

Issue Docket

Conference Committee on Senate Bill 1

2018-19 General Appropriations Bill

Article II - Health and Human Services

530 DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
	II-1	II-1		
Decision Item #1 - Increase Preparation for Adult Living (PAL) Purchased Services	\$ 1,832,024	\$ -	\$ 1,832,024	Senate increases \$1,832,024 in General Revenue to support agency-projected need for Preparation for Adult Living (PAL) services. See also Senate Rider 32, page II-15.
Decision Item #2 - Increase Finance Staff	\$ -	\$ 1,248,561	\$ 1,248,561	House increases \$1,138,089 in General Revenue, \$110,472 in Federal Funds, and 9.0 FTEs to fund additional finance staff to support agency operations.
Decision Item #3 - Increase Child Protective Services (CPS) Caseworkers	\$ 55,241,103	\$ 143,361,111	\$ 88,120,008	Senate increases \$43,826,055 in General Revenue, \$6,165,025 in Federal Funds, 307.4 FTEs in fiscal year 2018, and 381.5 FTEs in fiscal year 2019 to support additional CPS caseworkers. Funding of \$5,726,332 in General Revenue and \$636,260 in Federal Funds is contingent on Senate Bill 11. See also Senate Rider 33, page II-15. House increases \$95,212,940 in General Revenue, \$10,648,149 in Federal Funds, 717.6 FTEs in fiscal year 2018, and 806.6 FTEs in fiscal year 2019 to support additional CPS caseworkers. House funding includes \$32,250,000 in General Revenue appropriated in rider. See also House Rider 34, page II-16 and House Rider 35, page II-16.
Decision Item #4 - Increase Statewide Intake (SWI) Staff	\$ -	\$ 5,868,537	\$ 5,868,537	House increases \$5,746,464 in General Revenue, \$122,073 in Federal Funds, 46.7 FTEs in fiscal year 2018, and 52.5 FTEs in fiscal year 2019 to fund additional SWI staff.
Decision Item #5 - Create New Data Analysis Unit	\$ 1,070,115	\$ -	\$ 1,070,115	Senate increases \$1,049,017 in General Revenue, \$21,098 in Federal Funds, and 8.9 FTEs to fund a new data analysis unit specializing in providing additional analysis when a caseworker first receives an assignment.
Decision Item #6 - Expand Foster Care Redesign	\$ 7,132,207	\$ 3,566,104	\$ 3,566,103	Senate increases \$5,102,237 in General Revenue, \$2,029,970 in Federal Funds, and 11.0 FTEs to expand Foster Care Redesign to four new catchment areas. House increases \$2,551,119 in General Revenue, \$1,014,985 in Federal Funds, and 5.5 FTEs to expand Foster Care Redesign to two new catchment areas.
Decision Item #7 - Create New Capacity Portal for Data Sharing	\$ 5,300,000	\$ -	\$ 5,300,000	Senate increases \$4,600,000 in General Revenue, \$700,000 in Federal Funds, and 11.0 FTEs to create a new capacity portal to allow for automatic data sharing with foster care service providers.

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Decision Item #8 - Continue the Safe Signal Initiative	\$ -	\$ 611,184	\$ 611,184	House increases \$557,108 in General Revenue and \$54,076 in Federal Funds to continue the Safe Signal initiative.
Decision Item #9 - Enhance Community Engagement	\$ 579,060	\$ 868,591	\$ 289,531	Senate increases \$527,710 in General Revenue, \$51,350 in Federal Funds, and 3.6 FTEs to support increased community engagement through enhanced volunteer and community partnerships. House increases \$791,588 in General Revenue, \$77,003 in Federal Funds, and 5.4 FTEs to support increased community engagement through enhanced volunteer and community partnerships.
Decision Item #10 - Increase Prevention and Early Intervention (PEI) Program Staff	\$ 317,279	\$ -	\$ 317,279	Senate increases \$307,787 in General Revenue, \$9,492 in Federal Funds, and 2.0 FTEs to increase PEI support staff in PEI Research, Evaluation, and Quality Monitoring, and the Office of Child Safety for Child Maltreatment. See also Senate Rider 36, page II-15.
Decision Item #11 - Expand PEI Services	\$ -	\$ 21,690,090	\$ 21,690,090	House increases \$21,685,654 in General Revenue and \$4,436 in Federal Funds to expand PEI services in the following areas: - Services At-Risk Youth (STAR) (\$13.4 million); - Project Helping through Intervention and Prevention (HIP) (\$1.6 million); - Community Youth Development (CYD) (\$1.7 million); - Project Healthy Outcomes through Prevention and Early Support (HOPES) (\$3.6 million); and - Texas Home Visiting Program (\$0.8 million).
Decision Item #12 - Provide Certain CPS Salary Increases	\$ -	\$ 2,327,990	\$ 2,327,990	House increases \$2,087,252 in General Revenue and \$240,738 in Federal Funds to provide salary increases for certain CPS caseworkers.
Decision Item #13 - Reallocate Indirect Administration	\$ -	\$ -	\$ -	Senate reallocates funding and FTEs within multiple programs in order to better align with the agency's cost allocation plan. Reallocation results in a net zero cost to the agency.
Decision Item #14 - Continue Permanency Care Assistance	\$ 8,138,404	\$ -	\$ 8,138,404	Senate increases \$5,155,896 in General Revenue and \$2,982,508 in Federal Funds to continue the Permanency Care Assistance Program, contingent on passage of SB 203. See also Senate Rider 38, page II-16.
Decision Item #15 - Increase Adult Protective Services (APS) Caseworkers	\$ -	\$ 10,750,000	\$ 10,750,000	House increases \$10,750,000 in General Revenue, appropriated in rider, to support additional APS staff. See also House Rider 35, page II-16.

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Decision Item #16 - Increase Capital Budget Authority	\$ -	\$ -	\$ -	Senate increases capital budget authority of \$5,848,107 to complete the second half of the agency-requested capacity portal which would serve as a case management system for placement staff.
Decision Item #17 - Fund Foster Care Rates with TANF Federal Funds	\$ 94,301,444	\$ 94,301,444	\$ -	House funding for the CPS foster care provider rate increase includes a Method of Finance swap to use \$66,000,000 in TANF Federal Funds instead of General Revenue. See also Senate Rider 44, page II-16.
Decision Item #18 - Expand Relative Caregiver Payments		\$ 32,543,356	\$ 32,543,356	House increases \$32,543,356 in Economic Stabilization Funds to expand Relative Caregiver Payments contingent upon enactment of House Bill 4, or similar legislation.
Decision Item #19 - Upgrade and Modernize Information Management Projecting Adults and Children in Texas (IMPACT)		\$ 3,446,400	\$ 3,446,400	House increases \$3,446,400 in Economic Stabilization Funds to upgrade and modernize the agency's IMPACT database.
Number of Full-Time-Equivalents (FTEs)	12,621.0	13,166.0		<ul style="list-style-type: none"> a. House increases 9.0 FTEs to support an increase in finance staff. See Decision Item #2. b. Senate increases 307.4 FTEs in fiscal year 2018 and 381.5 FTEs in fiscal year 2019 to support additional Child Protective Services (CPS) staff. See Decision Item #3. House increases 717.6 FTEs in fiscal year 2018 and 806.6 FTEs in fiscal year 2019 to support additional CPS staff. Amounts include 73.6 FTEs appropriated in rider. See Decision Item #3. c. House increases 46.7 FTEs in fiscal year 2018 and 52.5 FTEs in fiscal year 2019 to support an increase in SWI staff. See Decision Item #4. d. Senate increases 8.9 FTEs to create a new data analysis unit. See Decision Item #5. e. Senate increases 11.0 FTEs to expand Foster Care Redesign. See Decision Item #6. House increases 5.5 FTEs to expand Foster Care Redesign. See Decision Item #6.

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				<ul style="list-style-type: none"> f. Senate increases 11.0 FTEs to create a new capacity portal for data sharing. See Decision Item #7. g. Senate increases 3.6 FTEs to enhance community engagement. See Decision Item #9. House increases 5.4 FTEs to enhance community engagement. See Decision Item #9. h. Senate increases 2.0 FTEs to increase PEI support staff. See Decision Item #10. i. House increases 84.0 FTEs, appropriated in rider, to increase APS caseworkers. See Decision Item #15.
Administrative and IT				
Indirect Administration	\$ 77,899,366			<ul style="list-style-type: none"> a. See Decision Item #5 - Create New Data Analysis Unit b. See Decision Item #9 - Enhance Community Engagement c. See Decision Item #13 - Reallocate Indirect Administration
Information Technology Program Support	\$ 83,391,853			<ul style="list-style-type: none"> a. See Decision Item #5 - Create New Data Analysis Unit b. See Decision Item #7 - Create New Capacity Portal c. See Decision Item #9 - Enhance Community Engagement d. See Decision Item #13 - Reallocate Indirect Administration
Child Protective Services				
Adoption Purchased Services	\$ 21,352,247			
Adoption Subsidy Payments	\$ 540,406,480			
CPS Direct Delivery Staff	\$ 1,519,824,352			<ul style="list-style-type: none"> a. See Decision Item #3 - Increase CPS Caseworkers b. See Decision Item #5 - Create New Data Analysis Unit c. See Decision Item #9 - Enhance Community Engagement d. See Decision Item #13 - Reallocate Indirect Administration
CPS Program Support	\$ 67,659,406			<ul style="list-style-type: none"> a. See Decision Item #5 - Create New Data Analysis Unit b. See Decision Item #6 - Expand Foster Care Redesign c. See Decision Item #7 - Create New Capacity Portal d. See Decision Item #9 - Enhance Community Engagement e. See Decision Item #13 - Reallocate Indirect Administration

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Foster Care Payments	\$ 968,362,178			a. See Decision Item #6 - Expand Foster Care Redesign b. See Decision Item #17 - Fund Foster Care Rates with TANF Federal Funds
Other CPS Purchased Services	\$ 83,709,369			
Permanency Care Assistance Payments	\$ 42,660,496			See Decision Item #14 - Continue Permanency Care Assistance
Post-Adoption/Post-Permanency Purchased Services	\$ 7,407,298			
Preparation for Adult Living (PAL) Purchased Services	\$ 32,628,491			See Decision Item #1 - Increase PAL Purchased Services
Relative Caregiver Monetary Assistance Payments	\$ 24,708,910			
Substance Abuse Purchased Services	\$ 18,213,439			
TWC Contracted Day Care Purchased Services	\$ 139,637,252			
Prevention Services				
At-Risk Prevention Program Support	\$ 2,058,203			a. See Decision Item #10 - Increase PEI Program Staff b. See Decision Item #13 - Reallocate Indirect Administration
Child Abuse Prevention Grants	\$ 7,932,633			
Community Youth Development (CYD) Program	\$ 18,476,978			
Community-Based At-Risk Family Services	\$ 1,487,449			
Nurse Family Partnership	\$ 26,281,024			
Preventive Services for Veterans and Military Families (MVFP)	\$ 6,405,762			
Project Healthy Outcomes through Prevention and Early Support (HOPES)	\$ 45,608,019			
Project Helping through Intervention and Prevention (HIP)	\$ 1,888,479			
Runaway and Youth Hotline	\$ 630,283			
Safe Baby Campaigns	\$ 1,783,130			
Services to At-Risk Youth (STAR)	\$ 41,559,930			
Statewide Youth Services Network (SYSN)	\$ 3,278,360			
Texas Families: Together and Safe	\$ 5,651,796			

