

2019 Interim Charge Recommendations for Texas Children

Texans Care for Children is dedicated to ensuring the health and well-being of Texas children so they are safe, successful, and on a path to fulfill their promise. The following interim charge recommendations highlight strategies Texas leaders can take to improve the health, development, and wellbeing of children in our state.

For additional information or questions, please contact Adriana Kohler, Senior Health Policy Associate at akohler@txchildren; Kate Murphy, Senior Child Welfare Policy Associate at kmurphy@txchildren.org; Josette Saxton, Director of Mental Health Policy at jsaxton@txchildren.org; David Feigen, Early Childhood Policy Associate at dfeigen@txchildren.org; or the Texans Care for Children office at 512-473-2274 or through our website, www.txchildren.org.

House Human Services Committee

Early Childhood

Early Childhood Brain Development

Examine strategies and make recommendations for promoting early childhood brain development in Texas. Assess opportunities to scale up promising practices, achieve longer-term savings, and better leverage family supports, home visiting, and early childhood health initiatives, including using value-based payment models in Medicaid and CHIP to promote infant health, reduce infant mortality, and ensure young children are ready to succeed in school.

Safe & Quality Child Care

- > Evaluate the availability and cost of quality child care for Texas families and make recommendations on how Texas can improve child care affordability and quality, including the role of child care in supporting children's health, safety, brain development, and school readiness. Study the barriers to Texas Rising Star entrance and outline strategies to increase participation in the program.
- Monitor the implementation of bills passed by the 86th Legislature to address child care quality and safety, including SB 568, SB 569, SB 708, and SB 952. Assess how child care providers are being informed

Texans Care for Children is a statewide, non-profit, non-partisan, multi-issue children's policy organization. We drive policy change to improve the lives of Texas children today for a stronger Texas tomorrow. We envision a Texas in which all children grow up to be healthy, safe, successful, and on a path to fulfill their promise.

^{*} This is recommended as a joint charge: House Human Services and House Public Health Committees

about the new regulations and assisted by the Health and Human Services Commission in meeting the implementation guidelines and requirements. Evaluate the agency's capacity, including maintaining an adequate inspections workforce, to enforce standards.

Child and Maternal Health

Kids' Health Coverage

Examine strategies for improving efficiency and reducing red tape in Children's Medicaid processes in order to decrease gaps in coverage for eligible children, avoid related costs to the state and managed care system, and promote quality-based value initiatives in Medicaid managed care. Determine how Texas' high child uninsured rate and drop in Medicaid enrollment and renewals are affecting rural areas and counties, including rural and safety-net hospitals.

Medical Transportation

➤ Monitor the implementation of medical transportation legislation passed by the 86th Legislature, including HB 1576 and HB 25, as well as legislation addressing transportation barriers to health services. Monitor the agencies and programs affected by policy changes to the Medical Transportation Program, review readiness among Medicaid managed care plans and other relevant entities, and examine how transitions in the Medical Transportation Program will impact Medicaid clients, transportation providers, and health providers. The committee will study existing practices that ensure passenger safety, current regional availability and gaps, and opportunities to strengthen innovative, client-centered non-emergency medical transportation models.

Medicaid Managed Care

- Monitor the implementation of legislation passed by the 86th Legislature that made reforms to Medicaid managed care in Texas, including SB 1207, SB 1096, and HB 4533. Identify additional opportunities to improve timely availability of health care, decrease red tape and administrative costs, and improve patient and provider satisfaction. The committee should:
 - Review the status of rulemaking, HHSC contracts with managed care organizations, and federal approval needed to implement changes.
 - Examine how Medicaid managed care reforms affect access to and quality of care for kids, pregnant women and new mothers, and Texans with disabilities in Medicaid.
 - Make recommendations for steps needed to improve access to behavioral and specialty care, strengthen network adequacy, and ways to leverage quality measures and value-based funding strategies to support the health, brain development, and wellbeing of children.
 - Examine options for eliminating red tape that results in the erroneous denial of children's Medicaid coverage, which contributes to higher per-person Medicaid costs and harms the financial viability of rural and safety-net providers across Texas.

