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TexCare: Bringing peace of mind to Texas parents

It's billed as a landmark cooperative venture between the public and private sectors. Its goal is to match families with uninsured children in the Lone Star State to a health insurance plan at rates that families can afford. It is known as the *TexCare Partnership* and it is driven by the desire to find children's health insurance with rates that are based on the family's income and ability to pay.

Under the *TexCare Partnership* initiative, three separate health insurance plans are now available:

- ◆ Children's Health Insurance Program (CHIP),

- ◆ Medicaid,
- ◆ Texas Healthy Kids Corporation (THKC).

In order to raise public awareness of these new children's health insurance plans, a campaign including community outreach, advertising and administration has been launched. Utilizing community-based organizations (CBOs), the campaign will reach out to families of uninsured children, provide health insurance application assistance, publicize the availability of health insurance throughout the various communities, educate families on the importance



One man, one mission: The story of Bob Deavenport

He's a retired Martin County judge. In his early 70s, he is anything but idle. In fact, to some folks in Martin, Glasscock and Borden Counties, Bob Deavenport is truly a modern-day hero. He is a man of action and duty. Without much attention and fanfare, he has demonstrated an uncommon commitment to helping young kids get much-needed health insurance.

Bob personally visits the homes of countless families with uninsured children and personally helps them fill out necessary

application forms and mails them in. Not one to take anything for granted, this local icon even follows up with calls to the TexCare Partnership Hotline to check on the application and track its status. Described as a "simply amazing human being," Deavenport is particularly well known in Martin County where 51 kids are already enrolled in CHIP (Children's Health Insurance Program). Martin County has one of the highest percentages of uninsured kids already signed up

for CHIP or referred to Medicaid. All told, of the nearly 330 uninsured kids in Martin County, more than 166 children are already involved in the TexCare Partnership system just after three months of aggressive outreach conducted by one man: Judge Deavenport. Time and time again, this true public servant has demonstrated that hard work and perseverance can pay off and, because of this commitment, the future for children of three Texas counties looks much brighter! ■

of acquiring health insurance and ultimately, reducing the number of uninsured children in Texas.

Another critical component of this campaign will center on the availability of a call center where operators will field questions and make over-the-phone applications possible for families whose children lack health insurance. By calling toll-free 1-800-647-6558, interested persons can apply for the insurance or get the name of someone in their local community who can provide them with face-to-face assistance. To download an application, individuals can visit the *TexCare* Partnership website at: www.texcarepartnership.com.

Here are some highlights of this initiative as of July 17, 2000:

- ◆ CHIP rolled out on May 1
- ◆ Since April 3, when applications started being submitted:

Nearly 47,000 previously uninsured kids with health insurance coverage. Some 55,000 CHIP enrolled kids expected as of August 1. Applications and application requests for more than 300,000 children. Eligibility assessed for nearly 78,000 children. More than 7,800 referred to Texas Healthy Kids Corporation. More than 19,000 referred to Medicaid. "It is important to remember that all TexCare Partnership plans offer comprehensive health care coverage, including regular checkups, immunizations, prescription drugs, eyeglasses, lab tests, X-rays, hospital visits, dental and mental health care from a broad choice of doctors. Of equal importance, families should realize that children

enrolled in Medicaid pay nothing. Families with children in CHIP can pay as little as \$15 a year with small co-payments to \$18 a month with higher co-payments. Costs for the THKC coverage vary by the county in which the person lives, but are generally at costs below market rates," notes Health and Human Services Commissioner Don Gilbert. He adds that the "real value of this initiative is that every family in Texas, regardless of economic condition, will finally have access to affordable health insurance for all children."

Through the TexCare Partnership we are one step closer to bringing a genuine peace of mind to most parents in Texas who will now be able to afford health insurance. In doing so, we have come one step closer to protecting our greatest resource: Texas' children. ■

"Golden Bootie" goes to Gilbert



(l.-r.) Bryan Sperry, Don Gilbert & George Farr

Texas Health and Human Services Commissioner Don A. Gilbert was honored recently by the Children's Hospital Association of Texas (CHAT) for his leadership role in involving families and child health advocates in the implementation process of the Children's Health Insurance Program (CHIP). In presenting Commissioner Gilbert with the "Golden Bootie Award," CHAT

President Bryan Sperry noted that HHSC staff, under Gilbert's leadership, "maintained an open implementation development process for CHIP despite a heavy implementation workload." The award was presented at the CHAT 2000 Joint Trustees Forum held recently in Austin. Pictured above (l.-r.) are Sperry, Commissioner Gilbert and CHAT Board Chair George Farr. ■

HHSC has been realigned to reflect five major operational functions...

