

6.F.a. ADVISORY COMMITTEE SUPPORTING SCHEDULE ~ PART A

82nd Regular Session, Agency Submission, Version 1
Automated Budget and Evaluation System of Texas (ABEST)

Date: 8/20/2010
Time: 4:35:20PM

Agency Code: **529** Agency: **Health and Human Services Commission**

MEDICAL CARE ADVISORY COMMITTEE

Statutory Authorization: V.C.T.A. Human Resources Code §32.022
 Number of Members: 15
 Committee Status: Ongoing
 Date Created: 03/01/1966
 Date to Be Abolished: N/A
 Strategy (Strategies): 2-1-1 MEDICARE AND SSI

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$16,624 | \$11,000 | \$12,000 | \$12,000 | \$12,000 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 9,650 | 9,650 | 9,650 | 9,650 | 9,650 |
| Other Operating | 675 | 495 | 585 | 495 | 585 |
| Total, Committee Expenditures | \$26,949 | \$21,145 | \$22,235 | \$22,145 | \$22,235 |
| Method of Financing | | | | | |
| Federal Funds | \$13,474 | \$10,572 | \$11,117 | \$11,072 | \$11,117 |
| GR Match For Medicaid | 13,475 | 10,573 | 11,118 | 11,073 | 11,118 |
| Total, Method of Financing | \$26,949 | \$21,145 | \$22,235 | \$22,145 | \$22,235 |
| Meetings Per Fiscal Year | 6 | 4 | 5 | 4 | 5 |

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Description and Justification for Continuation/Consequences of Abolishing

The Medical Care Advisory Committee (MCAC) is comprised of 15 members and is required by federal law. The Committee advises the State Medicaid Director about the Medicaid program. The Committee also studies and makes recommendations concerning health and medical assistance issues and policies, the scope and utilization of services, payment methodology, quality of services, program changes and cost containment.

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GUARDIANSHIP ADVISORY BOARD

Statutory Authorization: TX Government Code Sec. 531D
 Number of Members: 15
 Committee Status: Ongoing
 Date Created: 12/01/1997
 Date to Be Abolished: N/A
 Strategy (Strategies): 1-1-1 ENTERPRISE OVERSIGHT & POLICY

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$3,475 | \$8,753 | \$7,775 | \$8,775 | \$9,775 |
| Other Operating | 1,100 | 1,000 | 1,500 | 1,800 | 2,000 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 111,494 | 178,364 | 91,500 | 93,500 | 95,500 |
| Other Operating | 0 | 0 | 6,000 | 7,000 | 8,000 |
| Total, Committee Expenditures | \$116,069 | \$188,117 | \$106,775 | \$111,075 | \$115,275 |
| Method of Financing | | | | | |
| General Revenue Fund | \$116,069 | \$188,117 | \$106,775 | \$111,075 | \$115,275 |
| Total, Method of Financing | \$116,069 | \$188,117 | \$106,775 | \$111,075 | \$115,275 |
| Meetings Per Fiscal Year | 6 | 6 | 6 | 6 | 6 |

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Description and Justification for Continuation/Consequences of Abolishing

The legislature established the HHSC 15 member Guardianship Advisory Board in 1997 to advise HHSC in the following activities: 1) To develop, and subject to appropriations, implement a statewide guardianship program to ensure that incapacitated individuals in Texas who need guardianship or less restrictive assistance receive the needed assistance; and 2) To provide grants to foster the establishment and growth of local guardianship programs, local legal guardianship programs, and local money management program for incapacitated individuals without family, friends or funds.

The 80th Legislature increased the number of DFPS-Adult Protective Services and DFPS-Child Protective Services investigators which has significantly increased the number of referrals to local guardianship programs for guardianship related support services. Also, federal investigations of state schools resulting in a need for a large increase in the number of guardians for state school residents from local programs. In addition there has been a large increase in the number of referrals from local county Probate Courts to the local guardianship programs as a result of more public awareness of Section 683, Probate Code, concerning the initiation of Court Initiated Guardianships for incapacitated individuals in local communities.