- Evaluate opportunities in Medicaid to foster team-based and family-centered care, including rewarding high-quality pediatric care and leveraging community health workers, home visiting, and other family supports to improve child outcomes and achieve savings.
- Identify opportunities for Medicaid managed care organizations, health care providers, and communities to partner to implement non-medical initiatives that will help patients be healthier and more productive at home, school and work while also constraining Medicaid costs.

Health Care Access and Financing

Examine how Texas is preparing for funding changes, such as phase down of the Texas 1115 Healthcare Transformation and Quality Improvement Program Waiver and the end of Texas' Targeted Opioid Response Grant. Evaluate factors contributing to declining health insurance coverage among all Texans, especially among children, and study the impact of the uninsured rate on the state budget, counties, and rural hospitals. Evaluate options to extend Texas' 1115 Transformation Waiver in a way that will enhance health coverage for low-income Texans as a means to promote greater prosperity among families and in a way that will bolster Texas' ongoing efforts to improve health for children and pregnant and postpartum women.

*This is recommended as a joint charge: House Human Services and House Appropriations Committees

Child Welfare

Family First Prevention Services Act

- Monitor the implementation of SB 781 (86R) and SB 351 (86R). Evaluate policy changes and funding required to effectively implement the Family First Prevention Services Act (FFPSA) in Texas by keeping more families safely together and improving the quality of foster homes and facilities. The evaluation should include how the FFPSA and Community Based Care will work together to improve services for children and families in Texas given the new opportunities and restrictions on federal funding for child welfare services. Specifically, the committee should:
 - Recommend the authorizing language needed to implement the FFPSA in Texas;
 - Review the availability and analyze the effectiveness of behavioral health and parent skill building services including but not limited to:
 - Mental health and substance use prevention and treatment services for children;
 - Mental health and substance use prevention and treatment services for parents or other caregivers;
 - Services and supports for pregnant and parenting youth in foster care; and
 - Other prevention programs that reduce child welfare involvement
 - Review foster care capacity that will continue to be federally reimbursable when the FFPSA takes
 effect in Texas in October 2021,
 - Compare minimum standards in Texas to the new federal model licensing standards;

^{*} This is recommended as a joint charge: House Human Services and House Appropriations Committees

- Examine opportunities to reduce the use and elevate the quality of congregate care placements in Texas; and
- Explore other opportunities and challenges related to the FFPSA including, but not limited to, supports for kinship caregivers and supports for older youth and young adults in extended foster care.

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Community Based Care

Monitor the agencies and programs under the Committee's jurisdiction and oversee the implementation of relevant legislation passed by the 86th Legislature. In conducting this oversight, the committee will also continue to closely monitor the implementation of S.B. 11 (85R) and the ongoing rollout of Community Based Care across the state.

M.D. v. Abbott

Monitor DFPS activities related to the lawsuit against the Texas foster care system. Analyze whether legislation or funding is required to help DFPS comply with the injunction. Ensure the required DFPS workload study aimed at determining a safe caseload range allows for comparisons to other states and national best practices.

*This is recommended as a joint charge: House Human Services and House Appropriations Committees

Keeping Families Safely Together

- > Examine ways to support more families in crisis and keep more families safely together including new opportunities presented through the Family First Prevention Services Act or other federal laws or policies. Explore strategies to support the family unit and improve legal representation of and support for parents and children when families become involved with CPS. To better ensure transparency, efficiency, due process, trauma informed approaches, and access to resources for families as they navigate involvement with the child welfare system, analyze ways to improve and streamline:
 - Reporting and intake;
 - Connecting families to community based services like family partner peer support services to prevent children with serious emotional disturbance from needing residential treatment or entering foster care;
 - o The removal process in CPS cases; and
 - Discrepancies in policy and practice in different areas of the state, especially for at-risk populations like pregnant and parenting youth in foster care and cases involving parental substance use.