New faces in new places at HHSC

As a result of House Bill 2641 (76th Texas Legislature), the Health and Human Services Commission (HHSC) has been realigning its organizational structure. The new framework will accommodate the many changes which resulted from the Sunset review process.

HHSC has been realigned to reflect five major operational functions: Medicaid Policy and Administration, Fiscal Policy,

Planning & Evaluation, Systems Operations and Office of Investigations & Enforcement. HHSC welcomes new staff members: Mary Beth O'Hanlon, Associate Commissioner of Systems Operations; Pat Devin, Associate Commissioner of Planning & Evaluation; and David Luna, Special Assistant on Border Affairs. HHSC has added new staff for its federal funds management team. ■



C O L O N I A S

collaborating health care at *colonias*

Generally described as unincorporated communities burdened by the lack of physical infrastructures such as running water, storm drainage, sewers and paved streets, “COLONIAS” are home to an estimated 500,000 Texans today. They are Texans with a profound sense of family, history and cultural pride. They are driven by an untiring commitment and desire to enhance the quality of their lives and those of their children. Numbering nearly 1,450 along the Texas/Mexico border, these areas have become a geographic, social and economic state of isolation for innocent children, women and men. They are truly a sad reminder of the debilitating effects of poverty, lack of education and social isolation. The *colonias* have a high incidence of diarrheal diseases amongst their children, the constant threat of hepatitis caused by pit privies that contaminate shallow wells and the daily difficulty of living without water.

It comes as no surprise that *colonias* are experiencing a high population growth. With this growth comes an increased demand for a far-reaching array of health and

human services, employment, job training and development and educational opportunities.

Over the years, countless initiatives have been launched to address the ills of life in Texas’ *colonias*. It has become readily apparent that within the scope of Texas state government, there are a number of well-designed programs targeting *colonias* and their residents. Efforts such as the *Colonias* Program administered through the Texas A&M University School of Architecture’s Center for Housing and Urban Development have proven to be extremely effective in combating isolation among impoverished residents. The program has also helped *colonia* residents gain the knowledge and resources to better understand their conditions and identify possible solutions to their problems.

More recently, the Texas Health and Human Services Commission (HHSC), in keeping with its strategic priorities of enhancing the conditions that support good health and self sufficiency in South Texas *colonias*, has launched a new initiative that will better coordinate the delivery of services to *colonias* by health and human services agencies in Texas. Under the guidance of newly appointed Special Assistant for Border Affairs David Luna, HHSC hopes to identify ways of providing *colonia* residents with better access to state-funded programs.

At a recent meeting in Laredo, Luna had an opportunity to meet with Laredo area service providers and lay out some preliminary plans for maximizing the efforts delivered by various state agencies on behalf of *colonia* residents. Since his

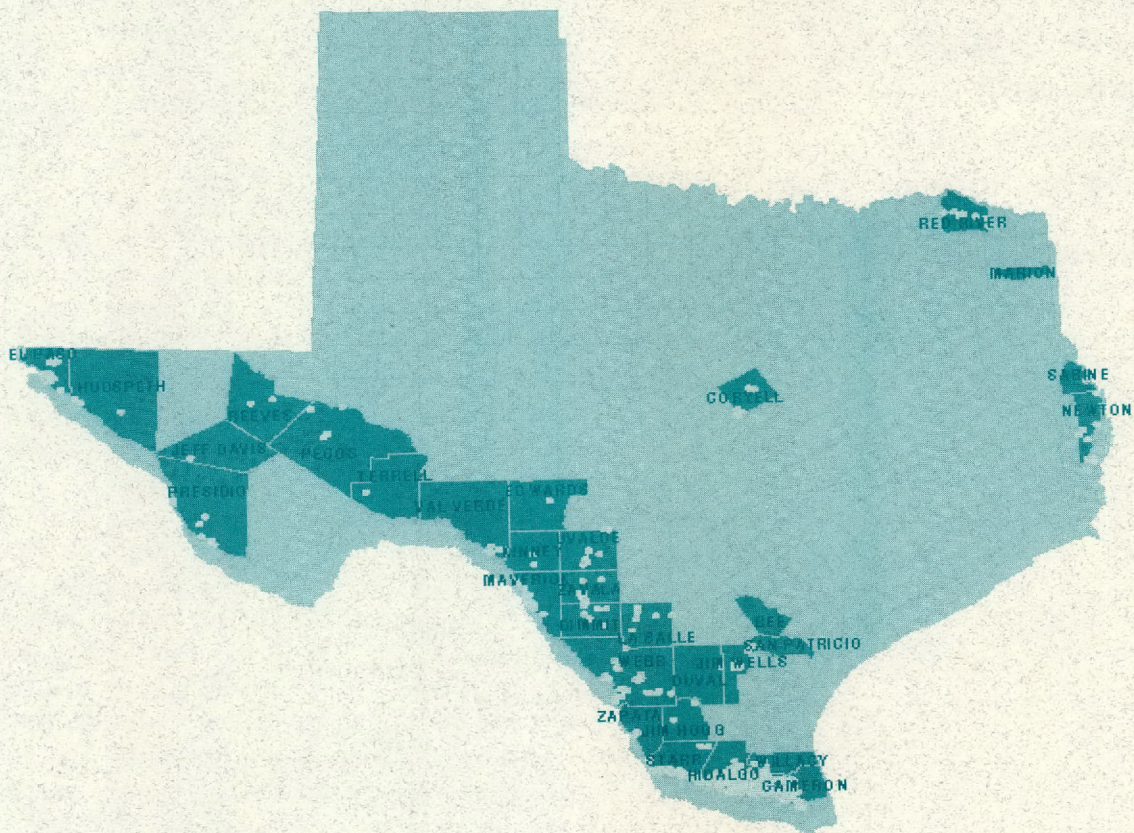
appointment to this position, Luna has had the opportunity to also travel to South Texas and visit *colonias* and service providers. “The key point is to develop a game plan and set up some timeframes that will enable us to develop a blueprint for our coordinated efforts,” notes Luna. He adds that “we want the health and human services enterprise to work more effectively and communicate more efficiently and thus avoid duplication of services as we strive to provide services for these residents.”

