



June 21, 2021

Texas Health and Human Services Commission  
Attention: Basundhara Raychaudhuri, Waiver Coordinator  
Via Email: TX\_Medicaid\_Waivers@hhsc.state.tx.us

**Re: Comments on the Progress of the Healthy Texas Women Waiver for the Post Award Forum**

Dear Ms. Raychaudhuri:

On behalf of the Texas Women's Healthcare Coalition, thank you for this opportunity to provide feedback on the Health and Human Services Commission's (HHSC) implementation of the Healthy Texas Women (HTW) 1115 waiver. We appreciate all the work and commitment that goes into administering the program and improving women's health.

The Texas Women's Healthcare Coalition (TWHC) and its 87 healthcare, faith, and community-based member organizations are dedicated to improving the health and well-being of Texas women, babies, and families by ensuring access to preventive healthcare for all Texas women. Access to preventive and preconception care – including health screenings and contraception – means healthy, planned pregnancies and early detection of cancers and other treatable conditions.

The HTW 1115 Demonstration Waiver implementation has included the **removal** of three critical HTW components: **Auto-enrollment** of new mothers from Pregnant Women's Medicaid into HTW; **Adjunctive eligibility** for women applying for HTW that are already enrolled in WIC, have a child in Medicaid, or in a household that receives SNAP or TANF; and, the **Simplified HTW Application Form** (Form H1867). These policies helped streamline enrollment and eligibility. Now, with their removal, there is concern among TWHC members, including participating HTW providers, that the goal of HTW - connecting women to health services - will be undermined.

HTW providers have already raised concerns on the additional administrative burden placed on application assistance with the switch to the longer, more complicated Healthcare application Form 1205. Among other provider and client challenges, these policy changes will compromise client's access to timely, preventive healthcare and are sure to decrease HTW enrollment.



Constructing barriers and disrupting the efficiency these policies created will result in fewer women served, increasing unintended pregnancies – ultimately impacting health outcomes and increasing state Medicaid costs.

We understand that HHSC must make certain eligibility changes to meet federal waiver requirements, such as converting HTW's Federal Poverty Level threshold to a MAGI equivalent. However, there are clear policy steps possible under the HTW waiver to ease the transition of new mothers from Medicaid to HTW, maintain continuity of care, maximize state cost savings, and minimize burdens on women, health clinics, and the state. Below is a summary of potential solutions.

### **Steps to make the transition from Medicaid for Pregnant Women to HTW more efficient:**

1. HHSC should take steps to comply with the December 2020 Centers for Medicare and Medicaid Services (CMS) guidance that seeks to increase efficiencies in enrollment processes. Specifically, three key steps are needed to comply with federal guidance:

- a. Provide a 12-month eligibility period to pregnant women who enroll in Medicaid for Pregnant Women, starting in the month of application;
- b. Make transitions more efficient by treating the end of pregnancy and aging out of Children's Medicaid as a change in circumstance (rather than requiring a burdensome renewal). Under the CMS guidance, states may not require a full renewal or require a woman to reverify income at the end of the 60-day postpartum period unless the agency has information that her income has changed and that she would be ineligible for other programs;
- c. Provide clients 30 days to submit verification information when HHSC is acting on changes in circumstance, including two scenarios: the end of pregnancy and aging out of Children's Medicaid. HHSC's current policy of 10 days for clients to provide verification of a change in circumstance does not align with CMS' expectation of 30 days. A reasonable time frame is especially important for a mother with a newborn who may need to verify a change or submit information at the end of the 60-day postpartum period.

2. Improve the administrative renewal process to ensure fewer women churn off of coverage at renewal. This will also 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. We recommend the improvements outlined and shared with HHSC by Every Texan in a [separate memo](#).



3. HHSC should consider post-enrollment verification for women transitioning from Medicaid for Pregnant Women to Healthy Texas Women. Post-enrollment verification would not require a waiver from CMS and is already used for pregnant female applicants to Texas Medicaid for Pregnant Women.

4. HHSC should use self-attestation as verification for certain eligibility criteria – such as self-attestation of residency – in order to enable a better transition for new moms. Medicaid and CHIP regulations allow for the use of self-attestation as verification for all eligibility criteria except income, citizenship/immigration status, and SSNs. This does not require a waiver from CMS .

**To continue Texas' progress in enrolling new eligible clients in HTW:**

5. HHSC could request a waiver to continue adjunctive eligibility. CMS has allowed adjunctive eligibility for certain MAGI-based eligibility groups, such as express lane eligibility for children's Medicaid when they are enrolled in SNAP or WIC.

We also request HHSC monitor any changes to enrollment, service utilization, and access as a result of HTW waiver implementation and the policy changes discussed above. Also, moving forward, we want to reiterate the wealth of knowledge and expertise from longtime participating, traditional family planning providers and call for ample provider engagement prior to implementing any further changes to HTW, including as a result of HB 133 from the 87th Regular Legislative session which transitions HTW to managed care.

Thank you for your consideration, and all your work on women's preventive healthcare. We value HHSC's staff commitment and hope to have an ongoing dialogue on how to continue improving women's health in Texas. If you have any questions or if we can provide further information, please contact me at (210) 223-4589 or EDelgado@TexasWHC.org.

Respectfully submitted,

Evelyn Delgado  
Chair, Texas Women's Healthcare Coalition