*This is recommended as a joint charge: House Juvenile Justice and Family Issues Committee and House Human Services Committee

Supporting Older Youth in Foster Care

- Monitor implementation of SB 1758 (85R), HB 53 (86R), HB 475 (86R), HB 1702 (86R), and HB 3390 (86R). Explore strategies to improve services for transition aged youth in foster care, specifically consider barriers or obstacles that:
 - Youth face when trying to secure housing, employment, or internships;
 - Youth face to forming authentic relationships and mentorships;
 - Youth with disabilities face when it comes to participating in Preparation for Adult Living Services;
 - Youth who are pregnant or parenting face in supporting their children;
 - Youth face when enrolling in higher education;
 - Youth face related to understanding their physical or behavioral health needs; and
 - Other challenges related to transition planning and strategies to improve that process particularly for youth living in placements that are not licensed to care for them after they turn 18.

House Public Health Committee

Child and Family Mental Health

- Monitor implementation of the Texas Child Mental Health Care Consortium (SB 11 86R). Identify the types of mental health services supported by the consortium's work, including non-medical and recovery services. Examine the effect of consortium's activities on improving children's access to mental health services. Make recommendations to ensure as many children and adolescents receive services as possible.
- Monitor implementation of HB 3980 (86R) and other state efforts to reduce deaths by suicide among Texans, particularly Texas youth. Examine community-based suicide prevention efforts that use multi-sector collaborations to reach individuals not served by public systems who are at risk for suicide. Identify opportunities to improve interagency data collection and sharing related to suicide; to expand the use of effective suicide prevention and intervention practices at state and local levels; and other strategies to reduce the number of deaths by suicide in Texas.

Early Childhood

Examine strategies and make recommendations for promoting early childhood brain development in Texas. Assess opportunities to scale up promising practices, achieve longer-term savings, and better leverage family supports, home visiting, and early childhood health initiatives, including using value-based payment models in Medicaid and CHIP to promote infant health, reduce infant mortality, and ensure young children are ready to succeed in school.

* This is recommended as a joint charge: House Public Health and House Human Services Committees

Child and Maternal Health

- ➤ Monitor the implementation of legislation passed by the 86th Legislature to improve the health of mothers and babies, including SB 750, SB 748, SB 749, SB 436, and SB 2132, and relevant budget riders (including Rider 28 and Rider 64). In conducting this oversight, review investments aimed at fighting maternal mortality, improving infant health and early childhood brain development, and addressing primary, behavioral, and specialty care for women.
 - *This is recommended as a joint charge: House Public Health and House Appropriations Committees
- ➤ Review how Texas is best preparing for federal changes that impact health, including the Family First Prevention Services Act, which authorizes federal funding for behavioral health, the next phase of the 1115 Healthcare Transformation and Quality Improvement Program Waiver, the Texas Targeted Opioid Response Grant, and the Healthy Texas Women Section 1115 Demonstration Waiver.
 - *This is recommended as a joint charge: House Public Health and House Appropriations Committees

House Public Education Committee

Children's Mental Health

- Monitor the implementation of SB 11, HB 18, and HB 19 as they relate to assisting districts in addressing student mental health. The committee should specifically examine:
 - The use of School Safety Allotment funding by districts to support activities that related to student mental health and creating positive school climates (including staff training in trauma-informed practices, suicide prevention, and hiring or contracting with mental health professionals to provide school-based services) relative to district expenditures to support physical security, school or police officers, and emergency planning and response activities. Identify recurring expenses (e.g., personnel costs for school-based mental health professionals) versus those likely to be one-time or infrequent (e.g., replacing locks) to apprise future legislatures of expected costs to sustain student behavioral health services.
 - District use of research-based practices in developing safe and supportive school programs using multi-tiered support systems.
 - The determination of assessments that are conducted by threat assessment teams and the types of interventions provided to students receiving an assessment

The committee should also evaluate and make recommendations related to the capacity of the Texas Education Agency and other state entities to provide adequate levels of training, technical assistance, and guidance to districts and school personnel in supporting the effective implementation of student mental health and school safety legislation passed by the 86th Texas Legislature.

Examine school district policies and practices related to substance use among students, including prevention and intervention and disciplinary actions. Analyze the way that district responses to student substance use affect academic outcomes. Identify opportunities to align school discipline policies and practices with planning and procedures related to school-based substance use prevention and intervention as required by SB 11 and HB 18.