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Texas Home Visiting Program	\$ 34,961,034			
Universal Prevention Services	\$ 3,314,586			
Regulatory & Enforcement				
APS In-Home Direct Delivery Staff	\$ 98,376,035			See Decision Item #13 - Reallocate Indirect Administration
APS Program Support	\$ 8,695,396			See Decision Item #13 - Reallocate Indirect Administration
APS Purchased Emergency Client Services	\$ 20,432,195			
Statewide Intake Services				
Statewide Intake Services (SWI)	\$ 46,272,838			a. See Decision Item #5 - Create New Data Analysis Unit b. See Decision Item #13 - Reallocate Indirect Administration
A.1.1 STATEWIDE INTAKE SERVICES		\$ 49,341,745		a. See Decision Item #4 - Increase SWI Staff b. See Decision Item #11 - Expand PEI Services
B.1.1 CPS DIRECT DELIVERY STAFF		\$ 1,534,266,777		a. See Decision Item #3 - Increase CPS Caseworkers b. See Decision Item #4 - Increase SWI Staff c. See Decision Item #9 - Enhance Community Engagement d. See Decision Item #12 - Provide Certain CPS Salary Increases
B.1.2 CPS PROGRAM SUPPORT		\$ 100,251,421		a. See Decision Item #4 - Increase SWI Staff b. See Decision Item #6 - Expand Foster Care Redesign
B.1.3 TWC CONTRACTED DAY CARE		\$ 139,348,471		
B.1.4 ADOPTION PURCHASED SERVICES		\$ 20,130,624		
B.1.5 POST - ADOPTION/POST - PERMANENCY		\$ 6,976,442		
B.1.6 PAL PURCHASED SERVICES		\$ 18,330,466		
B.1.7 SUBSTANCE ABUSE PURCHASED SERVICES		\$ 17,136,828		
B.1.8 OTHER CPS PURCHASED SERVICES		\$ 78,305,102		
B.1.9 FOSTER CARE PAYMENTS		\$ 952,931,004		a. See Decision Item #6 - Expand Foster Care Redesign b. See Decision Item #17 - Fund Foster Care Rates with TANF Federal Funds

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B.1.10 ADOPTION/PCA PAYMENTS		\$ 573,428,122		
B.1.11 RELATIVE CAREGIVER PAYMENTS		\$ 57,252,266		See Decision Item #18 - Expand Relative Caregiver Payments
C.1.1 STAR PROGRAM		\$ 60,626,107		See Decision Item #11 - Expand PEI Services
C.1.2 CYD PROGRAM		\$ 18,577,185		See Decision Item #11 - Expand PEI Services
C.1.3 CHILD ABUSE PREVENTION GRANTS		\$ 7,214,315		See Decision Item #11 - Expand PEI Services
C.1.4 OTHER AT-RISK PREVENTION PROGRAMS		\$ 62,779,694		See Decision Item #11 - Expand PEI Services
C.1.5 HOME VISITING PROGRAMS		\$ 57,980,268		See Decision Item #11 - Expand PEI Services
C.1.6 AT-RISK PREVENTION PROGRAM SUPPORT		\$ 15,164,632		See Decision Item #11 - Expand PEI Services
D.1.1 APS DIRECT DELIVERY STAFF		\$ 95,530,998		a. See Decision Item #4 - Increase SWI Staff b. See Decision Item #15 - Increase APS Caseworkers
D.1.2 APS PROGRAM SUPPORT		\$ 11,367,361		
D.1.3 APS PURCHASED EMERGENCY CLIENT SVCS		\$ 18,799,637		
E.1.1 CENTRAL ADMINISTRATION		\$ 42,766,120		a. See Decision Item #2 - Increase Finance Staff b. See Decision Item #4 - Increase SWI Staff c. See Decision Item #9 - Enhance Community Engagement d. See Decision Item #11 - Expand PEI Services
E.1.2 OTHER SUPPORT SERVICES		\$ 20,495,148		a. See Decision Item #4 - Increase SWI Staff
E.1.3 REGIONAL ADMINISTRATION		\$ 1,861,486		
E.1.4 IT PROGRAM SUPPORT		\$ 84,827,188		a. See Decision Item #2 - Increase Finance Staff b. See Decision Item #4 - Increase SWI Staff c. See Decision Item #8 - Continue the Safe Signal Initiative d. See Decision Item #9 - Enhance Community Engagement e. See Decision Item #11 - Expand PEI Services

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F.1.1 AGENCY-WIDE AUTOMATED SYSTEMS		\$ 60,937,592		<ul style="list-style-type: none"> a. See Decision Item #2 - Increase Finance Staff b. See Decision Item #4 - Increase SWI Staff c. See Decision Item #9 - Enhance Community Engagement d. See Decision Item #11 - Expand PEI Services e. See Decision Item #19 - Upgrade and Modernize IMPACT
Other Reporting Requirements	II-6, Rider 7 Rider Packet, page II-1	II-6, Rider 7 Rider Packet, page II-1		Senate requires DFPS to report on litigation involving child welfare service providers.
Limitation on Expenditures for Administrative Overhead	II-7, Rider 8 Rider Packet, page II-3	II-8, Rider 8 Rider Packet, page II-3		Senate outlines the funding for direct delivery of the TWC Contracted Day Care Purchased Services Program that is subject to the limitations included in the rider.
Limitation on Appropriations for Day Care Services	II-11, Rider 20 Rider Packet, page II-4	II-12, Rider 20 Rider Packet, page II-4		Senate outlines the funding for direct delivery of the TWC Contracted Day Care Purchased Services Program that is subject to the limitations included in the rider.
Foster Care Redesign	II-11, Rider 21 Rider Packet, page II-5	II-12, Rider 21 Rider Packet, page II-5		Senate adds any standing Joint Legislative Oversight Committees, as appropriate, to the list of recipients who are required to receive the Foster Care Redesign performance report.
Family Finding Collaboration	II-13, Rider 26 Rider Packet, page II-7	II-14, Rider 26 Rider Packet, page II-7		Senate 1) allows family finding collaboration funding to be used with single source continuum contractors; and 2) adds a reporting requirement related to the use of these funds.
Texas Home Visiting Program and Nurse Family Partnership Program	II-14, Rider 31 Rider Packet, page II-7	II-15, Rider 31 Rider Packet, page II-7		House prohibits funding for the support costs to implement the home visiting programs to exceed 20 percent of the total direct delivery costs for these programs.
Preparation for Adult Living (PAL) Purchased Services	II-15, Rider 32 Rider Packet, page II-8			Senate restricts the use of appropriations provided to expand the Preparation for Adult Living (PAL) Purchased Services to this purpose.

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Cash Flow Contingency		II-15, Rider 32 Rider Packet, page II-8		House allows the agency restricted cash flow flexibility to temporarily utilize General Revenue pending the receipt of federal reimbursements.
Contingency for Senate Bill 11	II-15, Rider 33 Rider Packet, page II-9			Senate identifies appropriations for the oversight of case management services contingent upon the enactment of Senate Bill 11, or similar legislation.
Child Protective Services Special Investigators	II-15, Rider 34 Rider Packet, page II-10			Senate allows DFPS to use CPS Special Investigators to assist dedicated Information Analysts by providing additional up-to-date background information on households currently under DFPS investigation. See Decision Item #5 - Create New Data Analysis Unit.
Additional Funding for Improvements to Foster Care Services		II-15, Rider 34 Rider Packet, page II-10		House appropriates \$21.5 million in General Revenue to improve foster care services.
Additional Appropriation		II-16, Rider 35 Rider Packet, page II-10		House appropriates \$10.8 million in General Revenue for CPS Direct Delivery Staff and \$10.8 million in General Revenue for APS Direct Delivery Staff.
Contingency for Community-based Foster Care Appropriations	II-15, Rider 35 Rider Packet, page II-10			Senate makes the fiscal year 2019 funding for Foster Care Redesign expansion contingent upon Legislative Budget Board approval (LBB). Approval is further contingent upon DFPS executing a contract to expand into one region and meeting all related reporting requirements.
Prevention and Early Intervention Full-time Equivalents	II-15, Rider 36 Rider Packet, page II-11			Senate restricts the use of appropriations provided to increase staff support in PEI by 1.0 FTE in PEI Research, Evaluation, and Quality Monitoring, and 1.0 FTE in the Office of Child Safety for Child Maltreatment for this purpose.
Study on Provision of Services to Victims of Sex Trafficking in Foster Care		II-16, Rider 36 Rider Packet, page II-11		House requires DFPS to conduct a study to 1) develop department standards for placement capacity to provide services to children who are victims of sex trafficking; and 2) make related recommendations.
Utilization of Appropriate Levels of Care in Foster Care; Reporting Requirements	II-15, Rider 37 Rider Packet, page II-12			Senate requires DFPS to submit a plan to 1) ensure that foster children are placed in the most appropriate level of care; and 2) reduce the utilization of child-specific contracts.

