, improving the administrative renewal process now will help the recently-launched HTW Plus program as established by Senate Bill 750 (86th legislative session) improve continuity of care for new mothers, thus contributing to better postpartum health outcomes. As part of the new Healthy Texas Women (HTW) waiver, HHSC will end auto-enrollment of new moms transitioning from Medicaid for Pregnant Women to HTW 60 days after childbirth and replace it with the problematic administrative renewal process. This change—happening at the same time HHSC is rolling out new HTW Plus benefits—will increase burdens on postpartum women, clinic staff, and state eligibility workers, undermining the goals of HTW Plus. In 2019, over 83,000 new mothers were auto-enrolled into HTW. However, as mentioned above, Texas’ current process for Medicaid administrative renewals is only successful in 9% of cases. If only 9% of the HTW clients successfully transition through the administrative renewal process, that means over 75,000 clients will face obstacles to transfer to HTW, causing delayed or no access to vital postpartum services. For example, a new mom with a four-week-old baby is very likely to be asked to submit proof of income or other documentation within a short timeframe to be transferred into HTW and access HTW Plus benefits. To mitigate the impact on enrollment in HTW Plus, Texas HHSC must fix the administrative renewal process for all Medicaid enrollees to which it is applied, before eliminating the auto-enrollment process for HTW.

**Improve instructions sent to clients about renewing coverage during and after the PHE**

HHSC’s attempt to renew Medicaid coverage during the PHE, despite the guarantee of coverage through the end of the PHE, has created significant confusion among clients, providers, health plans, and advocates. Since renewals resumed in August, community-based organizations, providers, and health plan staff have reported the following examples of confusion:

- Notices stating coverage would end in November, despite the PHE extension to January 2021 (with opportunity for extension).
- Notices with contradictory information, such as a Medicaid end date in 2021, but the need for clients to submit a renewal packet now.
- Notices do not address the confusing reality that clients are being asked to renew coverage even though they cannot be denied during the PHE.
- Notices appear in a significant number of cases to conflict with information provided to clients by 2-1-1 staff.
- The Texas HHS website functionality is confusing despite notices sent to direct clients to a work-around.
Federal CMS COVID-19 FAQs make clear that states have flexibility in meeting the timeliness standards for renewing Medicaid eligibility during the PHE, which has been extended until January 20th, 2020. We urge Texas HHS to take advantage of the flexibility available to the agency to improve the renewal process, client notices, and the online website functionality before continuing to process Medicaid renewal during the PHE.

**Build the physician and provider network for new Healthy Texas Women (HTW) Plus benefits**

As mentioned above, working under both tight legislative timelines and the pandemic, in September, HHSC staff launched HTW Plus, a limited, enhanced postpartum benefit package created by SB 750. Because of the PHE, women are not currently being transitioned into HTW Plus. Right now, only a small cohort of postpartum mothers --women who delivered within the past year but prior to the initiation of federal maintenance of effort requirements and were transitioned into HTW-- are able to access HTW Plus benefits. This gives HHSC more time to ensure there is a physician and provider network in place to provide the additional benefits, including cardiologists for the cardiovascular benefits, and psychotherapists or other mental health professionals for the postpartum depression and mental health benefits. We recommend HHSC:

- Increase outreach and recruitment to potential new HTW Plus participating physicians and providers;
- Help new physicians and providers obtain HTW certification;
- Educate current HTW physicians and providers about HTW Plus, including how to verify patient eligibility, obtain detailed information on enhanced benefits and any limitations, and process for referring eligible women for specialty and behavioral health services;
- Create a client communication plan prior to women needing to access HTW Plus benefits.

Medicaid MCOs are required to educate providers and Medicaid recipients about primary and family services available through the Texas Healthy Women’s program, and our understanding is that HHSC plans to work closely with MCOs to recruit the new subspecialty physician and provider network needed for HTW Plus. However, a successful recruitment strategy will need to be more robust and include partnering with physician and provider associations.

Additionally, HHSC must communicate more frequently and clearly to existing HTW providers, many of whom still have questions about the HTW Plus roll out, despite the very helpful HTW Plus webinar and forthcoming FAQs.

While it is essential that HHSC prioritize building an HTW Plus physician and provider network in order to ensure eligible women can get the care they need, we ask that HHSC simultaneously
work collaboratively with stakeholders to develop its client communication and outreach plan in order to amplify and spread awareness.

Thank you for your attention to these pressing issues. We appreciate the wide range of issues HHSC is managing in the COVID-19 crisis, and hope that attention to these policies that impact so many Texans at a time of great need can also be elevated and addressed soon. We would welcome an opportunity to discuss them further with HHSC staff. You may reach us at dunkelberg@everytexan.org, akohler@txchildren.org, eramirez@hf-tx.org and helen.davis@texmed.org.

Sincerely,
Access Esperanza Clinics Inc.
Centering Healthcare Institute
Children's Defense Fund - Texas
Circle Up United Methodist Women for Moms
City of San Antonio Metropolitan Health District
Coalition of Texans with Disabilities
Doctors for America, Texas State Chapter
El Buen Samaritano
Every Body Texas
Every Texan
Fort Worth Region Nurse Practitioner
Healthy Futures of Texas
League of Women Voters of Texas
Legacy Community Health
March of Dimes
Mental Health America of Greater Dallas
Mental Health America of Greater Houston
National Association of Nurse Practitioners in Women's Health
National Association of Social Workers - Texas Chapter
National Latina Institute for Reproductive Justice
Ntarupt
Pasadena Health Center
PediPlace
Pregnancy and Postpartum Health Alliance of Tx
Proyecto Azteca/RGV Equal Voice Health Committee
South Texas Family Planning & Health Corporation
Susan Wolfe and Associates, LLC
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Texans Care for Children
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Texas Association of Community Health Centers
Texas Association of Community Health Plans
Texas Campaign to Prevent Teen Pregnancy
Texas Medical Association
Texas Nurses Association
Texas Pediatric Society
Texas Women's Foundation
The SAFE Alliance
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Young Invincibles

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