Child Health

Explore the relationship between school performance and child health insurance and identify ways to eliminate barriers to more Texas children gaining health insurance, including removal of red tape that results in children on Medicaid unnecessarily losing coverage.

Early Childhood

- Monitor and analyze the implementation of high-quality, full-day pre-k funding in HB 3 including:
 - Impact on child care providers, including potential expansion of partnerships between child care providers and school districts
 - Evaluating the Texas Education Agency's allocation of waivers of the full-day pre-k requirement
 - How districts are allocating funding through the Early Education Allotment
 - How districts are meeting the required high-quality pre-k components, including the recommendation to maintain an 11:1 student-teacher ratio
 - How districts are implementing new K-3 reading standards and literacy plans.
 - How districts are expanding pre-k enrollment of eligible three-year olds
- Examine the disciplinary policies of Texas school districts, including suspensions and expulsions of children in early grades, including the suspension and expulsion of children in special education and foster care. Monitor and assess the Texas Education Agency's role and authority to intervene with districts who are violating Texas statute prohibiting out-of school suspension in pre-k through 2nd grade, as well as districts with exceptionally high rates of in-school suspensions for students in pre-k and other early grades. Evaluate the current strategies districts are using to improve challenging behaviors, including social emotional learning, PBIS, and restorative justice.

House Appropriations Committee

Early Childhood

Examine state investments in the health and brain development of babies and toddlers, including Early Childhood Intervention and other early childhood programs for children in the first three years. Evaluate opportunities to boost child outcomes and achieve longer term savings through innovative funding strategies and enhanced linkages between Medicaid and CHIP managed care organizations, health providers, home visiting programs, Head Start, and early childhood education programs.

Maternal and Child Health

Healthy Mothers and Babies

- Monitor the implementation of legislation passed by the 86th Legislature to improve the health of mothers and babies, including SB 750, SB 748, SB 749, SB 436, and SB 2132, and relevant budget riders (including Riders 28 and 64). In conducting this oversight, review state investments aimed at fighting maternal mortality, improving infant health and early childhood brain development, and addressing primary, behavioral, and specialty care for women.
 - *This is recommended as a joint charge: House Public Health and House Appropriations Committees
- ➤ Review how Texas is best preparing for federal changes that impact health, including: the Family First Prevention Services Act, which authorizes federal funding for behavioral health; the next phase of the 1115 Healthcare Transformation and Quality Improvement Program Waiver; Texas' Targeted Opioid Response Grant; and the Healthy Texas Women Section 1115 Demonstration Waiver.

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Health Care Access and Financing

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Medicaid Managed Care

- Monitor the implementation of legislation passed by the 86th Legislature that made reforms to Medicaid managed care in Texas, including SB 1207, SB 1096, and HB 4533. Identify additional opportunities to improve timely availability of health care, decrease red tape and administrative costs, and improve patient and provider satisfaction. The committee should:
 - Review the status of rulemaking, HHSC contracts with managed care organizations, and federal approval needed to implement changes.
 - Examine how Medicaid managed care reforms affect access to and quality of care for kids, pregnant women and new mothers, and Texans with disabilities in Medicaid.

- Make recommendations for steps needed to improve access to behavioral and specialty care, strengthen network adequacy, and ways to leverage quality measures and value-based funding strategies to support the health, brain development, and wellbeing of children.
- Examine options for eliminating red tape that results in the erroneous denial of children's Medicaid coverage, which contributes to higher per-person Medicaid costs and harms the financial viability of rural and safety-net providers across Texas.
- Evaluate opportunities in Medicaid to foster team-based and family-centered care, including rewarding high-quality pediatric care and leveraging community health workers, home visiting, and other family supports to improve child outcomes and achieve savings.
- Identify opportunities for Medicaid managed care organizations, health care providers, and communities to partner to implement non-medical initiatives that will help patients be healthier and more productive at home, school and work while also constraining Medicaid costs.