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Contingency for Senate Bill 203	II-16, Rider 38 Rider Packet, page II-13			Senate provides appropriations for the continuation of the Permanency Care Assistance Program contingent upon the enactment of Senate Bill 203, or similar legislation.
Faith and Community Based Partner Coordination	II-16, Rider 39 Rider Packet, page II-13			Senate directs DFPS, to the extent allowable, to use PEI appropriations to develop and implement a strategy for engaging and collaborating with faith and community based partners.
Office of the Ombudsman	II-16, Rider 40 Rider Packet, page II-13			Senate requires the agency to allocate 3.0 FTEs for use in the agency's Office of the Ombudsman.
Youth Homelessness	II-16, Rider 41 Rider Packet, page II-13			Senate allows DFPS to use STAR Program funding to assist in providing services to homeless youth, including services such as case management and transitional living.
Federal Funds Maximization	II-16, Rider 43 Rider Packet, page II-14			Senate requires DFPS to contract with a cost-allocation expert to identify and report on what agency services can be funded through Medicaid and Title IV-E Federal Funds.
Rate Increases for Foster Care Providers	II-16, Rider 44 Rider Packet, page II-14			Senate outlines the CPS foster care service provider rate increases included the additional funding appropriated for this purpose.
TWC Day Care Purchased Services Eligibility	II-16, Rider 45 Rider Packet, page II-16			Senate allows DFPS to use TWC Contracted Day Care Purchased Service appropriations to provide day care services to any caregivers working at least 30 hours per week.
See also Article IX		Page IX-84		House provides Economic Stabilization Funds for the following: a. Relative Caregiver Payments See Decision Item #18 b. Information Management Protecting Adults and Children in Texas (IMPACT) See Decision Item #19
See also Article XI	Page XI-1	Page XI-3		

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Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
<p>Cross-Strategy Issue #1 - Funding for indirect administration.</p>	<p>II-17</p>	<p>II-16</p>		<p>Senate provides \$70.8 million in All Funds (\$54.0 million in General Revenue-Related Funds) and 190.0 FTEs for indirect administration, which is a decrease of \$21.0 million in All Funds (\$9.5 million in General Revenue-Related Funds) and 79.6 FTEs.</p> <p>House provides \$43.9 million in All Funds (\$27.1 million in General Revenue-Related Funds) and 90.0 FTEs for the same purpose, which is a decrease of \$47.8 million in All Funds (\$36.3 million in General Revenue-Related Funds) and 179.6 FTEs.</p>
<p>Cross-Strategy Issue #2 - Funding for ASH Campus Repair & Renovations</p>				<p>Senate decreases \$1.0 million in All Funds in the following strategies, eliminating funding for the project:</p> <ul style="list-style-type: none"> - Strategy A.1.1. \$0.3 million in General Revenue and \$30,000 in Federal Funds; - Strategy A.2.2. \$0.6 million in General Revenue; and - Strategy A.2.4. \$0.1 million in General Revenue. <p>House decreases \$1.0 million in General Revenue and increases Economic Stabilization Funds by a like amount in the following strategies, fully funding the project:</p> <ul style="list-style-type: none"> - Strategy A.1.1, decreases \$0.9 million in General Revenue and increases \$0.3 million in Economic Stabilization Funds; -Strategy A.2.2, increases \$0.6 million in Economic Stabilization Funds; and -Strategy A.2.4, decreases \$0.1 million in General Revenue and increases \$0.1 million in Economic Stabilization Funds.

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Number of Full-Time-Equivalents (FTEs)	3,080.3	3,000.3	80.0	<p>a. Senate provides 255.9 FTEs each fiscal year in Strategy A.2.1, Immunize Children & Adults in Texas, which is a decrease of 14.0 FTEs.</p> <p>House maintains fiscal year 2017 FTE level for Strategy A.2.1, Immunize Children & Adults in Texas.</p> <p>b. Senate provides 74.9 FTEs each fiscal year in Strategy A.3.3, Children with Special Needs, which is a decrease of 8.3 FTEs.</p> <p>House provides 80.9 FTEs each fiscal year in Strategy A.3.3, Children with Special Needs, which is a decrease of 2.3 FTEs.</p> <p>c. Senate provides 7.0 FTEs in fiscal year 2018 only in Strategy C.1.4 to support the interagency agreement between DSHS and TDLR regarding regulation of certain health care professionals, which are slated to transfer from DSHS to TDLR during the 2018-19 biennium pursuant to Senate Bill 202, Eighty-fourth Legislature, 2015.</p> <p>House provides 0.0 FTEs in Strategy C.1.4, Health Care Professionals for this purpose.</p> <p>See also Senate Rider 34, page II-30.</p> <p>d. See Cross-Agency Issue: Senate provides 190.0 FTEs each fiscal year for all strategies in Goal E, Indirect Administration, which is a decrease of 79.6 FTEs.</p> <p>House provides 90.0 FTEs each fiscal year for all strategies in Goal E, Indirect Administration, which is a decrease of 179.6 FTEs.</p>

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A.1.1 PUBLIC HEALTH PREP. & COORD. SVCS/ HOUSE ARTICLE IX, SEC. 17.13	\$ 131,098,773	\$ 130,573,221	\$ 525,552	<ul style="list-style-type: none"> a. Senate provides \$0.2 million more in Federal Funds for Local Health Department Contracts. b. See Cross-Strategy Issue #2.
A.1.2 VITAL STATISTICS	\$ 29,303,717	\$ 30,901,435	\$ 1,597,718	<p>House provides \$4.1 million in Appropriated Receipts (Other Funds) from unexpended balances in fiscal year 2017 and corresponding capital budget authority for the following capital budget projects:</p> <ul style="list-style-type: none"> a. Vital Records Project (TxEver): \$2.6 million See also House Rider 23, page II-27 and House Rider 38, page II-30. b. Controlled Access and Surveillance - Vital Statistics: \$0.6 million; c. Vital Records Preservation: \$0.8 million; and d. Microfilming Equipment - Vital Statistics: \$0.1 million See also House Rider 23, page II-27. <p>Senate provides \$2.5 million in Appropriated Receipts (Other Funds) from unexpended balances in fiscal year 2017 and corresponding capital budget authority for the Vital Records Project (TxEver).</p>
A.1.5 HEALTH DATA AND STATISTICS	\$ 7,623,080	\$ 7,643,080	\$ 20,000	<p>Senate reduces \$20,000 in General Revenue for Statewide Health Coordinating Council travel reimbursement, which eliminates funding for this purpose.</p> <p>House maintains 2016-17 spending levels for the Statewide Health Coordinating Council travel reimbursement.</p> <p>See also House Rider 27, page II-28.</p>

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A.2.1 IMMUNIZE CHILDREN & ADULTS IN TEXAS	\$ 179,540,171	\$ 190,692,895	\$ 11,152,724	<p>Senate provides a decrease of \$11.6 million in All Funds (\$9.7 million in General Revenue-Related Funds) and a decrease 14.0 FTEs from 2016-17 spending levels for immunization programs.</p> <p>House provides decrease of \$0.5 million in All Funds and an increase of \$1.5 million in General Revenue-Related Funds from 2016-17 spending levels for the same purpose. House maintains 2017 FTE levels of 269.9 FTEs.</p>
A.2.2 HIV/STD PREVENTION/ HOUSE ARTICLE IX, SEC. 17.13	\$ 396,401,875	\$ 398,291,906	\$ 1,890,031	<p>a. Senate implements agency's ten percent reduction option of \$1.2 million in General Revenue for HIV medications.</p> <p>b. Senate provides \$0.1 million in Appropriated Receipts (Other Funds) for Wi-Fi and Video Conferencing Equipment.</p> <p>House provides \$0.1 million in General Revenue for the same purpose.</p> <p>c. House reduces \$0.5 million in General Revenue for HIV/STD screenings.</p> <p>See also Senate Rider 16, page II-25.</p> <p>d. See Cross-Strategy Issue #2.</p>
A.2.3 INFECTIOUS DISEASE PREV/EPI/SURV	\$ 23,970,861	\$ 25,972,235	\$ 2,001,374	<p>a. Senate implements agency's ten percent reduction option of \$1.5 million in General Revenue for skunk rabies abatement.</p> <p>b. House provides \$0.5 million in General Revenue for Zika virus preparedness and prevention, which is new funding for the 2018-19 biennium.</p> <p>See also House Rider 37, page II-30.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
A.2.4 TB SURVEILLANCE & PREVENTION/ HOUSE ARTICLE IX, SEC. 17.13	\$ 55,349,592	\$ 55,469,592	\$ 120,000	See Cross-Strategy Issue #2.
