



Texas Health and Human Services Commission

Attention: Jayasree Sankaran

Via Email: TX_Medicaid_Waivers@hhsc.state.tx.us

Re: HTW 1115 Waiver Renewal

Attention Health & Human Services Commission,

On behalf of the **Texas Women's Healthcare Coalition (TWHC)**, I want to thank you for this opportunity to provide feedback on the transition of the Healthy Texas Women Program (HTW) 1115 Waiver Renewal Application.

TWHC and its 80+ 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 these services throughout a woman's reproductive years – including health screenings and contraception – contributes to healthy, planned pregnancies as well as early detection and treatment of cancers and other chronic conditions.

In alignment with this mission, we wish to make recommendations from our coalition regarding the proposed 1115 HTW waiver proposal and encourage the state to consider them in its application to CMS as we have now had 5 years to fully understand the impacts of the current waiver parameters.

1) Request the use of a Short Form Family Planning Only Application for women that wish to be enrolled in HTW and do not qualify for or are not interested in applying for Medicaid.

Advocates, providers and patients have been requesting this change for several years, and data from HTW applications shows that when the program transitioned to a Medicaid waiver program and implemented a long Medical Assistance application in 2019, **acceptance rates dropped** from approximately 50% to 30% for Texas women. In addition, **procedural denials due to missing information increased** from 13% to approximately 30% between 2019 and 2023.¹

Several other states have implemented a short form Medicaid Family Planning application² in addition to the streamlined Medical Assistance application and we encourage Texas to examine these options now while the opportunity is present.

2) HHSC should opt in to presumptive eligibility for the HTW population, and allow HTW contractors to use it, in order to increase enrollment and utilization of HTW services for Texas Women.

In the first iteration of the 1115 Waiver for HTW, HHSC opted not to use presumptive eligibility, which is allowable by CMS to ensure that women can receive same day services for birth control. We encourage Texas to take this opportunity to opt in on presumptive eligibility for the HTW population. It is something

¹ HTW Application Data 2019- 2023. Health and Human Services Commission. Averages calculated by FY Quarter.

² Mississippi State Department of Health. Division of Medicaid Family Planning Waiver.
<https://msdh.ms.gov/msdhsite/ static/41,0,107.html>



that other Medicaid waiver populations in Texas have access to, and **we believe every woman in Texas who needs access to birth control should be able to receive services immediately**, without providers or the state having to absorb costs because of the burdensome HTW application process and current processing timelines.

- 3) HHSC should determine household income by looking at the woman's income only, rather than extending this requirement to everyone in the household, as this continues to be a barrier to birth control access for college aged women³.**

Requiring young women to track down and identify all of the extraneous income and tax information for all persons in her household can be an insurmountable task, especially when those individuals may have no role in paying for or privy to her medical decisions. HHSC should opt for increased flexibility here to boost access similar to other states.

- 4) HHSC should take steps to ensure network adequacy and expedited provider credentialing when moving HTW into Managed Care.**

As of FY2022, there were just over 3000 Healthy Texas Women billing providers across the state. There are still vast areas of land with no providers, and areas with less than 10 providers per county, including specialties and ambulatory services, making it hard or impossible for women to obtain HTW care.

- We recommend that HHSC take steps during this interim to ensure that MCOs who are awarded contracts for HTW can assure stability and growth in the statewide provider network.
- We recommend that MCO contracts include a provision that requires them to have a consistent point of contact for HTW providers, and that this person be available for troubleshooting issues and billing questions.
- As a part of MCO readiness and education activities, HHSC should offer every available opportunity to learn about state and federal family planning requirements including choice of provider and prior authorization policies before implementation of HTW into Managed Care.
- As part of the transition calls with MCOs, TWHC recommends the agency bring in women's health stakeholders and women's health providers.
- TWHC also recommends considering the non-postpartum clients who will apply and enroll in the program without transitioning from Medicaid or CHIP. Clients who have no previous experience with managed care will need assistance with navigating the managed care system, which could include application assistance and supportive service coordination.