Child Welfare

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 - Recommend the authorizing language needed to implement the FFPSA in Texas;
 - Develop definitions needed to implement the FFPSA in Texas;
 - Review the availability and analyze the effectiveness of behavioral health and parent skill building services including but not limited to:
 - Mental health and substance use prevention and treatment services for children,
 - Mental health and substance use prevention and treatment services for parents or other caregivers,
 - Services and supports for pregnant and parenting youth in foster care; and
 - Other prevention programs that reduce child welfare involvement.
 - Review foster care capacity that will continue to be federally reimbursable when the FFPSA takes effect in Texas in October 2021,
 - Compare minimum standards in Texas to the new federal model licensing standards;
 - Examine opportunities to reduce the use and elevate the quality of congregate care placements in Texas; and

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• Explore other opportunities and challenges related to the FFPSA including, but not limited to, supports for kinship caregivers and supports for older transition-aged youth and young adults in extended foster care.

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M.D. v. Abbott

Monitor DFPS activities related to the lawsuit against the Texas foster care system. Analyze whether legislation or funding is required to help DFPS comply with the injunction. Ensure the required DFPS workload study aimed at determining a safe caseload range allows for comparisons to other states and national best practices.

*This is recommended as a joint charge: House Human Services and House Appropriations Committees

House County Affairs Committee

Child Health

Examine how Texas is preparing for funding changes, such as phase down of the Texas 1115 Healthcare Transformation and Quality Improvement Program Waiver, including incorporating delivery system reform efforts without Delivery System Reform Incentive Program (DSRIP) funding. Evaluate factors contributing to declining health insurance coverage among all Texans, particularly among children, and study the impact of the uninsured rate on Texas counties, the state budget, and rural hospitals. Examine strategies for improving efficiency and reducing red tape in Children's Medicaid processes in order to decrease gaps in coverage for eligible children and reduce uncompensated health care costs borne by Texas counties.

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House International Relations and Economic Development Committee

Early Childhood

Evaluate the availability and cost of quality child care for Texas families and make recommendations on how Texas can improve child care affordability and quality, including the role of child care in supporting children's health, safety, brain development, and school readiness. Study the barriers to Texas Rising Star entrance and outline strategies to increase participation in the program.

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House Juvenile Justice and Family Issues Committee

Child Welfare

Keeping Families Safely Together

- > Examine ways to support more families in crisis and keep more families safely together including new opportunities presented through the Family First Prevention Services Act or other federal laws or policies. Explore strategies to support the family unit and improve legal representation of and support for parents and children when families become involved with CPS. To better ensure transparency, efficiency, due process, trauma informed approaches, and access to resources for families as they navigate involvement with the child welfare system, analyze ways to improve and streamline:
 - Reporting and intake;
 - Connecting families to community based services like Explore the reporting, investigations, and removal process in CPS cases as well as reasons for removal or discrepancies in policy and practice in different areas of the state. Explore strategies to support the family unit and improve legal representation of and support for parents and children when families become involved with CPS. Examine opportunities to provide families caring for children with serious emotional disturbance with family partner peer support services to prevent children with serious emotional disturbance from needing residential treatment or entering foster care;
 - The removal process in CPS cases; and
 - Discrepancies in policy and practice in different areas of the state, especially for at-risk populations like pregnant and parenting youth in foster care and cases involving parental substance use.

Juvenile Justice

Closing Facilities

> Evaluate how to shift from using the existing five state secure facilities to smaller settings closer to home, and how to repurpose the existing facilities.

Raise the Lower Age

Examine the current Texas juvenile justice system policies and practices regarding 10,11, and 12 year-olds and review the effect of raising the lower age of juvenile court jurisdiction from 10 to 12 or 13. Identify best practices in other states relating to juvenile age. Review any gaps in services for this population and make recommendations to reduce future or ongoing justice system involvement for this population.

Fines and Fees

> Evaluate the impacts, collateral consequences, and public safety of fines and fees on youth and families imposed in the juvenile justice system and separately through Class C misdemeanors.

^{*}This is recommended as a joint charge: House Juvenile Justice and Family Issues Committee and House Human Services Committee.

You

ıth	Experiencing Homelessness
>	Evaluate how the state could increase homeless liaison capacity along with the outcomes of increasing this capacity (e.g. identifying students experiencing homelessness and connecting them with services) and evaluate gaps in support from the state to youth (young people under 25) experiencing homelessness as defined under McKinney-Vento and identify solutions to help improve outcomes for this population.