A.3.1 CHRONIC DISEASE PREVENTION	\$ 18,708,015	\$ 17,263,415	\$ 1,444,600	<p>a. Senate maintains funding for the Lone Star Stroke program at 2016-17 spending levels.</p> <p>House transfers \$1.5 million in General Revenue for the Lone Star Stroke program to the UT System.</p> <p>See also House DSHS Rider 13, page II-23; Senate DSHS Rider 13, page II-24; and House University of Texas System Administration Rider 5, page III-59.</p> <p>b. Senate reduces \$55,400 in General Revenue for advisory council travel reimbursement for Texas Council on Alzheimer's Disease and Related Disorders (\$7,000), Texas Council on Cardiovascular Disease and Stroke (\$10,000), and the Texas Diabetes Council (\$38,400), which eliminates funding for this purpose.</p> <p>House maintains 2016-17 spending levels for advisory council travel reimbursement.</p> <p>See also House Rider 27, page II-28.</p>
A.3.3 CHILDREN WITH SPECIAL NEEDS	\$ 18,846,934	\$ 20,132,438	\$ 1,285,504	Senate implements agency's ten percent reduction option of \$1.3 million in General Revenue and 6.0 FTEs for eligibility determination, case management, and community-based infrastructure support for families seeking health benefits through the Children with Special Health Care Needs program.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
A.4.1 LABORATORY SERVICES/ HOUSE ARTICLE IX, SEC. 17.13	\$ 83,331,709	\$ 84,931,709	\$ 1,600,000	House provides \$1.6 million in Economic Stabilization Funds in Article IX for the following purposes: a. To add testing for X-linked adrenoleukodystrophy (X-ALD) to the newborn screening panel (\$1.2 million); and b. Laboratory deferred maintenance (\$0.4 million).
C.1.1 FOOD (MEAT) AND DRUG SAFETY	\$ 49,866,435	\$ 50,152,435	\$ 286,000	Senate reduces \$0.3 million in General Revenue-Dedicated Account No. 5022, Oyster Sales to align with the Biennial Revenue Estimate (BRE), which is a decrease of \$0.3 million from 2016-17 spending levels. House maintains funding from Account No. 5022 at 2016-17 spending levels of \$0.5 million. <i>Note: House provides \$0.2 in General Revenue-Dedicated Account No. 5022, Oyster Sales, to Texas A&M University at Galveston. Senate provides no funding from Account No. 5022 to Texas A&M Galveston. According to the Biennial Revenue Estimate, estimated revenue to Account No. 5022 is \$109,000 each fiscal year.</i>
E.1.1 CENTRAL ADMINISTRATION	\$ 26,428,073	\$ 16,622,193	\$ 9,805,880	See Cross-Strategy Issue #1.
E.1.2 IT PROGRAM SUPPORT	\$ 36,336,277	\$ 21,799,348	\$ 14,536,929	See Cross-Strategy Issue #1.
E.1.3 OTHER SUPPORT SERVICES	\$ 5,214,050	\$ 3,718,250	\$ 1,495,800	See Cross-Strategy Issue #1.
E.1.4 REGIONAL ADMINISTRATION	\$ 2,778,893	\$ 1,805,807	\$ 973,086	See Cross-Strategy Issue #1.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Cardiovascular Disease and Stroke Projects	II-24 Rider 13 Rider Packet, page II-17	II-23 Rider 13 Rider Packet, page II-17		Senate requires DSHS to allocate \$1.5 million in General Revenue to the University of Texas System for the Lone Star Stroke program and allows for DSHS to expend funds for cardiovascular disease and stroke projects. <i>Note: House transfers the Lone Star Stroke program and corresponding funding to the UT System. See also House University of Texas System Administration Rider 5, page III-59.</i>
HIV/STD Screenings	II-25 Rider 16 Rider Packet, page II-17			Senate requires the agency to allocate \$0.5 million in General Revenue for HIV/STD screening during routine checkups to residents in metropolitan statistical areas with the highest rate or instance of HIV/STD cases. <i>Note: There is insufficient General Revenue not used for federal match or maintenance of effort requirements in Strategy A.2.2, HIV/STD Prevention in CSSB1 to support rider requirements.</i>
Unexpended Balances: Credit Card and Electronic Services Related Fees	II-28 Rider 24 Rider Packet, page II-17	II-27 Rider 23 Rider Packet, page II-17		House identifies \$4.1 million in Appropriated Receipts (Other Funds) from unexpended balances in fiscal year 2017 and corresponding capital budget authority for the following capital budget projects: a. Vital Records Project (TxEver): \$2.6 million; b. Controlled Access and Surveillance - Vital Statistics: \$0.6 million; c. Vital Records Preservation: \$0.8 million; and d. Microfilming Equipment - Vital Statistics: \$0.1 million House requires DSHS to report to LBB the amount of unexpended balances and the amount expended on each of the projects listed above. Senate identifies \$2.5 million from the same funding sources for the Vital Records Project (TxEver).
Reimbursement of Advisory Committee Members	II-29 Rider 28 Rider Packet, page II-18	II-28 Rider 27 Rider Packet, page II-18		House authorizes DSHS to provide travel reimbursement for members of the Statewide Health Coordinating Council, Texas Council on Alzheimer's Disease and Related Disorders, Texas Council on Cardiovascular Disease and Stroke, and the Texas Diabetes Council.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Emerging and Neglected Tropic Diseases Sentinel Surveillance		II-29 Rider 31 Rider Packet, page II-19		House requires the agency to implement a sentinel surveillance program to monitor emerging and neglected tropical diseases as outlined in Health and Safety Code, Chapter 100 and provide to the LBB quarterly reports outlining program implementation and performances. If the program is not implemented, the LBB may direct the Comptroller of Public Accounts to reduce DSHS appropriations for Central Administration.
Immunization Programs Improvement	II-30 Rider 32 Rider Packet, page II-19			Senate requires the agency to identify and report on efficiencies and program improvements for the Vaccines for Children and Adult Safety Net programs.
Tobacco Prevention Programs for Youth/Tobacco Prevention Funding	II-30 Rider 33 Rider Packet, page II-20	II-29 Rider 33 Rider Packet, page II-20		<ul style="list-style-type: none"> a. Senate requires the agency to expend funds appropriated for youth tobacco prevention on evidence-based and promising practices. b. House prohibits the agency to expend any funding appropriated for tobacco prevention on paid media activities.
Cause of Death Data Improvement		II-29 Rider 34 Rider Packet, page II-20		House requires the agency to study the quality of cause of death data on death certificates and submit a report including findings, potential program improvements, and any recommended statutory changes to the Lieutenant Governor, Speaker, LBB, and certain legislative committees.
Newborn Screening Payment		II-30 Rider 35 Rider Packet, page II-21		House requires the agency to study the most effective way to bill private insurers for newborn screening kits and submit a report including findings and recommendations to the LBB and certain legislative committees.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Local Health Department Performance Measures	II-30 Rider 35 Rider Packet, page II-21			Senate requires the agency to develop high priority performance measures for local health departments (LHDs) who receive state-funded grants and submit a report including the performance measures and plans to utilize them to the LBB and members of the Senate Finance Committee.
Regional Advisory Council Funding: Information Listing	II-30 Rider 36 Rider Packet, page II-21			Senate provides an informational listing regarding Regional Advisory Council (RAC) funding.
Evaluation of Immunization Programs		II-30 Rider 36 Rider Packet, page II-22		House requires the agency to assess the Vaccines for Children and Adult Safety Net programs and submit a report outlining any identified efficiency and program improvements to the LBB and certain legislative committees.
Zika Virus Preparedness and Prevention		II-30 Rider 37 Rider Packet, page II-23		House requires the agency to expend at least \$0.5 million during the biennium on Zika virus preparedness and prevention in the Texas-Mexico border region.
Accuracy of Death Certificate of Pregnant Person or Person Recently Pregnant		II-30 Rider 38 Rider Packet, page II-23		House requires the agency to develop and implement an electronic process within TxEver for determining in real time whether a person was pregnant at the time of death or was pregnant at any time in the year preceding the person's death and use \$0.1 million in Appropriated Receipts (Other Funds) from unexpended balances in fiscal year 2017 for this purpose.
Report on Compounding Outsourcing Facilities		II-30 Rider 39 Rider Packet, page II-23		House requires the agency to review rules, regulations and licensing procedures for compounding outsourcing facilities and report findings and recommendations to the legislature.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
See also Article IX		Page IX-84		House provides Economic Stabilization Funds for the following: <ul style="list-style-type: none"> - Adding testing for X-linked adrenoleukodystrophy (X-ALD) to the newborn screening panel (\$1.2 million); - State Laboratory deferred maintenance (\$0.4 million); and - Other agency facility deferred maintenance (\$1.0 million).
See also Article XI	Page XI-1	Page XI-3		