“When it comes to addressing the needs of Texas citizens who reside in *colonias*, there are no easy answers,” points our HHSC Commissioner Don A. Gilbert. He adds that “our primary goal with this new initiative is to maximize the State’s resources in a way that will provide these citizens with the most needed services. The plight of *colonia* residents is well chronicled and a number of state agencies have been delivering critical services over the years. Our focus on collaboration will help ensure that

we work together in a manner that reflects the best possible delivery of services to a population that truly deserves the very best and urgent attention we can possibly offer,” says Gilbert.

HHSC is working in collaboration with the *Colonias* Program at Texas A&M University. It is designed to assist residents of low-income settlements or *colonias* to improve the quality of their lives.

For more information on this initiative, please contact David Luna in Harlingen at 956/444-3256. ■



HHSC is directed to pursue opportunities for improvements to the current system of services and supports for Texans with disabilities within its statutory authority.

Board studies community options

“Understanding the wide array of health and human services for people with disabilities in Texas is an important step to identifying and creating new and innovative ways of meeting the needs of these citizens. We are truly at a defining moment in developing the most comprehensive system of service provision in the history of our state.” With these words, Health and Human Services

Commissioner Don A. Gilbert opened the initial meeting of the Promoting Independence Advisory Board in February of this year.

Pursuant to the issuance of Executive Order GWB 99-2 by Governor George W. Bush in September 1999, HHSC was directed to enlist the participation of families, consumers, advocates, providers and relevant agency representatives in a comprehensive review of all services and support systems available to people with disabilities. The review will analyze the availability, application and efficacy of existing community-based alternatives for people with disabilities. It will focus on identifying affected populations, improving the flow of information about supports in the community and removing barriers that impede opportunities for community placement.

One of the responsibilities of the panel is to craft a report for the Governor, the Lieutenant Governor and the Speaker of the House by no later than January 9, 2001 that

details the results of the comprehensive review and includes specific recommendations on how Texas can improve its community-based programs by legislative and administrative action. HHSC is directed to pursue opportunities for improvements to the current system of services and supports for Texans with disabilities within its statutory authority.

A critical element of the comprehensive review centers on a plan of action known as the Promoting Independence Initiative. It is intended to assure that the state moves deliberately and decisively toward a system of services and supports that fosters independence and productivity and provides meaningful opportunities for Texans with disabilities to live in their home communities. Central to this blueprint is the recognition of the importance of a continuum of care and the role of client and family choice in the system of services and supports for Texans with disabilities.

Members of the Board include: Patty Anderson, Chair, Austin; Judith Benton, Austin; Candace Carter, Austin; Dick O’Conner, Dallas; Judy Allen, Longview; Colleen Horton, Austin; Bob Kafka, Austin; Lee Bowers, San Antonio; Kathy Griffith, San Antonio; Joan Redden, Wimberly; David Herndon, Austin and Charles Cooper, Austin. For information call Becky Medina at 512/424-6509. ■

Campaign targets transportation scam

The scenario follows a typical pattern: someone offers something for nothing. In this case, the "something" is free transportation for children who receive medical services that are often not needed.

