

Who is covered in Texas's Medicaid Program?

ELIGIBILITY GROUPS

	FFS ¹⁻³	MCO ⁴⁻⁹	
Incarcerated*			Children (0-18 years)
Undocumented Immigrants+			Current & Former Foster Care Children
			Parents and other Caretaker Relatives
			Pregnant Women
			Aged, Blind, and Disabled Adults
			Dual Eligibles
			Disabled Children
			American Indians/Alaskan Natives
			Qualified Non-Citizens**
			Intellectual and Developmental Disabilities

* Inpatient hospital services only.

**Qualified non-citizens are subject to a 5-year waiting requirement, except for children under 18 years of age.

+ Emergency Medicaid services only.

Important News

2013 - Republican lawmakers in Texas pass a measure that requires the state Health and Human Services Commission to receive approval from the legislature before any future Medicaid expansion decisions are made.¹⁰

May 2017 - Texas submits a waiver request for a federally funded family planning program that excludes providers that perform or support abortions, such as providers affiliated with Planned Parenthood.¹¹



Do Medicaid health plans provide coverage?¹²

YES NO

- Aetna Better Health
- Amerigroup
- Blue Cross Blue Shield of Texas
- CHRISTUS Health Plan
- Cigna HealthSpring
- Community First Health Plans
- Community Health Choice
- Cook Children's Health Plan
- Driscoll Children's Health Plan
- El Paso First Premier Plan
- FirstCare
- Molina Healthcare of Texas
- Parkland Community Health Plan, Inc.
- RightCare from Scott & White Health Plan
- Sendero Health Plans
- Seton Health Plan
- Superior HealthPlan
- UnitedHealthcare Community Plan of Texas
- Texas Children's Health Plan

How has Texas's Medicaid program engaged in Managed Care?

SECTION 1115 WAIVERS¹³

The **healthy Texas women** waiver was designed to improve the existing healthy Texas women (HTW) program, providing family planning and women's health services to low-income women at no cost. The original HTW consolidated all women's health initiatives into one comprehensive program. This waiver will run HTW under this demonstration. An application was submitted for approval on 07/05/2017. As of June 2018, the waiver was still pending.

Status: Pending approval.



The **Texas healthcare transformation and quality improvement program** was created to expand Texas' Medicaid managed care program by adding new eligibility groups and services and to allow savings generated from managed care to be used for reimbursing providers for uncompensated care costs. An amendment was submitted for approval on 12/10/2014. As of June 2018, the waiver was still pending.

Status: Amendment pending approval.

APPROVAL:
12/12/2011

EFFECTIVE:
12/12/2011

EXPIRATION:
12/31/2017

How is Texas meeting the needs of Medicaid enrollees?

Family Planning¹⁴

The family planning program offers similar benefits to the healthy Texas women program, but is offered to males and females under 64. Covered services include (bolded services are unique to the family planning program):

- Pregnancy testing
- Pelvic examinations
- Sexually transmitted infection services
- Breast and cervical cancer screenings
- Clinical breast examination
- Screening for cholesterol, diabetes, and high blood pressure
- HIV screening
- Long-acting reversible contraceptives (LARC)
- Oral contraceptive pills
- Permanent sterilization
- Other contraceptive methods such as condoms, diaphragm, vaginal spermicide, and injections
- **Natural family planning counseling**
- **Limited prenatal benefits**



Women's Health

The healthy Texas women (HTW) program provides coverage for women ages 15 to 44 who have little or no money. HTW covers similar services to the family planning program. Covered services include (bolded services are unique to HTW):¹⁵

- Pregnancy testing
- Pelvic examinations
- Sexually transmitted infection services
- Breast and cervical cancer screenings
- Clinical breast examination
- Screening and treatment for cholesterol, diabetes, and high blood pressure
- HIV screening
- Long-acting reversible contraceptives (LARC)
- Oral contraceptive pills
- Permanent sterilization
- Other contraceptive methods such as condoms, diaphragm, vaginal spermicide, and injections
- **Screening and treatment for postpartum depression**



The Medicaid for breast and cervical cancer program provides full Medicaid services for women ages 18-64 who have a certain type of breast or cervical cancer or pre-cancer.¹⁶

Mental Health and Substance Use Disorder

The youth empowerment services (YES) waiver program was implemented by the Health and Human Services Commission and the Department of State Health Services to give home and community-based services to children ages 3-18 who have experienced a severe emotional disturbance. The goal is to minimize the number of children who are institutionalized by promoting care in their community or home.¹⁷

- Emergency behavioral health services¹⁸
- Drug abuse services¹⁹
- Covered drug therapies: methadone, naloxone, naltrexone, and disulfiram²⁰



Oral Health

Enrollees who are 21 years of age or older are only eligible for emergency dental services.²¹ Medicaid MCOs cover the following services for children through 20 years of age:¹⁸

- Treatment of dislocated jaw
- Treatment for traumatic damage to teeth and supporting structures
- Removal of cysts
- Treatment of oral abscess of tooth or gum origin
- Treating craniofacial anomalies
- Checkups starting at 6 months of age





TX

Timeline

Federal

Texas

President Johnson signs Social Security Amendments of 1965, creating Medicaid as public health program for the poor.

1965

Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services are a requirement for children enrolled in Medicaid.

1967

1967

Texas adopts the Medicaid program.²²



Supplemental Security Income (SSI) program becomes Medicaid eligibility category for the elderly and persons with disabilities.

1972



Home and Community-Based Services (HCBS) waivers created for Long-Term Care (LTC) and Disproportional Share Hospital (DSH) payments.

1981

Children and pregnant women become mandatory Medicaid eligibility groups.

1984

Children up to age 6 and pregnant women up to 133 percent of the federal poverty level (FPL) become eligible; EPSDT benefit expanded.

1989

Mandatory eligibility extended to children ages 6 to 18 years in families up to 100 percent FPL; eligibility phased in from 1990 through 2002.

1990



1993

Texas implements the managed care program STAR, covering acute and primary care services for low-income women and children.²³

Balanced Budget Act of 1997 allows Medicaid to be delivered through managed care organizations; State Children's Health Insurance Program (CHIP) created; states now have option to provide coverage for uninsured children in low-income families above FPL.

1997

Texas begins STAR+PLUS, covering acute care services and community based long-term services and supports (LTSS) for the aged, blind, and disabled Medicaid enrollees.²³

Olmstead decision allows expanded HCBS coverage for persons with disabilities.

1999

1998

1999

Texas begins Star Health, expanding coverage to foster care children, and NorthStar, providing acute and ongoing behavioral health services to adults and children.²³



Texas requires pharmacy services to be carved-in to managed care organization (MCO) contracts and inpatient services to be covered under STAR+PLUS plans.²³

The state authorizes mandatory enrollment of children into a limited benefit plan for dental services.²³

Affordable Care Act (ACA) expands Medicaid eligibility to adults with incomes up to 138 percent FPL.

2010

National Federation of Independent Business v. Sebelius decision makes Medicaid expansion optional for states.

2012

2012

Texas terminates its nonemergency medical transportation (NEMT) waiver and transfers enrollees to the new managed care transportation organization (MTO). The MTO is required to deliver all NEMT services under a full risk model through a capitated rate system.²³

ACA implementation begins.

2014

2014

STAR+PLUS offers acute care services to individuals requiring LTSS.²⁴

32 states and the District of Columbia (DC) have expanded Medicaid since passage of the ACA.

2017

2017

Texas begins transitioning women, ages 18 through 65, from the Medicaid for breast and cervical cancer (MBCC) program into STAR+PLUS.²⁵