529 HEALTH AND HUMAN SERVICES COMMISSION (Non-Medicaid)

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Technical Adjustment #1	II-32	II-32		
	II-35	II-35		In Strategy E.1.2, Provide WIC Services, reclassify General Revenue-Dedicated WIC Rebates Account No. 8027 to Other Funds, to reflect the method of finance category used in the Comptroller's Biennial Revenue Estimate (BRE). NOTE: This would not generate a savings to the bill.
Technical Adjustment #2	II-35			In the Senate's bill pattern for Strategy H.1.1, Facility/Community-based Regulation, decrease General Revenue by \$5.4 million and increase General Revenue-Match for Medicaid No. 758 by a like amount to align the method of finance with previous funding decisions regarding Strategy H.1.1, Facility/Community-based Regulation.
Technical Adjustment #3	II-69	II-71		In Rider 107/111, Vendor Drug Rebates and Report, amend the rider to align appropriation authority for the Children with Special Health Care Needs (CSHCN) program and the Kidney Health Care program.
Technical Adjustment #4	II-89	II-90		In Rider 149/153, Reimbursement of Advisory Committee Members, amend the rider to correct the listing of advisory committee members eligible to receive reimbursement.
Cross-Strategy Issue #1 - Funding to maintain fiscal year 2017 staffing levels at the State Supported Living Centers (SSLCs) in fiscal year 2018 and to transition residents to a long-term community care program.				Senate provides \$35,127,562 in All Funds (\$15,145,947 in General Revenue and \$19,981,615 in Federal Funds) in fiscal year 2018 across three strategies to maintain additional SSLC staffing in fiscal year 2018 and to transition an estimated 200 residents per fiscal year into a long-term community care program. House provides \$23,075,735 in All Funds (\$9,992,148 in General Revenue and \$13,083,587 in Federal Funds) in fiscal year 2018 across three strategies for the same purpose.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
<p>Cross-Strategy Issue #2 - Continue funding for the Legacy Department of Assistive and Rehabilitative Services (DARS) Programs, as provided in fiscal year 2017 in Special Provisions 57, Contingency for Senate Bill 208, 2016-17 GAA.</p>				<p>HHSC was provided \$9,169,077 in General Revenue in contingency funding for legacy DARS Programs in fiscal year 2017 only, including \$5,031,368 to support HHSC's cost allocation plan, \$2,024,328 to maintain services in the Deaf and Hard of Hearing Services program, and \$2,113,381 to provide field support staff (33.0 FTEs) for Comprehensive Rehabilitation Services, Children's Blindness Services, and Independent Living Services.</p> <p>Senate provides an increase of \$4,137,709 in General Revenue in contingency funding for legacy DARS Programs: \$13,306,786 in General Revenue is included for the 2018-19 biennium for this purpose, including \$5,031,368 to support HHSC's cost allocation plan, \$4,137,709 to support the Deaf and Hard of Hearing Services program, and \$4,226,762 to support current field staff.</p> <p>House maintains 2017 spending levels for this purpose.</p>
<p>Cross-Strategy Issue #3 - Funding to eliminate the current and projected waiting lists for community mental health services for adults and children.</p>				<p>Senate provides \$62,673,000 (\$54,786,571 in General Revenue and \$7,885,974 in Federal Funds) across two strategies to eliminate the current and projected waiting lists for community mental health services.</p> <p>House provides \$62,673,000 million in General Revenue across two strategies for the same purpose.</p>
<p>Number of Full-Time-Equivalents (FTEs)</p>	<p>39,842.1</p>	<p>39,736.6</p>	<p>105.5</p>	
<p>Appropriations Made in Riders</p>	<p>\$ 5,000,000</p>	<p>\$ -</p>	<p>\$ 5,000,000</p>	<p>Senate provides \$5,000,000 in General Revenue-Dedicated Hospital Perpetual Care Account No. 8146, contingent on passage of Senate Bill 267.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
D.1.1 WOMEN'S HEALTH PROGRAM	\$ 284,644,434	\$ 294,600,115	\$ 9,955,681	<p>Senate provides an increase of \$30,897,728 in All Funds for Women's Health programs: \$284,644,434 in All Funds is included for programs for the 2018-19 biennium, including \$80,915,378 in General Revenue Related Funds and \$203,529,056 in Federal Funds. The Senate assumes more federal funding than the House for the Healthy Texas Women program.</p> <p>House provides an increase of \$40,853,409 in All Funds for Women's Health programs: \$294,600,115 in All Funds is included for programs for the 2018-19 biennium, including \$260,915,378 in General Revenue Related Funds and \$23,529,056 in Federal Funds. This includes \$9,955,681 in General Revenue for marketing and outreach. The annual split for the \$9,955,681 is: 2018: \$7,797,679; 2019: \$2,158,002.</p>
D.1.2 ALTERNATIVES TO ABORTION	\$ 18,300,000	\$ 38,300,000	\$ 20,000,000	<p>See also Senate Rider 184, page II-96.</p> <p>Senate maintains 2016-17 level funding for the Alternatives to Abortion program.</p> <p>House provides an increase of \$20,000,000 in General Revenue for the Alternatives to Abortion program.</p>
D.1.5 CHILDREN'S BLINDNESS SERVICES	\$ 11,691,761	\$ 11,586,462	\$ 105,299	See Cross-Strategy Issue #2.
D.1.6 AUTISM PROGRAM	\$ 14,248,197	\$ 14,239,310	\$ 8,887	See Cross-Strategy Issue #2.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
D.2.1 COMMUNITY MENTAL HEALTH SVCS-ADULTS	\$ 703,362,861	\$ 703,362,864	\$ 3	See Cross-Strategy Issue #3. See also Highlights of Behavioral Health Related Decisions.
D.2.2 COMMUNITY MENTAL HLTH SVCS-CHILDREN	\$ 168,322,438	\$ 162,973,576	\$ 5,348,862	<p>a. See Cross-Strategy Issue #3.</p> <p>b. Senate provides an increase of \$2,848,862 in General Revenue for Mental Health Block Grant for the Relinquishment Prevention program to fund an additional 15 residential treatment center beds for youth who are at risk of parental relinquishment.</p> <p>House maintains 2016-17 level funding for 20 beds.</p> <p>c. Senate provides \$2,500,000 in General Revenue in fiscal year 2018 to establish a one-time grant program for local mental health authorities (LMHAs) to expand targeted case management and rehabilitative services for high-needs children in the foster care system.</p> <p>See also Senate Rider 199, page II-98.</p>
D.2.3 COMMUNITY MENTAL HEALTH CRISIS SVCS	\$ 257,930,552	\$ 362,930,552	\$ 105,000,000	<p>See also Highlights of Behavioral Health Related Decisions.</p> <p>a. House provides \$105,000,000 in General Revenue related to increasing access to behavioral health and substance abuse services, contingent on the enactment of House Bill 10, House Bill 12, House Bill 13, and House Bill 1486.</p> <p>See also House Rider 187, page II-98, Rider 188, page II-98, Rider 189, page II-98, and Rider 190, page II-98.</p> <p>See also Highlights of Behavioral Health Related Decisions.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
D.2.4 SUBSTANCE ABUSE PREV/INTERV/TREAT	\$ 380,964,789	\$ 380,160,933	\$ 803,856	<p>Senate provides an increase of \$803,856 in General Revenue for health care services, products, and community-based activities to reduce the incidence, severity, and costs associated with neonatal abstinence syndrome.</p> <p>House maintains 2016-17 level funding for the same purpose.</p> <p>See also Highlights of Behavioral Health Related Decisions.</p>
F.1.1 GUARDIANSHIP	\$ 18,414,613	\$ 17,644,550	\$ 770,063	<p>Senate provides an increase of \$1,118,725 in General Revenue for the 2018-19 biennium and an additional 4.0 FTEs in each fiscal year of the 2018-19 biennium to provide additional legal support for Guardianship program.</p> <p>House provides an increase of \$348,662 in General Revenue for the 2018-19 biennium for the Guardianship program.</p>
F.2.1 INDEPENDENT LIVING SERVICES	\$ 29,370,940	\$ 28,113,404	\$ 1,257,536	See Cross-Strategy Issue #2.
F.2.2 BEST PROGRAM	\$ 875,052	\$ 787,526	\$ 87,526	See Cross-Strategy Issue #2.
F.2.3 COMPREHENSIVE REHABILITATION (CRS)	\$ 48,271,055	\$ 47,810,992	\$ 460,063	See Cross-Strategy Issue #2.
F.2.4 DEAF AND HARD OF HEARING SERVICES	\$ 11,538,694	\$ 9,320,296	\$ 2,218,398	See Cross-Strategy Issue #2.
F.3.1 FAMILY VIOLENCE SERVICES	\$ 56,725,756	\$ 57,725,756	\$ 1,000,000	<p>Senate maintains 2016-17 level funding for the Family Violence program.</p> <p>House provides an increase of \$1,000,000 in General Revenue for the Family Violence program to provide enhanced legal and mental health services to survivors currently served in the program.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
F.3.2 CHILD ADVOCACY PROGRAMS	\$ 52,647,006	\$ 56,647,006	\$ 4,000,000	<p>Senate maintains 2016-17 level funding for Court Appointed Special Advocates (CASA) and Child Advocacy Centers (CAC).</p> <p>House provides an increase of \$4,000,000 in General Revenue for CASAs and CACs to increase capacity for children served and volunteer supports. The House 2018-19 total for CASA programs is \$27,949,000, a \$2,000,000 increase above 2016-17 spending levels. The House 2018-19 total for CAC programs is \$28,698,006, a \$2,000,000 increase above 2016-17 spending levels.</p>
F.3.3 ADDITIONAL ADVOCACY PROGRAMS	\$ 1,938,605	\$ 9,157,417	\$ 7,218,812	<p>a. Senate reduces \$4,223,886 in All Funds for the 2018-19 biennium and 25.9 FTEs in each fiscal year, eliminating funding for the Center for the Elimination of Disproportionality and Disparities. The annual split is: 2018: \$394,037 in General Revenue, \$629,476 in Federal Funds, \$1,093,295 in Other Funds, and a reduction of 25.9 FTEs. 2019: \$384,573 in General Revenue, \$629,210 in Federal Funds, \$1,093,295 in Other Funds, and a reduction of 25.9 FTEs.</p> <p>b. House includes \$2,994,926 in General Revenue to establish a grant program designed to assist victims of trafficking, which is new funding for the 2018-19 biennium.</p>
G.1.1 STATE SUPPORTED LIVING CENTERS	\$ 1,327,865,640	\$ 1,316,112,345	\$ 11,753,295	<p>a. See Cross-Strategy Issue #1.</p> <p>b. House provides an FTE cap of 13,591.0 FTEs in fiscal year 2018, 676.0 FTEs more than the Senate.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
G.2.1 MENTAL HEALTH STATE HOSPITALS / ARTICLE IX SECTION 17.13	\$ 874,580,550	\$ 884,456,230	\$ 9,875,680	<ul style="list-style-type: none"> a. Senate provides \$3,044,180 in General Revenue and \$6,088,360 in capital budget authority to maintain the Avatar electronic health record system at the mental health state hospitals. b. Senate provides \$24,800,000 in General Revenue to maintain fiscal year 2017 mental health state hospital service levels. c. Senate provides \$10,280,142 in General Revenue for the 2018-19 biennium and an additional 121.0 FTEs in each fiscal year of the 2018-19 biennium to increase maximum security bed capacity at North Texas State Hospital - Vernon Campus by 24 beds. d. Senate provides \$2,000,000 in General Revenue to upgrade the hospital video conferencing system to support the provision of telemedicine services.
G.2.2 MENTAL HEALTH COMMUNITY HOSPITALS	\$ 223,097,364	\$ 209,943,241	\$ 13,154,123	<ul style="list-style-type: none"> e. House provides \$50,000,000 from the Economic Stabilization Fund for increased forensic bed capacity at the state hospitals. See also Highlights of Behavioral Health Related Decisions. a. Senate provides \$3,154,123 in General Revenue to increase contracted rates for community and private psychiatric hospital beds. See also Senate Rider 197, page II-98. b. Senate provides \$10,000,000 in General Revenue to maintain level funding for fiscal year 2017 purchased psychiatric hospital beds. See also Highlights of Behavioral Health Related Decisions.
G.4.2 FACILITY CAPITAL REPAIRS & RENOV / ARTICLE IX SECTION 17.13	\$ 13,910,163	\$ 202,519,426	\$ 188,609,263	<p>House provides \$188,609,263 from the Economic Stabilization Fund for critical life and safety needs at the state hospitals and the State Supported Living Centers.</p> <p>House reduces \$4,542,844 in General Revenue in the Health and Human Services Commission (HHSC) bill pattern related to deferred maintenance at HHSC facilities and replaces it with the same amount from the Economic Stabilization Fund.</p> <p>See also Article IX, House page IX-84.</p> <p>See also Highlights of Behavioral Health Related Decisions.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
I.2.1 LONG-TERM CARE INTAKE & ACCESS	\$ 557,784,146	\$ 557,784,146	\$ -	Senate provides an additional 2.4 FTEs to support an additional 276 Home and Community-based waiver slots for foster children aging out of the foster care system. Funding associated with this item is reflected in Goal A, Medicaid Client Services. The annual split for the FTEs is: 2018: 0.8 FTEs 2019: 2.4 FTEs
K.1.1 CLIENT AND PROVIDER ACCOUNTABILITY	\$ 128,749,218	\$ 124,381,697	\$ 4,367,521	<p>a. Senate provides an increase of \$4,367,521 in All Funds for the Office of Inspector General including \$1,250,000 in General Revenue, \$3,750,000 in Federal Funds, and \$10,000,000 in capital budget authority to support a new procurement for the Medicaid Fraud and Detection System (MFADS) and \$1,250,000 in General Revenue, \$1,250,000 in Federal Funds, and \$5,000,000 in capital budget authority to support the design, development, and implementation of a new integrated case management system.</p> <p>b. House maintains 2016-17 level funding for the Office of Inspector General including \$3,132,479 in General Revenue with rider requiring the IG to recover the same amount in the 2018-19 biennium.</p> <p>See also House Rider 199, page II-100.</p>
L.1.1 HHS SYSTEM SUPPORTS	\$ 207,998,806	\$ 206,450,275	\$ 1,548,531	<p>a. See Cross-Strategy Issue #1.</p> <p>b. Senate provides \$1,250,000 in General Revenue and an additional 4.0 FTEs for additional legal assistance through an interagency contract with the Office of the Attorney General regarding the Steward v. Abbott lawsuit.</p> <p>House does not include funding for this purpose.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
L.1.2 IT OVERSIGHT & PROGRAM SUPPORT	\$ 406,229,743	\$ 406,218,343	\$ 11,400	<p>a. See Cross-Strategy Issue #1.</p> <p>b. Senate provides capital budget authority of \$7,146,845 for the Social Security Number Removal Initiative. No additional funding provided.</p>
M.1.1 TEXAS CIVIL COMMITMENT OFFICE	\$ 33,360,483	\$ 33,086,545	\$ 273,938	<p>a. Senate provides \$834,938 in General Revenue to support offsite medical care for sexually violent predators (SVPs) civilly committed to the Texas Civil Commitment Center (TCCC).</p> <p>b. House provides \$561,000 in General Revenue in fiscal year 2018 to provide Hepatitis C treatment for SVPs committed to the TCCC.</p> <p>See also House Rider 184, page II-97.</p>
Hospital Uncompensated Care.	II-47, Rider 10 Rider Packet, page II-25	II-47, Rider 10 Rider Packet, page II-25		House requires HHSC to include in its report an assessment of which funding streams that offset uncompensated care might be redirected.
Health and Human Services Cost Containment. / Medicaid Funding Reduction and Cost Containment.	II-54, Rider 36 Rider Packet, page II-25	II-53, Rider 36 Rider Packet, page II-25		<p>Senate directs HHSC to achieve savings of \$410.0 million in General Revenue and \$590.0 million in Federal Funds.</p> <p>Senate requires an analysis to be provided of initiatives determined not to be cost-effective. HHSC may also achieve these savings through initiatives identified in Rider 178, Managed Care Risk Margin, Rider 182, Managed Care Contract Procurement, Rider 196, Contingency for Senate Bill 1787, and Rider 192, Prescription Drug Savings.</p> <p>House directs HHSC to achieve savings of \$110.8 million in General Revenue and \$133.0 million in Federal Funds.</p> <p>Senate includes nine initiatives, while House includes 16.</p>
Healthy Community Collaboratives.	II-56, Rider 48 Rider Packet, page II-27	II-57, Rider 49 Rider Packet, page II-27		House permits \$10.0 million of the \$25.0 million available to be allocated to rural areas.
Mental Health Peer Support Re-entry Pilot.	II-57, Rider 49 Rider Packet, page II-28	II-57, Rider 50 Rider Packet, page II-28		<p>Senate allocates \$1.0 million for a mental health peer support re-entry program.</p> <p>House allocates \$5.0 million for a mental health peer support re-entry program and to improve statewide capacity for peer certification. House requires a report due December 1, 2018.</p>