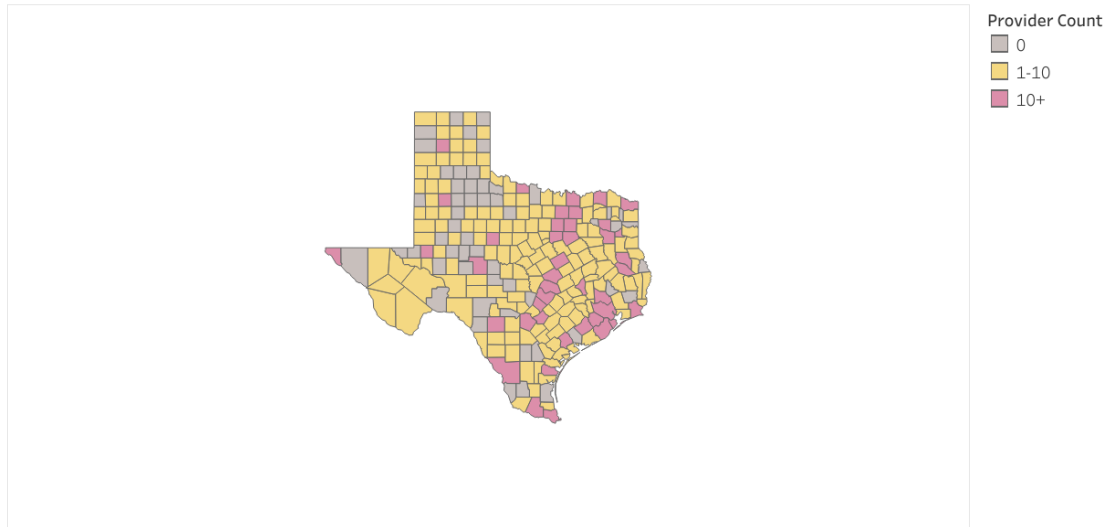
³ Implementing State-Level Processes That Enhance Access to Medicaid Family Planning Program Services. Manatt Issue Brief. June 7, 2023. <https://www.manatt.com/insights/white-papers/2023/implementing-state-level-processes-that-enhance-ac>



Texas Women's Healthcare Coalition

PROMOTING ACCESS TO PREVENTIVE
HEALTHCARE FOR ALL TEXAS WOMEN

Healthy Texas Women
Fee For Service Providers
FY 2022



TWHC appreciates the opportunity to weigh in on this transition, and we look forward to partnering with HHSC to support providers during this time.

If you have any questions or if we can provide further information, feel free to contact me at (210) 223-4589 or EDelgado@healthyfutures-tx.org.

Respectfully submitted,

Evelyn Delgado
Chair, Texas Women's Healthcare Coalition

Appendix A

APPLICATION FOR MISSISSIPPI FAMILY PLANNING SERVICES

(This application is for women or men age 13 – 44 who have not had any surgery to prevent reproduction. It is for family planning services only.)



1. Name of Applicant _____
(First name) (Middle or maiden name) (Last name)
2. Social Security Number _____ - _____ - _____ 3. Date of Birth _____
4. Gender Female Male 5. Race _____
6. Address _____
(Street address) (City) (State) (Zip) (County)
7. Mailing address (if different) _____
(Street or PO Box) (City) (Zip) (County)
8. Telephone number(s) _____ _____ _____
(Home) (Cell) (Work)
9. Are you disabled? Yes No 10. If female, are you pregnant? Yes No
11. Have you had a hysterectomy, tubal ligation (Female) or vasectomy (Male)? Yes No
12. Do you have health insurance? Yes No If you have health insurance, complete the following:

Policyholder's Name _____

Insurance Company _____ Policy/Group # _____

Does your insurance cover family planning services? Yes No
13. Are you a U.S. citizen? Yes No If no, are you a legal permanent resident who arrived in the U.S. prior to 5 years prior to this application date? Yes No
14. Are you married? Yes No If yes, name of spouse _____

Spouse's SSN* _____ - _____ - _____ Date of Birth _____
(You are not required to give us your spouse's Social Security Number (SSN) but it will speed up the application process. We use SSNs to check income and verify your eligibility.)

15. Household members: List members of your household, their age & relationship to you.
NOTE: Applicants under age 19 do not have to complete this section

Name of Household Member	Age	Relationship to You

16. Income: Provide income information for you and/or your spouse. Include all types of income from work or from any other source.
NOTE: Applicants under age 19 do not have to complete this section

Source of Income (Employer’s Name or other source)	Amount (before deductions or taxes)	How Often Received?	If working, average hours worked per week
	\$		
	\$		
	\$		

If you and/or your spouse are self-employed, list the total net income (profit after allowable IRS expenses). \$ _____ How often received? _____

17. Read and Sign this Application: I am signing this application under penalty of perjury which means I have provided true answers to all the questions on this form to the best of my knowledge. I know that I may be subject to civil and criminal penalties under federal law if I provide false and/or untrue information.

_____ (Signature of Applicant) _____ (Date)

For assistance, call the Office of Eligibility 800-421-2408. Submit the application as follows:

Mail: MS Division of Medicaid ATTN: Office of Eligibility
550 High Street, Suite 1000 Jackson, MS 39201-1399

Fax: (601) 576-4164

In-Person: at any Medicaid Regional Office

Information that you give is confidential. Your medical information can only be released if needed to administer the Family Planning Waiver. If you receive family planning services under this waiver, you authorize your family planning provider to release information to Medicaid relating to your examination and treatment for family planning.