



Nov. 30, 2018

Courtney N. Phillips, PhD, Executive Commissioner  
Texas Health and Human Services Commission  
Brown-Heatly Building  
4900 N. Lamar Blvd.  
Austin, TX 78751-2316

*Sent via email*

Dear Commissioner Phillips:

On behalf the Texas Medical Association (TMA), Texas Association of Health Plans (TAHP), Texas Hospital Association (THA), and Texas Association of Community Health Plans (TACHP), we would like to extend a Texas-sized congratulation on your appointment as the Texas Health and Human Services Commission (HHSC) executive commissioner. Based on what we know of your leadership style and previous accomplishments, we believe you will be an excellent addition to HHSC.

Among its many roles, HHSC manages and oversees Medicaid, a program vital to improving the health and well-being of Texans of all ages. Without it, more than 4 million people — our patients as well as our neighbors, family, and friends — would go without preventive, primary, and specialty care, including behavioral health care. As you well know, Medicaid also plays a critical role in addressing Texas' most challenging health care problems — poor maternal health outcomes and a rising number of people with substance abuse addictions. Texas Medicaid pays for some 53 percent of all births within the state, giving it a huge stake in advancing Texas' efforts to reduce maternal mortality and morbidity. Medicaid also is one of the largest payers for chemical dependency treatment, making it imperative that the program seek and implement prevention and early intervention initiatives to improve health outcomes, while lowering costs. And thanks to Medicaid, many older Texans and Texans with disabilities are able to live independently in their homes and communities.

Yet we also acknowledge that the program faces unique challenges that too often impair its ability to meet the needs of enrollees. As you learn more about the issues facing Texas Medicaid, we would like to partner with you and your staff to implement pragmatic reforms our organizations believe will help ensure more timely, accountable, and quality care while also eliminating unnecessary and costly administrative processes that do not benefit patients or taxpayers.

To develop an action plan, on Oct. 12 our organizations held a joint Medicaid Managed Care Summit, where participants identified four issue-areas on which to collaborate:

- **Modernize the Medicaid Program:** Reducing red tape and administrative burdens will lead to more timely and efficient care, and will encourage more physicians to participate in the Medicaid program.
- **Improve Systems and Processes of Care:** Streamlining current processes that affect the delivery of health care in Medicaid, such as care coordination, will result in increased access for covered Texans, as well as a more efficient system for physicians, hospitals, and health plans.
- **Increase Access to Care:** Increasing access to physicians, health care providers, and services, with a particular interest in enhancing preventive, behavioral, and maternal health care, will result in healthier Texans and reduced costs for taxpayers.
- **Strengthen Patient Protections:** Texas Medicaid clients should be able to register complaints easily when they feel they are not receiving the quality of care they need, but the current processes are confusing and intimidating. Simplifying and improving these processes will ensure better health care for Texans covered by Medicaid.

We believe HHSC has the authority to implement many of the reforms identified by the summit participants without additional legislative or federal approval. Examples include:

- Strengthening Medicaid appeals and fair hearing processes, including improving patient and provider education regarding how to appeal an adverse determination or request a fair hearing and allowing patients to obtain an independent medical necessity review following an adverse determination;
- Reforming coordination of benefits for clients who have Medicaid and either Medicare or commercial coverage to improve client access to services and reduce administrative burdens for physicians, providers, patients, and health plans;
- Eliminating the use of the unique Texas Medicaid provider number, called the Texas Provider Identifier, in lieu of using only a National Provider Identifier;
- Streamlining and improving prior authorization processes;
- Clarifying definitions of care coordination, service coordination, and case management to help physicians and providers better understand what services are available by population;
- Increasing outreach to women regarding the importance of preventive health care, including early prenatal care;
- Aligning Medicaid fee-for-service (FFS) and Medicaid managed care organization (MCO) rate changes to reduce administrative burdens and hassle of reprocessing claims;
- Clarifying that physician specialists treating inpatients, rather than the primary care physician, are authorized to sign for durable medical equipment to facilitate timely hospital discharge;
- Allowing Medicaid MCOs, medical specialty societies, and provider organizations to collaborate on developing new or updated interim statewide medical policy when current policy does not reflect current medical practice or for which Medicaid FFS has yet to establish policy;
- Clarifying that MCOs and physicians participating in value-based payment/alternative payment models may deviate from Medicaid FFS policy and procedures;

- Improving hospital discharge planning processes so that clients can have a more successful transition out of the hospital;
- Streamlining the STAR Kids Assessment Tool; and
- Establishing a “no wrong door” policy for physicians and providers to complete Medicaid enrollment

Other efforts to modernize Medicaid likely will require legislative and/or budgetary direction, including:

- Ensuring women of reproductive age receive continuous preventive, primary, and specialty care, including behavioral health, before, during, and after pregnancy to reduce Texas’ rate of maternal mortality and morbidity; and
- Supporting implementation of bulk purchasing arrangement for long-acting reversible contraceptives to eliminate up-front cost of purchasing devices for physicians and hospitals.

We also urge HHSC to expeditiously pursue reforms requiring approval from our federal partners, including:

- Allowing advanced practice registered nurses and physician assistants practicing under physician supervision and delegation to sign Title 19 forms;
- Allowing use of an electronic physician signature on Title 19 forms; and
- Allowing MCOs to eliminate use of Title 19 forms for practices participating in Medicaid MCO value-based payment initiatives and who fulfill Title 19 requirements through alternate means.

Our associations also identified stakeholder-driven reforms to be undertaken in partnership with each other, including:

- Developing a standard order form for complex patients; and
- Developing training opportunities to educate physicians on best practices relating to ordering and assessing ongoing need for private-duty nursing and therapy services.

Together, our four associations believe making the above regulatory and legislative changes will improve physician, provider, and patient satisfaction while also building on Texas’ efforts to address two of its most pressing health care challenges — the alarming rate of maternal mortality and morbidity and worrying substance use addiction trends.

Moreover, we encourage HHSC to foster greater cooperation and teamwork among our organizations and the agency by structuring stakeholder meetings so that all relevant organizations are at the table together. In the past, agency staff typically met independently with representatives from each association rather than convening a joint meeting with all. While it is sometimes necessary to meet separately, a meeting with all principals will, in most cases, contribute to better programmatic outcomes.

**To discuss our ideas in more depth, we respectfully request a meeting at your earliest convenience with representatives from TMA, TAHP, THA, and TACHP.**

Texas is a big state. Over the next few months, we know you will be very busy getting to know it and the multitude of health care challenges — and opportunities — Texans' face. While we will not be able to solve every problem overnight, we believe that working together we can make tremendous strides.

We look forward to helping make your transition to Texas a success.

Sincerely,



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President  
Texas Medical Association



Jamie Dudensing  
Chief Executive Officer  
Texas Association of Health Plans



John Hawkins  
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Kay Ghahremani  
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cc: Stephanie Muth, Deputy Executive Commissioner, Medicaid & CHIP Services  
Karen Ray, Chief Counsel