Texas Medicaid and CHIP in Perspective

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Acknowledgments

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Data Sources

Information contained in the 11th edition was current as of August 2016. However, program and financial information may change after publication due to unforeseen changes to federal and state regulations, the state of the economy, and other factors.

Medicaid is a complex program involving multiple agencies and external partners that collect program statistics and financial information. The following are the primary sources of data used in this publication:

Premiums Payable System (PPS) data, which is collected from the System of Application, Verification, Eligibility, Referral, and Reporting (SAVERR) and the Texas Integrated Eligibility Redesign System (TIERS) databases, and compiled by data management staff at the Health and Human Services Commission (HHSC), provides a summary of all Medicaid-eligible clients each month. Both monthly PPS files and final 8-month files, which contain all retroactivity, are used in the analyses.

Expenditure information is obtained from the Texas Medicaid & Healthcare Partnership through the databases in the Vision 21 universe, which includes paid claims, managerial reporting of cash flow, provider and client information, and managed care encounter information. Expenditures include direct payments to physicians, hospitals, and entities that provide ancillary services. Financial information is provided using the Form CMS 64–Quarterly Medicaid Statement of Expenditures for the Medical Assistance Program and the Medicaid Program Budget Report–CMS 37. Additional financial information is provided by the Medicaid Statistical Information System. Unpublished analyses conducted by HHSC Financial Services staff are also used to provide financial information.
Foreword

Greetings -

I am pleased to introduce the 11th edition of *Texas Medicaid and CHIP in Perspective*.

The last two years have ushered in many exciting changes for Medicaid and CHIP services in Texas, including the continued expansion and advancement of managed care, which now serves 92 percent of the programs’ populations.

Most notably, on November 1, 2016, Medicaid integrated over 160,000 children and young adults into managed care with the implementation of STAR Kids. STAR Kids, administered by 10 managed care organizations across 13 service delivery areas throughout the State of Texas, offers a full range of medical, behavioral health and long-term services and supports to qualifying individuals. STAR Kids also provides access to a strengths-based assessment process, person-centered planning, and ongoing service coordination.

Over the next four years, additional populations will be integrated into Texas’ comprehensive managed care framework. Members receiving Adoption Assistance and Permanency Care Assistance Medicaid and services under the Medicaid for Breast and Cervical Cancer program will transition into managed care on September 1, 2017. Consistent with the direction offered by House Bill 3523, 84th Legislature, Regular Session, 2015, the Medicaid & CHIP Services Department will facilitate the transfer of Texas Home Living (TxHmL) waiver services into the STAR+PLUS program on September 1, 2018.

Additionally, on September 1, 2021, services and supports offered to individuals currently enrolled in the Community Living Assistance and Support Services (CLASS), Deaf-Blind with Multiple Disabilities (DBMD), and Home and Community-based Services (HCS) waivers, along with services and supports provided in community-based intermediate care facilities for individuals with an intellectual disability or related condition (ICFs/IID) will transition into STAR+PLUS.

September 1st of this year marks the 50th anniversary of Medicaid in Texas. As we reflect on the program’s development over the last half century, it
is important we take note of our progress and the tremendous role the stakeholder community has played in shaping the Medicaid and CHIP service delivery system in Texas. We look forward to partnering with stakeholders and advocates in the coming years as we explore opportunities to maximize innovation, integrate critical clinical expertise, and uphold our member-focused approach to care – striving to produce better health outcomes for those we serve.

Jami Snyder
State Medicaid Director
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