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Sharing of Non-Individually Identifiable Health Information.		II-58, Rider 51 Rider Packet, page II-28		House requires HHSC to collaborate with a third-party entity to improve the efficiency of behavioral health care delivery.
Breast and Cervical Cancer Services Program: Providers.	II-58, Rider 53 Rider Packet, page II-29	II-59, Rider 57 Rider Packet, page II-29		House identifies conditions in which a provider may be deemed eligible to be reimbursed for services provided.
Increased Access to Community Mental Health Services.		II-58, Rider 53 Rider Packet, page II-29		House directs HHSC to allocate \$62.2 million in General Revenue to eliminate the adult mental health waiting list and \$0.5 million in General Revenue to eliminate the children mental health waiting list, and directs any funds that cannot be used for this purpose to be used to increase equity for Local Mental Health Authorities with below average per capita funding levels.
Integrated Care Study for Veterans with Post-Traumatic Stress Disorder.		II-58, Rider 54 Rider Packet, page II-30		House requires a study with UT Health Science Center at Houston, on the benefits of providing integrated care to veterans with post-traumatic stress disorder.
Women's Health Programs: Savings and Performance Reporting.	II-58, Rider 56 Rider Packet, page II-30	II-59, Rider 60 Rider Packet, page II-30		Senate requires an annual report; reporting of certain data for the two prior fiscal years.
				House requires a bi-annual report; reporting of certain data for each fiscal year since 2011; reporting of total number of unduplicated patients served, by provider; reporting of specific and complete procedure code data.
Prohibition on Abortions: Healthy Texas Women Program and Family Planning Program.	II-59, Rider 58 Rider Packet, page II-31	II-60, Rider 62 Rider Packet, page II-31		House includes "marketing" in the description of indirect costs that may not be paid with appropriated funds.
Limitation on Federal Funds Appropriations for Early Childhood Intervention Services.	II-61, Rider 68 Rider Packet, page II-32	II-62, Rider 72 Rider Packet, page II-32		House provides authority for HHSC to carry forward up to \$19.7 million in IDEA Part C Federal Funds from fiscal year 2017 to fiscal year 2018, contingent upon certain requirements being met.
Children with Special Health Care Needs (CSHCN).	II-62, Rider 73 Rider Packet, page II-33	II-63, Rider 77 Rider Packet, page II-33		Senate requires the annual reporting to include persons who are on the program's waitlist.
Funding for Child Advocacy Center Programs and Court Appointed Special Advocate Programs.	II-64, Rider 84 Rider Packet, page II-34	II-66, Rider 88 Rider Packet, page II-34		House provides unexpended balance authority from fiscal year 2018 to fiscal year 2019 for CAC and CASA grants.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
State Supported Living Center Oversight.	II-65, Rider 89 Rider Packet, page II-35	II-67, Rider 93 Rider Packet, page II-35		Senate requires a staffing report on an annual basis. House requires the report quarterly.
Revolving Fund Services: Canteen Services and Sheltered Workshops.	II-72, Rider 115 Rider Packet, page II-38	II-74, Rider 119 Rider Packet, page II-38		Senate appropriates revenues generated by canteen services and sheltered workshops to the programs subject to certain limitations.
Transfers: Authority and Limitations.	II-80, Rider 130 Rider Packet, page II-39	II-82, Rider 134 Rider Packet, page II-39		Senate refers to additional transfer provisions listed in the General Appropriations Act.
The Center for Elimination of Disproportionality and Disparities.		II-92, Rider 163 Rider Packet, page II-43		House requires the Center for Elimination of Disproportionality and Disparities provide advice and recommend policies for the Health and Human Services System that address disproportionality and disparities and submit a status report.
Medicaid Provider Enrollment Portal.	II-95, Rider 176 Rider Packet, page II-43			Senate requires HHSC to submit a plan to establish a centralized Medicaid provider enrollment portal. Contingent upon written approval from the Legislative Budget Board (LBB) and the Governor, HHSC is required to implement the plan and would be provided \$30.1 million in All Funds in additional capital budget authority in fiscal year 2019.
Federal Flexibility.	II-95, Rider 177 Rider Packet, page II-44	II-97, Rider 185 Rider Packet, page II-44		Senate requires HHSC to pursue flexibility from the federal government to waive, exempt, or delay requirements that impose a significant financial burden to the state. House identifies a reduction of \$1.0 billion in General Revenue and \$1.4 billion in Federal Funds in Goal A, Medicaid Client Services, and requires HHSC to reduce the cost of Medicaid services without impacting access to care.
Managed Care Risk Margin.	II-95, Rider 178 Rider Packet, page II-44			Senate identifies a reduction of \$105.3 million in General Revenue and \$146.6 million in Federal Funds in Goal A, Medicaid Client Services, and \$0.8 million in General Revenue and \$10.1 million in Federal Funds in Goal C, CHIP Client Services, associated with a reduction in the risk margin component of managed care premiums.
Data Analysis Unit Reporting.	II-95, Rider 179 Rider Packet, page II-45			Senate requires HHSC to report quarterly on findings of the Data Analysis Unit to the LBB and the Office of the Inspector General.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Managed Care Administrative Expenditure Audit.	II-95, Rider 180 Rider Packet, page II-45			Senate requires HHSC to conduct an audit on administrative expenditures made by managed care organizations and submit a report on the findings to the LBB.
Evaluation of Managed Care Rate Setting.	II-95, Rider 181 Rider Packet, page II-45			Senate requires HHSC to study Medicaid managed care rate setting processes and submit a report on the findings to the LBB.
Medicaid Medical Transportation.		II-96, Rider 181 Rider Packet, page II-46		House requires HHSC to develop a corrective action plan if unmet transportation needs exceed certain levels and requires HHSC to report annually on the average cost per trip provided through the program.
Evaluation of Rural Hospital Funding Initiatives.		II-96, Rider 182 Rider Packet, page II-46		House requires HHSC to evaluate and report on Medicaid funding initiatives for rural inpatient and outpatient hospital services.
Managed Care Contract Procurement.	II-95, Rider 182 Rider Packet, page II-47			Senate requires HHSC to evaluate its current managed care procurement process; procure for multiple managed care programs; and pursue a competitive bidding process for managed care contracts in accordance with applicable statute.
Lock-In for Controlled Substances.	II-96, Rider 183 Rider Packet, page II-47			Senate requires the Office of the Inspector General to collaborate with managed care organizations to expand appropriate use of a lock-in program for controlled substances.
Medicaid Care Coordination.		II-97, Rider 183 Rider Packet, page II-47		House requires HHSC to implement and report on initiatives to increase utilization of care coordination benefits for certain target population groups of Medicaid members.
Texas Civil Commitment Office Healthcare Costs.		II-97, Rider 184 Rider Packet, page II-48		House requires the Texas Civil Commitment Office to use \$0.6 million to pay for offsite healthcare costs that exceed the contracted amount for Texas Civil Commitment Center, and to submit a quarterly report on healthcare costs.
Funding for Healthy Texas Women Program.	II-96, Rider 184 Rider Packet, page II-49			Senate directs HHSC to seek approval for federal matching funds for the Healthy Texas Women program and requires HHSC to seek direction from the LBB in the event the federal matching funds do not become available.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Graduate Medical Education.	II-96, Rider 185 Rider Packet, page II-49			Senate requires HHSC to coordinate with the Higher Education Coordinating Board to enhance funding for Graduate Medical Education through the Medicaid program and provide a report with recommendations to the LBB, the Governor, and certain legislative committees.
Lifespan Respite Care Program.	II-96, Rider 186 Rider Packet, page II-50			Senate identifies \$0.5 million in General Revenue for the Texas Lifespan Respite program and requires HHSC to ensure continuity of service from the 2016-17 biennium.
Program of All-inclusive Care for the Elderly (PACE).		II-97, Rider 186 Rider Packet, page II-50		House permits HHSC to transfer funding to expand PACE, contingent upon certain requirements being met.
Contingency for HB 10.		II-98, Rider 187 Rider Packet, page II-51		House directs HHSC to utilize funds appropriated to allocate no more than 2.0 FTEs to create an Ombudsman for behavioral health access to care, contingent on the enactment of House Bill 10.
Maternal and Neonatal Health.	II-96, Rider 187 Rider Packet, page II-52			Senate directs HHSC to review options for and submit a report on efforts taken to decrease neonatal intensive care unit costs, increase prevention and reduce incidence of neonatal abstinence syndrome, and reduce maternal mortality.
Coordination of Medicaid Dental and Medicaid Services.	II-96, Rider 188 Rider Packet, page II-52			Senate directs HHSC to review coordination of services between dental maintenance organizations and managed care organizations.
Contingency for HB 12.		II-98, Rider 188 Rider Packet, page II-53		House directs \$50.0 million in General Revenue to be used to establish and administer certain mental health jail diversion grant programs, contingent on the enactment of House Bill 12.
Contingency for HB 13.		II-98, Rider 189 Rider Packet, page II-53		House directs \$50.0 million in General Revenue to be used to establish a matching grant program to support community mental health programs, contingent on the enactment of House Bill 13.
Coordination of Services.	II-96, Rider 189 Rider Packet, page II-53			Senate requires HHSC to review the coordination of services for children receiving Medicaid therapy services and educational need services that are billable to Medicaid. A report would be provided by HHSC to the LBB.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Office of Inspector General: Managed Care Organization Performance, Reporting Requirement.	II-97, Rider 190 Rider Packet, page II-54			Senate requires the Office of the Inspector General to collaborate with managed care organizations to develop cost avoidance and waste prevention measures for managed care organizations and submit a report with recommendations to the LBB and the Governor.
Contingency for HB 1486.		II-98, Rider 190 Rider Packet, page II-54		House directs \$5.0 million in General Revenue to be used to develop a strategy to define certification standards for peer specialists and enhance the peer specialist training infrastructure statewide, contingent on the enactment of House Bill 1486. NOTE: the fiscal note for HB 1486 shows an estimated cost to General Revenue Related funds of \$1.5 million for the 2018-19 biennium.
Increase Consumer Directed Services.		II-98, Rider 191 Rider Packet, page II-55		House directs HHSC to seek to increase the percentage of clients choosing consumer directed services in the STAR+PLUS community-based waiver programs.
Office of the Inspector General: Special Investigation Unit Guidance, Reporting Requirement.	II-97, Rider 191 Rider Packet, page II-55			Senate requires the Office of the Inspector General to collaborate with HHSC and managed care organizations to develop guidelines for special investigation units. A report would be provided by HHSC to the LBB and the Governor.
Prescription Drug Savings.	II-97, Rider 192 Rider Packet, page II-56			Senate identifies a reduction of \$35.5 million in General Revenue and \$85.3 million in Federal Funds in fiscal year 2019 in Strategy A.1.6, Medicaid Prescription Drugs, as a result of certain prescription drug coverage requirements no longer applying. Additionally, Senate maintains certain patient protections, contingent on the enactment of Senate Bill 1922.
Genetic Testing to Determine Treatment Plan for Psychotropic Medications.		II-99, Rider 192 Rider Packet, page II-56		House directs HHSC to evaluate the effectiveness of genetic testing in creating a more cost-effective and efficient psychotropic regimen, and to submit a report on findings.
Contingency for SB 1208.	II-97, Rider 193 Rider Packet, page II-57			Senate provides an unspecified amount of funding for HHSC to develop additional licensing types, contingent on the enactment of Senate Bill 1208. NOTE: The fiscal note for SB 1208 shows an estimated cost to General Revenue of \$2.4 million for the 2018-19 biennium.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Review of Certain Medicaid Dental Services.		II-99, Rider 193 Rider Packet, page II-57		House directs HHSC to conduct a study of dental services provided to adults with disabilities through Medicaid. A report would be provided by HHSC to the LBB, the Governor, and certain members of the Legislature.
Reporting of Postpartum Depression Data.		II-99, Rider 194 Rider Packet, page II-58		House directs HHSC to report Medicaid, CHIP, Emergency Medicaid, CHIP-Perinatal, Healthy Texas Women program, and Family Planning program data specific to postpartum depression. A report would be provided by HHSC to the LBB, the Texas Maternal Mortality and Morbidity Task Force, and certain legislative committees.
Cost Neutral ICF to HCS Conversions. / Evaluation of Intermediate Care Facility Conversion.	II-97, Rider 195 Rider Packet, page II-58	II-102, Rider 210 Rider Packet, page II-58		Senate provides direction on the conversion of six-bed intermediate care facilities (ICFs) to Home and Community-based Services (HCS) waiver placements. House directs HHSC to submit a report on the cost effectiveness of converting ICFs to HSC waiver placements.
Family Planning Outreach.		II-99, Rider 195 Rider Packet, page II-59		House directs HHSC to consider providing targeted outreach to certain women regarding the availability of family planning services.
Substance Abuse Funding for Guardians of Children at Risk of Entering Child Protective Services.		II-99, Rider 196 Rider Packet, page II-59		House directs HHSC to prioritize funding for prevention, intervention, and treatment of substance abuse disorders for guardians of children who are at risk of entering the Child Protective Services system.
Contingency for Senate Bill 1787.	II-98, Rider 196 Rider Packet, page II-59			Senate identifies a reduction of \$8.4 million in General Revenue and \$11.1 million in Federal Funds in each fiscal year of the 2018-19 biennium in Medicaid Client Services contingent on passage of SB 1787 related to fraud, waste, and abuse investigations by the Office of Inspector General.
Purchased Psychiatric Hospital Beds.	II-98, Rider 197 Rider Packet, page II-60			Senate directs HHSC to expend \$3.2 million in General Revenue in each fiscal year of the 2018-19 biennium in Strategy G.2.2, Mental Health Community Hospitals, for increased daily rates for purchased community and private psychiatric beds.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Contingency for Senate Bill 292.	II-98, Rider 198 Rider Packet, page II-60			Senate provides an unspecified amount in General Revenue in each fiscal year of the 2018-19 biennium in Strategy D.2.3, Community Mental Health Crisis Services, contingent on passage of SB 292 related to reducing recidivism, arrest, and incarceration of individual with mental illness. NOTE: The fiscal note for SB 292 shows an estimated cost to General Revenue of \$9.4 million in each fiscal year of the 2018-19 biennium.
