



**House Human Services Committee**  
**Testimony of the Texas Women's Healthcare Coalition**  
**Senate Bill 1149 -- Support with Amendments**  
**May 11, 2021**

The Texas Women's Healthcare Coalition (TWHC) and its 87 healthcare, faith, and community-based member organizations are dedicated to improving the health and wellbeing of Texas women, babies, and families by ensuring access to preventive healthcare for all Texas women. TWHC is committed to the success of Texas' women's health programs -- Healthy Texas Women (HTW), Family Planning Program (FPP), and Breast and Cervical Cancer Services Program (BCCS). Access to preventive and preconception care—including contraception—means healthy, planned pregnancies and early detection of cancers and other treatable conditions.

Thank you for this opportunity to provide testimony on Senate Bill 1149. We are in support of efforts to continue to reduce maternal mortality and morbidity. We are in support of the bill, with suggested amendments that we believe will help ensure the continuity of care for women as HTW transitions to a managed care delivery model, provide needed legislative direction to the Health and Human Services Commission (HHSC), and enable women to be seamlessly connected to essential healthcare services in HTW. TWHC's three goals build upon the intent of the legislation to streamline access and promote efficiencies to improve health outcomes for women. These goals are listed below.

**1. Require HHSC to consult with the State Medicaid Managed Care Advisory Committee (SMMCAC) -- an existing and successful advisory committee at HHSC -- as the state transitions HTW to managed care. This step ensures vital opportunity for public and provider input.**

SB 1149 directs HHSC to contract with Medicaid managed care organizations to provide HTW services. This builds on SB 750 (86th legislative session) which directed HHSC to assess the feasibility and cost-effectiveness of providing HTW through managed care.

While TWHC and many of our members agree that there may be many benefits to delivering HTW services through a managed care model (i.e., network adequacy, service coordination, and/or case management for postpartum women), a number of concerns have been raised regarding the role of traditional providers of core family planning services, including impact on the close interaction between HTW and FPP administration for these traditional providers. Because women's health in Texas has a long history of programmatic and administrative



changes, TWHC and our members stressed the need for significant and meaningful stakeholder engagement—specifically from those who represent providers participating in HTW, traditional HTW providers themselves, and the health plans—to discuss the impacts a change in service model would have prior to HHSC making a determination. Health providers are *key* to continued success of HTW because *they* serve women and we want to keep the provider network intact.

HHSC [surveyed stakeholders](#) in September 2020 but did not complete the feasibility analysis as a result of the pandemic. To ensure timely stakeholder feedback, TWHC recommends using the State Medicaid Managed Care Advisory Committee (SMMCAC), an established body equipped to engage stakeholders on matters related to managed care. The SMMCAC can identify and resolve potential barriers for traditional family planning providers in transitioning from a HTW fee for service model to a HTW managed care delivery model.

## **2. Direct HHSC to identify and implement options to reduce enrollment gaps stemming from forthcoming changes in eligibility and enrollment policies.**

Texas' 1115 women's health waiver required the state to make changes to its HTW eligibility and enrollment policies - policies that could inadvertently jeopardize continuity of care for women. Via SB 1149, the state can help mitigate the impact of these enrollment obstacles: the cessation of automatic enrollment of new moms from Medicaid for Pregnant Women to HTW and adjunctive eligibility for HTW enrollment. These two policies have helped boost HTW client enrollment over the last several years -- thereby reducing unintended pregnancy, improving health, and reducing costs to the state.

Since 2007, HHSC has used adjunctive eligibility to accurately confirm whether a woman is income eligible for the program while minimizing burdens on women, clinics, and agency employees. At application or renewal a woman is not required to prove her income again for HTW if she is enrolled in the Women's Infants and Children's Program (WIC), has a child enrolled in Medicaid, or is in a household that receives SNAP or TANF. And since 2016, new mothers have automatically transitioned into HTW when coverage ends under the Medicaid for Pregnant Women program -- a policy that ensures continuity of care and improves health outcomes. The auto-enrollment policy did not require new mothers to submit another application or additional documentation during the process.

HHSC replaced automatic enrollment with their "administrative renewal" process. In the administrative renewal process, HHSC first checks internal databases to verify income eligibility and then requires new moms to submit documents to confirm eligibility for HTW within a



10-day time frame. According to HHSC, using the administrative renewal process, fewer than 9% of Medicaid and CHIP clients have their coverage automatically renewed successfully at the end of their Medicaid certification period. Nine out of 10 moms with two-month-old newborns will have to submit several documents to HHSC within a 10-day time frame to enroll in HTW after Medicaid ends. Once the public health emergency ends, this policy change will undoubtedly result in women not being connected to HTW, undermining postpartum health and cost savings.

Under SB 1149, while health plans would help coordinate care once a woman is determined eligible for and enters HTW, it does not address this eligibility barrier, and health plans cannot avoid or work around this requirement. There are steps Texas can take to mitigate enrollment gaps for women, such as asking CMS to waive certain requirements or giving clients more time to submit verification paperwork (30 days instead of 10 days). Because of the passage of the American Rescue Act, we believe CMS may be more open to allowing Texas to reinstate auto-enrollment for moms transitioning from Medicaid to HTW. ***Providing HHSC legislative direction to identify options and take needed steps would ensure success of HTW as it transitions to managed care, reduce gaps in care for women, and maximize cost savings for the state.***

**3. Specify that current HTW and FPP Providers will be designated Significant Traditional Providers in the course of implementation. Ensure requirements apply statewide to Medicaid managed care organizations for providers serving individuals in the Healthy Texas Women program.**