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HOSPITAL PAYMENT ADVISORY COMMITTEE

Statutory Authorization: V.C.T.A. Human Resources Code Sec 32.022
 Number of Members: 10
 Committee Status: Ongoing
 Date Created: 06/01/1989
 Date to Be Abolished: N/A
 Strategy (Strategies): 2-1-1 MEDICARE AND SSI

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$398 | \$1,367 | \$1,400 | \$1,800 | \$1,800 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 4,136 | 4,136 | 4,136 | 4,136 | 4,136 |
| Other Operating | 375 | 309 | 375 | 309 | 375 |
| Total, Committee Expenditures | \$4,909 | \$5,812 | \$5,911 | \$6,245 | \$6,311 |
| Method of Financing | | | | | |
| Federal Funds | \$2,454 | \$2,906 | \$2,955 | \$3,122 | \$3,155 |
| GR Match For Medicaid | 2,455 | 2,906 | 2,956 | 3,123 | 3,156 |
| Total, Method of Financing | \$4,909 | \$5,812 | \$5,911 | \$6,245 | \$6,311 |
| Meetings Per Fiscal Year | 5 | 4 | 5 | 4 | 5 |

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Description and Justification for Continuation/Consequences of Abolishing

The Hospital Payment Advisory Committee is comprised of ten members. The Committee advises the State Medicaid Director in developing and maintaining the inpatient hospital rate setting methodology. The Committee advises the State Medical Director on necessary changes in hospital payment methodologies for inpatient hospital prospective payments and on adjustments for disproportionate share hospitals.

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PHARMACY AND THERAPEUTICS (P&T)

Statutory Authorization: House Bill 2292, 78 Leg Session, RS
 Number of Members: 11
 Committee Status: Ongoing
 Date Created: 11/01/2003
 Date to Be Abolished: N/A
 Strategy (Strategies): 2-1-1 MEDICARE AND SSI

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$6,447 | \$8,400 | \$12,000 | \$12,000 | \$12,000 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 19,800 | 19,800 | 19,800 | 19,800 | 19,800 |
| Total, Committee Expenditures | \$26,247 | \$28,200 | \$31,800 | \$31,800 | \$31,800 |
| Method of Financing | | | | | |
| Federal Funds | \$13,123 | \$14,100 | \$15,900 | \$15,900 | \$15,900 |
| GR Match For Medicaid | 13,124 | 14,100 | 15,900 | 15,900 | 15,900 |
| Total, Method of Financing | \$26,247 | \$28,200 | \$31,800 | \$31,800 | \$31,800 |
| Meetings Per Fiscal Year | 5 | 5 | 5 | 5 | 5 |

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Description and Justification for Continuation/Consequences of Abolishing

The Pharmacy and Therapeutics Committee is comprised of six physicians and five pharmacists. The Committee is responsible for reviewing drug products and recommending drugs for the Vendor Drug Preferred Drug List (PDL). Criteria for the review process includes drug safety, clinical efficacy, and cost-effectiveness. All drug classes are required to be reviewed annually.

The committee meets at least 4 times per year but may meet more often if required.

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DRUG USE REVIEW (DUR) BOARD

Statutory Authorization: Omnibus Budg Reconciliation Act of 1990
 Number of Members: 10
 Committee Status: Ongoing
 Date Created: 11/01/1992
 Date to Be Abolished: N/A
 Strategy (Strategies): 2-1-1 MEDICARE AND SSI

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$3,985 | \$5,677 | \$10,000 | \$10,000 | \$10,000 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 16,000 | 16,000 | 16,000 | 16,000 | 16,000 |
| Total, Committee Expenditures | \$19,985 | \$21,677 | \$26,000 | \$26,000 | \$26,000 |
| Method of Financing | | | | | |
| Federal Funds | \$9,992 | \$10,839 | \$13,000 | \$13,000 | \$13,000 |
| GR Match For Medicaid | 9,993 | 10,838 | 13,000 | 13,000 | 13,000 |
| Total, Method of Financing | \$19,985 | \$21,677 | \$26,000 | \$26,000 | \$26,000 |
| Meetings Per Fiscal Year | 4 | 4 | 4 | 4 | 4 |

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Description and Justification for Continuation/Consequences of Abolishing

The Drug Use Review Board is comprised of five physicians and five pharmacists and is required by federal law. The Board works with the Vendor Drug program to implement the Drug Use Review process to ensure outpatient drugs are appropriate, medically necessary, and not likely to result in adverse events. The Board approves both retrospective and prospective drug use review criteria. The Board is also responsible for approving and initiating interventions targeted at physicians or pharmacists to improve the quality of pharmaceutical therapy. The Board reviews and approves prior authorization criteria for the preferred drug list.