Clear Process for Including Prescription Drugs on the Texas Drug Code Index.		II-100, Rider 198 Rider Packet, page II-60		House directs HHSC to establish and make public a process for inclusion of prescription drugs in the Medicaid and CHIP programs. A report on the process would be provided by HHSC to the LBB and the Governor by December 1, 2017.
Office of Inspector General Accountability Rider.		II-100, Rider 199 Rider Packet, page II-61		House identifies \$3.1 million in General Revenue to require the Office of the Inspector General to recover the same amount in the 2018-19 biennium and to provide quarterly reports on how the funds are being used to address fraud, waste, and abuse in the health and human services system.
Medicaid Services Capacity for High-Needs Children in the Foster Care System.	II-98, Rider 199 Rider Packet, page II-61			Senate directs HHSC to expend \$2.5 million in General Revenue in fiscal year 2018 in Strategy D.2.2, Community Mental Health Services-Children, to collaborate with DFPS and establish a statewide grant program to increase access to targeted case management and rehabilitative services. HHSC and DFPS may establish the grant program no later than November 1, 2017.
Contingency for Senate Bill 267.	II-98, Rider 200 Rider Packet, page II-62			Senate appropriates \$5.0 million in General Revenue-Dedicated Hospital Perpetual Care Account in fiscal year 2018 contingent on passage of SB 267 related to licensing and regulation of hospitals in Texas.
Postpartum Depression Services.		II-100, Rider 200 Rider Packet, page II-63		House directs HHSC to pursue federal funds for screening and treatment of postpartum depression pursuant to the 21st Century Cures Act.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Mental Health Program for Veterans.	II-99, Rider 201 Rider Packet, page II-63			Senate directs HHSC to allocate \$5.0 million in General Revenue in each fiscal year of the 2018-19 biennium in Strategy D.2.1, Community Mental Health Service for Adults, to expand access to licensed mental health professionals for volunteer coordinators and peers. A report would be provided by HHSC to the Legislature and Governor's office by December 1 of each year. NOTE: Rider requires revision to refer to Health and Safety Code Sec. 1001.221-224.
Contingency for House Bill 1622.		II-100, Rider 201 Rider Packet, page II-63		House identifies \$7.5 million in General Revenue in each fiscal year of the 2018-19 biennium in Goal A, Medicaid Client Services, contingent on passage of HB 1622 related to providing a personal needs allowance to certain residents of long-term care facilities. NOTE: The fiscal note for HB 1622 shows an estimated cost to General Revenue Related Funds of \$6.4 million each fiscal year of the 2018-19 biennium.
Managed Care Organization Services for Individuals with Serious Mental Illness.	II-99, Rider 202 Rider Packet, page II-64	II-103, Rider 219 Rider Packet, page II-64		Senate directs HHSC to allocate funds in Strategy B.1.1, Medicaid Contracts and Administration, to develop performance metrics for managed care companies related to care provided to individuals with serious mental illness and HHSC may procure a separate managed care program in at least one services area for serving individuals with serious mental illness. House directs HHSC to allocate funds in Goal A, Medicaid Client Services, to develop performance metrics for managed care companies related to care provided to individuals with serious mental illness and HHSC may procure a separate managed care program in at least one services area for serving individuals with serious mental illness. HHSC would be required to seek approval from the LBB prior to expending funds to develop the performance metrics or procure a separate managed care program.
Community Integration Performance Indicators.		II-100, Rider 202 Rider Packet, page II-65		House directs HHSC to allocate funds in Strategy B.1.1, Medicaid Contracts & Administration, to develop measures of community integration outcomes and publish data related to the measures on their website on an annual basis.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
State Hospital Workforce.	II-99, Rider 203 Rider Packet, page II-65			Senate directs HHSC to allocate funds in Strategy G.2.1, Mental Health State Hospitals, to study the workforce at the ten state hospitals and provide recommendations to reduce turnover and vacancy rates to the LBB and the Governor by August 31, 2018.
Prioritization of Behavioral Health Treatment for Pregnant Women.		II-100, Rider 203 Rider Packet, page II-66		House directs HHSC to allocate funds in several strategies to educate and inform the public that pregnant women with dependent children are a priority population of the federal Substance Abuse Prevention and Treatment Block Grant and Mental Health Block Grant.
Ensure Network Adequacy.		II-100, Rider 204 Rider Packet, page II-66		House directs HHSC to allocate funds in Strategy B.1.1, Medicaid Contracts & Administration, to ensure managed care organizations maintain an adequate network of providers, especially with respect to community attendants.
Rural Texas Jail Diversion Pilot Programs.	II-99, Rider 204 Rider Packet, page II-66			Senate directs HHSC to allocate an unspecified amount in General Revenue in each fiscal year of the 2018-19 biennium in Strategy D.2.3, Community Mental Health Crisis Services, to establish rural mental health jail diversion programs. The programs may be implemented with LMHAs, contingent on the LMHA providing local matching funds.
Rusk State Hospital / State Hospital Contracting for Physician and Professional Services.	II-99, Rider 205 Rider Packet, page II-67	II-100, Rider 197 Rider Packet, page II-67		Senate authorizes HHSC to allocate funds in Strategy G.2.1, Mental Health State Hospitals, to enter into a contract with UT-Health Science Center at Tyler to provide services at the Rusk State Hospital. House authorizes HHSC to allocate funds in Strategy G.2.1, Mental Health States Hospitals, to enter into contracts with state universities provide services at the state hospitals.
Access to Long-Acting Reversible Contraception Strategic Plan.		II-101, Rider 205 Rider Packet, page II-67		House directs HHSC to allocate funds in Strategy L.1.1, HHS System Supports, to develop a five-year strategic plan to reduce barriers to accessing long-acting reversible contraception.
Auto-Enrollment in the Healthy Texas Women Program.		II-101, Rider 206 Rider Packet, page II-68		House directs HHSC to allocate funds in all strategies in Goal B, Medicaid & CHIP Support, to prepare a report on the cost-effectiveness and projected savings of automatically enrolling certain female clients into the Health Texas Women Program and provide the report no later than July 1, 2018.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Austin State Hospital.	II-99, Rider 206 Rider Packet, page II-68			Senate clarifies that no provision of the General Appropriations Act should be construed to limit HHSC's ability to enter into a lease or other agreement for use of land owned and operated as the Austin State Hospital.
Update Medical Education Add-on for Urban Teaching Hospitals.	II-99, Rider 207 Rider Packet, page II-68			Senate directs HHSC to calculate the medical education add-on using the most recent indirect medical education adjustment factor finalized by the Centers for Medicare and Medicaid Services.
Funding for Mental Health Programs.		II-101, Rider 207 Rider Packet, page II-69		House identifies funding included in Strategies D.2.1, Community Mental Health Services for Adults, and D.2.2, Community Mental Health Services for Children, to continue funding for recovery-focused clubhouses (\$1.7 million GR) and relinquishment prevention slots (\$4.9 million GR), at fiscal year 2017 service levels.
Funding for the Blind Children's Vocational Discovery and Development Program.	II-100, Rider 208 Rider Packet, page II-69			Senate identifies funding (\$1.2 million GR) included in Strategy D.1.5, Children's Blindness Services, to provide Blind Children's Vocational Discovery and Development Program services for children 10 to 13 years of age.
Medicaid Therapy Services Reporting.		II-101, Rider 208 Rider Packet, page II-69		House requires quarterly reporting of certain information related to acute care therapy services.
State Hospital Planning.	II-100, Rider 209 Rider Packet, page II-70			Contingent upon appropriations for repair or replacement of state hospitals per Article IX, Sec. 17.10, Senate permits HHSC to partner with entities to develop a master plan for the design of neuropsychiatric health care delivery systems in the area served by each facility.
Adjustment of Therapy Rate Reductions.		II-102, Rider 211 Rider Packet, page II-71		House identifies funding included in Goal A, Medicaid Client Services, totaling \$118.8 million in All Funds to restore approximately one-half of the reductions made to acute care therapy rate reductions during the 2016-17 biennium. House directs HHSC to allocate funding to preserve access to care, and to ensure funds are reflected in reimbursement rates.
				NOTE: Rider requires an adjustment to conform with House funding decision.
Nonemergency Medical Transportation Program Efficiencies.		II-102, Rider 212 Rider Packet, page II-71		House directs HHSC to work with contracted medical transportation organizations to improve efficiencies and outcomes.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Additional Funds for Reimbursement Rates for Medicaid Acute Care Therapy Services.		II-102, Rider 213 Rider Packet, page II-72		House appropriates \$21.5 million GR to reverse the reductions made to reimbursement rates for acute care therapy services during the 2016-17 biennium, and directs the funding to be allocated as specified by House Rider 211, Adjustment of Therapy Rate Reductions.
Assistance Program for Domestic Victims of Trafficking.		II-102, Rider 214 Rider Packet, page II-72		House identifies funding (\$3.0 million GR) included in Strategy F.3.3, Additional Advocacy Programs, to establish a grant program for domestic victims of trafficking.
Unallocated Funding Under the Delivery System Reform Incentive Payments (DSRIP) Program.		II-102, Rider 215 Rider Packet, page II-72		House directs HHSC to permit state funding allocated to North Texas Behavioral Health Authority and the LMHA serving Collin County (Lifepath) to be used by those local authorities or other intergovernmental transfer providers, to obtain unallocated federal funds through the DSRIP program to provide services in certain counties.
Study on Abuse in and Violations by Nursing Homes.		II-103, Rider 216 Rider Packet, page II-73		House directs HHSC to conduct a study (with LBB) on abuse occurring in and violations of any law by licensed nursing homes receiving funds from HHSC. The report would be submitted to the Executive Commissioner.
Study Relating to Enhanced Criminal Background Check Standards for Certain Health and Human Services Commission Contractors.		II-103, Rider 217 Rider Packet, page II-73		House directs HHSC to conduct a study (with LBB) on the feasibility of developing enhanced criminal background check standards for individuals who work with children and the elderly as an employee of an entity that contracts with HHSC. The report would be submitted to the Executive Commissioner.
Cost Savings in Prescription Drug Benefit Administration in Medicaid, CHIP, and Other Health-Related Services.		II-103, Rider 218 Rider Packet, page II-56		House directs HHSC to achieve a savings of \$300.0 million in prescription drug benefit administration in the Medicaid, CHIP, Women's Health, CSHCN, and Kidney Health Care programs.
Electronic Visit Verification Administrative Simplification.		II-104, Rider 220 Rider Packet, page II-74		House directs HHSC to identify areas where it can maximize current investments in technology to increase operational efficiencies and generate cost savings/avoidance. HHSC shall identify strategies to streamline administrative requirements on providers using Electronic Visit Verification. A report on EVV shall be submitted by March 31, 2018. A report on operational efficiencies shall be submitted by December 1, 2017.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Enhanced Eligibility Screening Tools.		II-104, Rider 221 Rider Packet, page II-75		House directs HHSC to gather a sample of records from multiple program enrollment data to cross-match against death records, employment and wage records, records of lottery winnings, and other records, on a quarterly basis, to reduce fraud, waste and abuse. A report on the sample shall be provided by September 1, 2018, and based on the report, a cross match of all recipient enrollment records shall be conducted by December 1, 2018.
See Also Article IX. Part 10. Health-Related Provisions Statewide Behavioral Health Strategic Plan and Coordinated Expenditures - Article IX, Sec. 10.04	page IX-52	IX-54		a. Senate excludes Article VIII agencies from serving on the statewide behavioral health coordinating council. b. Senate requires additional reporting requirements to be included in the first annual report. See also Highlights of Behavioral Health Related Decisions.
Analysis of Certain Healthcare Data - Article IX, Sec. 10.06	page IX-55			Senate requires HHSC, Department of State Health Services, Employees Retirement System of Texas , Texas Department of Criminal Justice, and Teacher Retirement System to develop and submit a plan for an integrated health care information system.
Cross-agency Collaboration on Value-based Payment Strategies - Article IX, Sec. 10.07	page IX-56			Senate requires HHSC, Employees Retirement System of Texas , and Teacher Retirement System to collaborate and develop value-based payment strategies.
Part 17. Miscellaneous Provisions Improving State Hospital Facilities, and Other State Facility Needs - Article IX, Sec. 17.10	page IX-79			Senate includes intent to fund \$927,000,000 for the following items: a. \$780,000,000 for replacement of or significant repair projects at state hospitals and other inpatient mental health facilities; b. \$65,000,000 for immediate maintenance needs at state hospitals; c. \$80,000,000 for immediate maintenance needs at SSLCs; d. \$1,400,000 for facility needs at the Texas Center for Infectious Disease; and e. \$1,300,000 for facility needs at the Waco Center for Youth.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Appropriations for selected state agencies and programs - Article IX, Sec. 17.13		page IX-84		House provides \$243,152,106 from the Economic Stabilization Fund for the following items: a. \$188,609,263 for critical life and safety needs at state hospitals and SSLCs; b. \$50,000,000 for forensic bed capacity at state hospitals and mental health community hospitals; and c. \$4,542,843 for deferred maintenance at HHSC facilities.
Prohibition on Abortions - Article IX, Sec. 17.14 / Limitations on Abortion Funding - Article IX, Sec. 6.25	page IX-80	page IX-34		a. Senate restricts state funding from being used to reimburse elective abortion procedures, or to go towards entities that provide elective abortion procedures, that are not reimbursable under the state's Medicaid law. This item excludes services provided through the Employees Retirement System, Teacher Retirement System, Higher Education Group Insurance, Correctional Managed Health Care, and hospitals. b. House restricts state funding from being used to reimburse abortion procedures, or to go towards entities or affiliates of an entity that provide abortion procedures, that are not reimbursable under the state's Medicaid program.
See also Article XI.	page XI-2	page XI-4		