According to the latest Women's Health Programs Savings and Performance report, 50 contractors participate in the Family Planning Program. All of these contractors are also HTW providers. In addition to the FPP services they provide, these 50 contractors saw over one-third of the total clients served in HTW. These traditional providers of core family planning services are often not in Medicaid managed care networks and not familiar with managed care. If HHSC and health plans do not help them transition to the new managed care world, the harm will be felt in both FPP and HTW. One way to ensure the family planning network remains intact during the transition to managed care is to designate HTW providers as Significant Traditional Providers (STPs). STPs are defined as any provider identified by HHSC as having provided a significant level of care to Medicaid or CHIP clients. The HHSC Uniform Managed Care Contract requires MCOs to give designated STPs the opportunity to participate in its network. We believe clearly articulating this designation for Healthy Texas Women providers in SB 1149 will help ensure traditional providers of core family planning services that have a long history of serving women



through HTW and FPP will be supported, continue to participate in HTW, and ensure a successful HTW carve-in to managed care.<sup>1</sup>

Thank you for considering legislation to improve access to women's health services and continuing to work towards improved health outcomes for Texas women.

TWHC represents various organizations providing direct healthcare, advocacy, or other community-based services across Texas. We are eager to work with you on these issues. We are happy to provide any additional information and welcome the opportunity to schedule follow up conversations. You can contact me at [edelgado@texaswhc.org](mailto:edelgado@texaswhc.org) or 210-535-6991.

Respectfully,

Evelyn Delgado  
Chair, Texas Women's Healthcare Coalition

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<sup>1</sup> There is precedent for STP designation in statute. SB 7 by Sen. Nelson (83R), which moved STAR Kids to managed care, includes a section on acute care services for kids with disabilities. The bill states that providers that participate in the home and community-based services (HCS) waiver program, the Texas home living (TxHmL) waiver program, or the community living assistance and support services (CLASS) waiver program must be considered Significant Traditional Providers as part of transitioning service delivery to the managed care model. In previous managed care roll outs, primary care providers and certain other provider classes were designated as STPs for 3 years.



# Texas Women's Healthcare Coalition

PROMOTING ACCESS TO PREVENTIVE  
HEALTHCARE FOR ALL TEXAS WOMEN

## Texas Women's Healthcare Coalition Steering Committee Members

Texas Medical Association  
District XI (Texas) American College of Obstetricians and Gynecologists  
Texas Academy of Family Physicians  
Texas Association of Community Health Centers  
Methodist Healthcare Ministries  
Teaching Hospitals of Texas  
Every Body Texas  
Texans Care for Children  
Every Texan  
*Chair - Healthy Futures of Texas*

## Texas Women's Healthcare Coalition General Members

- Access Esperanza Clinics Inc.
- Amistad Community Health Center
- Austin Advanced Practice Nurses
- Austin Physicians for Social Responsibility
- AWHONN Texas
- Brazos Valley Community Action Agency, Inc.
- Brazos Valley Nurse Practitioner Association
- Cactus Health
- Cardea
- Center for Community Health, UNTHSC
- Centering Healthcare Institute
- Central Texas Nurse Practitioners
- Children's Hospital Association of Texas
- Circle Up United Methodist Women
- Coalition for Nurses in Advanced Practice
- Coastal Bend Advanced Practice Nurses
- Coastal Bend Wellness Foundation
- Community Healthcare Center
- Consortium of Texas Certified Nurse Midwives
- Department of Pediatrics and Women's Health, UNTHSC
- El Buen Samaritano
- El Centro de Corazón
- El Paso Area Advanced Practice Nurse Association
- Food Bank of the Rio Grande Valley
- Fort Worth Region Nurse Practitioners
- Haven Health
- Hill Country Advanced Practice Nurses & Physicians Assistants Association
- Houston Area Chapter of NAPNAP
- Houston Area Nurse Practitioners
- Improving Maternal Health
- Latina Institute for Reproductive Justice Texas
- League of Women Voters of Texas
- Legacy Community Health Services
- Lone Star Family Health Center
- March of Dimes – Texas
- Mental Health America of Greater Houston
- National Association of Nurse Practitioners in Women's Health
- National Council of Jewish Women—Texas State Policy Advocacy Network
- North Harris Montgomery Advanced Practice Nurse Society
- North Texas Alliance to Reduce Teen Pregnancy
- North Texas Nurse Practitioners
- Nurse-Family Partnership
- Panhandle Nurse Practitioner Association
- Pasadena Health Center
- People's Community Clinic
- Port Arthur Housing Authority
- Pregnancy and Postpartum Health Alliance of Texas SALVERE
- San Antonio Metropolitan Health District
- San Antonio Nurses in Advanced Practice
- Schneider Communications
- South Plains Nurse Practitioner Association
- South Texas Family Planning & Health Corp.
- Southeast Texas Nurse Practitioner Associates
- Special Health Resources
- St. David's Foundation
- Susan Wolfe and Associates, LLC
- Texas Association of Community Health Plans
- Texas Association of Obstetricians and Gynecologists
- Texas Campaign to Prevent Teen Pregnancy
- Texas Council on Family Violence
- Texas Health Institute
- Texas Hospital Association
- Texas Medical Association Alliance
- Texas Nurse Practitioners
- Texas Nurses Association
- Texas Oral Health Coalition
- Texas Pediatric Society
- Texas Unitarian Universalist Justice Ministry
- Texas Women's Foundation
- The Contraceptive Initiative
- The SAFE Alliance
- The Women's Fund for Health Education and Resiliency
- University Health System
- Valley AIDS Council
- Women's & Men's Health Services of the Coastal Bend, Inc.
- Young Invincibles