The purpose of this scam is to offer children and/or their parents transportation for medical services that are often unneeded or never provided. Sometimes, the offer includes financial incentives, like school supply vouchers, meals, or even money. Occasionally, the person offering the inducement pretends to be a Medicaid representative in an effort to dupe a parent into giving permission for their children to be transported to a Medicaid provider who may be unscrupulous or committing fraud against the Medicaid

program. Some of these scam artists have even told parents their Medicaid eligibility will be terminated if they do not allow their children to be transported to a service provider.

The Office of Investigations and Enforcement (OIE) at the Texas Health and Human Services Commission (HHSC) investigates these cases carefully. HHSC has reviewed reports of small children being transported long distances and kept away from their homes for 8-10 hours. In one unfortunate case, a small child was left unattended in a van overnight.

HHSC has started to alert parents and Medicaid recipients of these dangerous scams by including an informational insert in the June Medicaid card mailing. The insert warns

Medicaid clients not to allow their children to travel with anyone who offers free transportation for Medicaid services and never to give permission for their child to travel with unknown persons.

The mail-out information also advises clients on how to obtain transportation for their children or themselves. A toll-free number, 1-877-633-8747 is included in the mail-out.

We seek your cooperation to stop these practices. If your clients need transportation, direct them to the toll-free number in the mail-out. If you have knowledge of any such scheme, contact OIE at 1-888-752-4888 and leave a message. Or, Tracy Mosher, Investigator, 512/490-0421; Larry Block, Investigator, 512/490-0563. ■

Wertz appointed to NHCPI advisory committee

Linda Wertz, State Medicaid Director at the Texas Health and Human Services Commission has been appointed to serve on the National Health Care Purchasing Institute's (NHCPI) National Advisory Committee. The NHCPI is a five-year initiative of The Robert Wood Johnson Foundation. Kevin B. Piper, director of the Institute, said that the 20-member committee will serve to guide the Institute and its mission — to advance the capabilities of the

nation's public and leading private sector health care purchasers.

"The Institute's objective is to help purchasers leverage their buying power to improve access to and quality of care," Piper says. "The committee's work will be critical to achieving that objective."

Bruce E. Bradley, director of Managed Care Plans for General Motors' Health Care Initiatives and committee member, notes that the role of purchasers is to "move

the needle," to build improvement into contracts. "That's why the Institute is so important," Bradley says. "By having public and private purchasers working together, we can have impact."

The National Health Care Purchasing Institute is operated through the Washington, D.C.-based Academy for Health Services Research and Health Policy. For more information call Donna-Renee Arrington, 202/292-6700. ■

Medicaid fraud training to go on-line

Working in conjunction with the Quality Institute at Southwest Texas State University, the Texas Health and Human Services Commission's Office of Investigations and Enforcement is working on the development of distance learning training programs. These innovative programs will be made available to staff of the Long Term Care Facilities that participate in the Medicaid program and for home health agencies that participate in the Community Based Alternative program. Besides the many seminars held statewide, training in Identifying and Preventing Fraud and Abuse in Medicaid and the Texas Index of Level of Effort (TILE) Assessment will be offered as correspondence courses and in computer-based, on-line formats.

Charged with the responsibility of delivering training designed to

reduce Medicaid fraud and also support the training of the TILE Assessment for the staff of the Long Term Care Facilities and Community Based Alternative Care Facilities, HHSC has taken a focused look at the need to offer training opportunities through a wide array of approaches. Additionally, legislative mandates for fraud training along with the frequent turnover of staff members in long term care and home health agencies, place an increased dimension on the need for training.

The contract with SWT calls for the correspondence courses to be available as of July 1, 2000, and for the computer-based courses to be on line as of September 1, 2000. HHSC will provide the mailing address for the correspondence courses prior to the date of onset. Access to the computer-based

courses will be via the HHSC Web Page with a direct link to SWT.

Content of both distance-learning courses will be adapted from current Medicaid Fraud Prevention Training and T.I.L.E. training material. Updates will be made as necessary. As in the seminar structured training, a test will accompany the T.I.L.E. training module and a score of at least 70% correct answers will be required to pass the test. The test will be recorded as Pass/Fail. HHSC will inform participants of pass/fail status within seven working days of course completion. A *Certification of Completion* of the training course will be issued by HHSC when all requirements are met. 2.0 hours of Continuing Education credits will continue to be available for \$20 from SWT for the fraud prevention portion of the training. ■



Helping people help themselves

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Don A. Gilbert, Commissioner

The Service Connection informs consumers, advocates, health and human services agencies and service providers about agency goals and initiatives. HHSC accepts complaints on its functions and on the 11 health and human services agencies. Send complaints or comments to HHSC at P.O. Box 13247, Austin, Texas 78711 or call 512/424-6500 (Voice) or 512/424-6597 (TDD). To obtain this newsletter in alternate format, call or write the Commission.

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