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PHYSICIAN PAYMENT ADVISORY COMMITTEE

Statutory Authorization: Government Code, Chapter 531, Subchapter
 Number of Members: 19
 Committee Status: Ongoing
 Date Created: 09/01/1999
 Date to Be Abolished: N/A
 Strategy (Strategies): 2-1-1 MEDICARE AND SSI

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|---|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Travel | \$0 | \$2,734 | \$5,000 | \$5,000 | \$5,000 |
| Other Expenditures in Support of Committee Activities | | | | | |
| Personnel | 1,379 | 1,379 | 1,379 | 1,379 | 1,379 |
| Total, Committee Expenditures | \$1,379 | \$4,113 | \$6,379 | \$6,379 | \$6,379 |
| Method of Financing | | | | | |
| Federal Funds | \$690 | \$2,056 | \$3,189 | \$3,189 | \$3,189 |
| GR Match For Medicaid | 689 | 2,057 | 3,190 | 3,190 | 3,190 |
| Total, Method of Financing | \$1,379 | \$4,113 | \$6,379 | \$6,379 | \$6,379 |
| Meetings Per Fiscal Year | 2 | 2 | 2 | 2 | 2 |

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Description and Justification for Continuation/Consequences of Abolishing

The Physician Payment Advisory Committee is comprised of 19 members. The Committee advises the State Medicaid Director in developing and maintaining the physician services rate setting methodology. The Committee advises the State Medical Director on necessary changes in physician payment methodologies.

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HEALTH DISPARITIES TASK FORCE

Statutory Authorization: Texas Health And Safety Code §107
 Number of Members: 9
 Committee Status: Ongoing
 Date Created: 11/01/2001
 Date to Be Abolished: N/A
 Strategy (Strategies): 1-1-1 ENTERPRISE OVERSIGHT & POLICY

| Advisory Committee Costs | Expended 2009 | Estimated 2010 | Budgeted 2011 | Requested 2012 | Requested 2013 |
|--------------------------------------|--------------------------|---------------------------|--------------------------|---------------------------|---------------------------|
| Committee Members Direct Expenses | | | | | |
| Member travel | \$8,500 | \$6,000 | \$10,000 | \$10,000 | \$10,000 |
| Total, Committee Expenditures | \$8,500 | \$6,000 | \$10,000 | \$10,000 | \$10,000 |
| Method of Financing | | | | | |
| General Revenue Fund | \$8,500 | \$6,000 | \$10,000 | \$10,000 | \$10,000 |
| Total, Method of Financing | \$8,500 | \$6,000 | \$10,000 | \$10,000 | \$10,000 |
| Meetings Per Fiscal Year | 4 | 4 | 4 | 4 | 4 |

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Description and Justification for Continuation/Consequences of Abolishing

The 77th Legislature under House Bill 757 (Texas Health and Safety Code, Chapter 107) created the Health Disparities Task Force (HDTF or Task Force) in 2001. This bill was amended through HB 1396 in 2007 by the 80th Texas State Legislature. The Health Disparities Task Force (HDTF) is legislatively mandated and consists of nine members appointed by the Governor, Lieutenant Governor, and Speaker of the House to two-year terms. Task force members represent business, labor, government, charitable or community organizations, racial or ethnic populations, or community-based health organizations. Appointed members must also represent both urban and rural areas of the state, including the border with Mexico. The HDTF was established to eliminate health and health access disparities in Texas. The purpose of the task force is to assist HHSC accomplish the following goals among multicultural, disadvantaged, and regional populations:

- Eliminate the barriers caused by health disparities and lack of health access in Texas among multicultural, disadvantaged, and regional populations.
- Reorganize HHSC programs to eliminate those disparities.

HDTF also advises HHSC on the implementation of any targeted programs or funding authorized by the Legislature to address health and health access disparities.