Outline

• Agency Org Chart
• Procurement Update
• Regulatory Services Update
• HB 1501 (Transfer to Behavioral Health Executive Council)
• Health and Specialty Care System and Construction Update
• Agency Business Plan
Procurement Reforms

**Fiscal Year 2018**
- Established new leadership and enhanced organizational structure
- Developed new compliance tools
- Engaged external entity for independent review
- Enhanced policies and procedures
- Cleared many audit findings

**Fiscal Year 2019**
- Launched tools to improve workflow
- Developed and improved performance metrics
- Continued focus on strengthening PCS workforce
- Comprehensively reviewed/updated procedures for all types of competitive solicitations
- Began implementation of long-term reform projects
- Implemented quality control enhancements
Continued Opportunities

- Improving vacancy rates
- Clearly delineating lines of authority and responsibility
- Further defining the process for developing evaluation criteria
- Comprehensively reviewing the Request for Applications (RFA) process and establishing a dedicated grants team with expertise with RFA solicitations
- Further revising and streamlining procurement procedures for all types of competitive solicitations
- Implementing a comprehensive training plan for PCS and program staff
- Enhancing CAPPS Financials
- Increasing and improving communication between PCS and customer organizations (HHSC, DSHS, DFPS)
- Improving quality assurance through procurement processes
During Transformation, Regulatory Services has undertaken an array of efforts to align functions and processes across its programs:

- **Complaint Intake**: Expanded scope of long-term care (LTC) call center to also field complaints for acute health care facilities (hospitals, etc.)
- **Operational Support**: Stood up new unit to centralize administrative functions (budget, HR etc.) for all five programs, enhancing consistency, efficiency
- **Licensing**: Launched online portal for LTC providers with plans to roll out to other license types
- **Transformation**: Ongoing work with Office of Transformation and Innovation to identify and apply best practices for functions such as enforcement
Texas Behavioral Health Executive Council

- **House Bill 1501, 86th Regular Session, 2019**
  - Creates the Texas Behavioral Health Executive Council (BHEC)
  - Consolidates licensing functions of Texas’ behavioral health licensing boards under BHEC
  - Establishes the Texas Behavioral Health Incubation Task Force, which includes HHSC, to provide guidance to BHEC on the transfer of these functions

- **Transfer to BHEC**
  - HHSC will transfer 40 FTEs in the following licensing programs to BHEC by September 1, 2020:
    - Social Workers
    - Licensed Professional Counselors
    - Marriage and Family Therapists
  - Licensing of Chemical Dependency Counselors and Sex Offender Treatment Providers will remain at HHSC
  - HHSC Regulatory Services and the Office of Transformation and Innovation are working with internal and external stakeholders to ensure a smooth transition
Established in 2017, HSCS is engaged in several improvement and innovation efforts:

- Rebranded the State Operated Facilities division as the Health and Specialty Care System (HSCS)
- Established a business management department to unify business processes and oversight between state supported living centers and state hospitals
- Made policy, structure, and system changes to ensure efficiency, improve services
- Invested significantly in deferred maintenance
HSCS Innovation

Changing population, changing needs

• Services will be improved through:
  o Standardizing forensic services operating procedures and competency restoration assessments and programming
  o Centralizing competency restoration evaluations
  o Providing consultative services to local jails
  o Coordinating with Medicaid and the community mental health system to strengthen the continuum of care

• Specialized Services
  o Behavioral and psychiatric care will be provided at SSLCs without the need to transfer residents to state hospitals
  o Terrell State Hospital Forensic Veteran unit
  o Telemedicine is being used to assist facilities
## State Hospital Construction

### Kerrville SH Renovation
- Add 70-bed MSU
- Expected groundbreaking: Sept 2019
- Planned move-in: Sept 2021
- Design completed
- Begin abatement: Sept 2019
- General contractor on-board: Sept 2019

### Rusk SH Units
- Replace 200-beds, expand MSU
- Expected groundbreaking: Oct 2019
- Planned move-in: Feb 2022 (MSU); Mar 2024 (non-MSU)
- Construction manager-at-risk on-board: Sept 2019
- Schematic design complete: Sept 2019

### San Antonio SH Renovation
- Add 40 beds
- Expected groundbreaking: Fall 2019
- Planned move-in: Apr 2021
- Design completed
- Begin abatement: Fall 2019
- General contractor on-board: Fall 2019

### UTHealth-Houston
- 240-bed Behavioral Health CCC
- Groundbreaking: Jun 2019
- Planned move-in: Dec 2021
- Guaranteed maximum price (GMP) finalized
- Began site work: Jun 2019
- Interior design work complete: Sept 2019

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MSU= Maximum Security Unit
CCC=Continuum Care Campus
State Hospital Construction

Austin SH Replacement
Groundbreaking: Fall 2019
- Initial site work GMP: Sept 2019
- Schematic design complete: Sept 2019
- Begin design development: Sept 2019

San Antonio SH Replacement
Groundbreaking: April 2020
- Full scale living unit mock-up: Jul 2019
- Design development complete: Sept 2019
- Begin construction documents: Sept 2019

Additional need:
- Austin SH Replacement: ~$124.1M
- San Antonio SH Replacement: ~$152.4M
HHS Annual Business Plan

• Provides tangible insight into HHS efforts to continuously improve services and be better stewards of tax dollars

• Outlines key priorities and initiatives that will guide the work of HHS in FY 20 and sets measurable, reportable goals

• Highlights collaboration with stakeholders, legislative partners, and HHS team members

• Examples of plan initiatives include improving health outcomes for women and children, accountability and quality in Medicaid managed care, procurement and contracting processes and outcomes, and the behavioral health continuum of care