ARTICLE II, SPECIAL PROVISIONS

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Cross-Article Issue - Contract Cost Containment	II-103	II-106		
Health and Human Services Commission Department of State Health Services		II-120, Sec. 27 Rider Packet, page II-87		House reduces \$458,186,250 in General Revenue Related funds from Article II agencies for contract cost containment pursuant to Article II, Special Provisions, Sec. 27, and allocated across agencies according to Article IX, Sec. 17.10. Funds are reduced from General Revenue, except where listed below.
		\$ (450,219,750)	\$ 450,219,750	
		\$ (7,966,500)	\$ 7,966,500	House reduces \$4,673,550 in General Revenue, \$86,800 in General Revenue-Dedicated (GR-D) Vital Statistics Account No. 19, \$36,700 in GR-D Food and Drug Fee Account No. 341, \$49,300 in GR-D Bureau of Emergency Management Account No. 512, \$465,800 in GR-D Public Health Services Fee Account No. 524, \$38,050 in GR-D Commission on State Emergency Communications Account No. 5007, \$58,450 in GR-D Asbestos Removal Licensure Account No. 5017, \$3,650 in GR-D Workplace Chemicals List Account No. 5020, \$24,250 in GR-D Certificate of Mammography Systems Account No. 5021, \$5,250 in GR-D Oyster Sales Account No. 5022, \$129,300 in GR-D Food and Drug Registration Account No. 5024, \$49,700 in GR-D EMS, Trauma Facilities, Trauma Care Systems Account No. 5108, and \$2,345,700 in Trauma Facility and EMS Account No. 5111.
Sec. 17. Rate Limitations and Reporting Requirements.	\$ - II-110 Rider Packet, page II-76	II-114 Rider Packet, page II-76		a. Senate requires notification of a new or increased rate for an orphan drug at least 30 calendar days prior to expenditures for this purpose. House requires similar notification within 30 calendar days of expenditures for this purpose. b. House requires HHSC to provide immediate access to orphan drugs through fee-for-service and managed care.
Sec. 21. Limitation: Expenditure and Transfer of Public Health Medicaid Reimbursements.	II-113 Rider Packet, page II-80	II-116 Rider Packet, page II-80		Senate includes HHSC Strategy A.4.1, Non-Full Benefit Payments, as a fourth strategy to be reduced in the event of insufficient revenue to support the appropriations listed in section a.

Item	Senate 2018-19	House 2018-19	Biennial Difference	Explanation
Sec. 23. Waiver Program Cost Limits.		II-118 Rider Packet, page II-83		House includes provision that authorizes HHSC to use General Revenue funds to provide services to certain clients whose cost of care exceeds the individual cost limit of their medical assistance waiver.
Sec. 24. Nurse Home Visiting Programs.		II-119 Rider Packet, page II-85		House includes direction for HHSC to explore the feasibility and cost-effectiveness of adding nurse home visiting services as a benefit in the Medicaid program.
Sec. 25. Review and Report: Health and Human Services System and Managed Care.		II-119 Rider Packet, page II-85		House directs HHSC to review case management services in collaboration with DFPS, DSHS, and managed care organizations, and report by May 1, 2018 on opportunities to streamline services, clarify responsibility, and reduce duplicative efforts.
Sec. 26. Administrative Savings in the Health and Human Services System.		II-120 Rider Packet, page II-86		House directs HHSC to collaborate with DSHS and DFPS to review administrative functions of all three health and human services agencies, evaluate potential savings from reductions to duplicative efforts, and report by September 1, 2018 on a plan to implement changes.
Sec. 27. Contract Cost Containment.		II-120 Rider Packet, page II-87		House reduces funding for assumed savings related to contract cost containment as outlined in Article IX, Sec. 17.10. See also Cross-Article Issue above.
See also Article IX. Part 17. Miscellaneous Provisions		page IX-80		Additional provisions for the reduction in appropriations related to contracts.
See also Article XI.	See also Article XI-1	See also Article XI-3		