

One Voice Texas

A Collaborative for Health & Human Services



Alliance of Community Assistance Ministries, Inc. (ACAM)
Association for Family and Community Integrity, Inc.
Behavioral Health Alliance of Texas
Bering Omega Community Services Care for Elders
Career and Recovery Resources, Inc.
Catholic Charities of the Archdiocese of Galveston-Houston
CHILDREN AT RISK
Children's Defense Fund
Coalition for the Homeless of Houston/Harris Co., Inc.
Coalition of Behavioral Health Services
Collaborative for Children Communities In Schools
Community Family Centers
Community Health Choice, Inc.
Covenant House of Texas
DePelchin Children's Center
Depression & BiPolar Support Alliance Greater Houston (DBSA)
Easter Seals of Greater Houston, Inc.
Family Services of Greater Houston
Fort Bend Regional Council on Substance Abuse, Inc.
Good Neighbor Healthcare Center
Greater Houston Healthconnect
Harris County Healthcare Alliance
Healthcare for the Homeless-Houston
Houston Area Association for the Education of Young Children
Houston Area Community Services
Houston Area Women's Center
Houston Food Bank
Houston Methodist Hospital
IntraCare Behavioral Health
Jewish Family Service
League of Women Voters Houston
Legacy Community Health, Services Inc.
Lesbian Health Initiative
Memorial Assistance Ministries (MAM)
Memorial Hermann Healthcare System
Mental Health America of Greater Houston
NAMI Greater Houston
National Association of Social Workers-Houston
Neighborhood Centers, Inc.
New Hope Housing, Inc.
Northwest Assistance Ministries
Phoenix Houses of Texas, Inc.
Planned Parenthood Gulf Coast
Presbyterian Children's Homes and Services
Santa Maria Hostel, Inc.
SEARCH Homeless Services
Spaulding for Children
Spring Branch Community Health Center
Springfield College School of Human Services
St. Joseph House
Texas Children's Hospital
Texas Health Institute
Texas Hunger Initiative
The Arc of Greater Houston
The Council on Alcohol & Drugs Houston
The Immunization Partnership
The Living Bank
The Network of Behavioral Health Providers
The Rose
The Walk for Mental Health Awareness-Houston
The Women's Home
United Way of Greater Houston
Vita-Living, Inc.
Wesley Community Center
Worklife Institute
YMCA of Greater Houston

84th Texas Legislature Position Statements - Summary

One Voice Texas is a network of public, private and non-profit organizations in the Greater Houston area working together to ensure that the health and human services needs of all Texans are addressed in legislative, regulatory, funding and other public policy initiatives.

One Voice Texas supports the need for strong prevention and early intervention programs, and the ability to maximize federal funding for health and human services programs, so that we can --

"Keep Texas dollars working in Texas."

The membership has developed and approved policy recommendations in each of the three priority health and human services areas. This document is a summary of those recommendations and details can be found at the website: www.onevoicetexas.org.

BEHAVIORAL HEALTH

Funding and Access - At a minimum, (1) maintain current levels of funding for and access to services provided by the public behavioral healthcare system through community based treatment, crisis services, state hospitals, public school systems, and programs for justice-involved youth and adults; (2) continuation of the Texas Medicaid 1115 Transformation and Quality Improvement Waiver; (3) continuation of state funding for grants administered by the Texas Department of State Health Services for the establishment and expansion of community collaboratives to provide services to persons experiencing homelessness and mental illness; (4) continuation of state funding for the Harris County Mental Health Jail Diversion Pilot Program and other local jail diversion programs that target justice-involved individuals living with behavioral health disorders; (5) continuation and expansion of Youth Empowerment Services (YES) Waiver that provides home and community-based behavioral health services to youth who would otherwise need institutional care, such as inpatient psychiatric care, or whose parents would otherwise seek to relinquish custody to the state in order to obtain appropriate care for the youth; (6) support for initiatives that increase the number of funded beds in private residential treatment centers for children/youth with severe emotional disturbances who are at risk of parental relinquishment of custody to the state due solely to a lack of behavioral health treatment resources; (7) support for initiatives that increase access to home and community-based services for persons with behavioral health disorders who are most at risk of institutionalization or re-institutionalization; (8) support for initiatives designed to help individuals foster recovery and function as independently as possible in their communities, including peer recovery support services and treatment/support models; (9) support for initiatives that better utilize existing funds and draw down additional federal funds, place an emphasis on and expand cost-effective community-based services rather than institutionalization and/or hospitalization, oppose further cuts to Medicaid reimbursement rates, increase the number of behavioral health care professionals throughout the state, and further promote jail/prison diversion services for individuals living with behavioral health disorders; (10) support for additional opportunities to develop coverage models for low-income and vulnerable populations living with behavioral health disorders;

(11) support for initiatives that address housing and supportive services needs of individuals living with behavioral health disorders; (12) support for initiatives that provide behavioral health treatment and support services to parents/families involved with the child welfare system; and (13) support for initiatives that promote the expansion of integrated healthcare through the systematic coordination of physical and behavioral healthcare services throughout Texas.

Access to Home and Community Based Services - Require the Texas Health and Human Services Commission to establish a home and community-based services Medicaid benefit targeting persons with serious and persistent mental illness whom the department determines to be the most at-risk for institutionalization or re-institutionalization, including (1) persons who have been found incompetent to stand trial and are transitioning or have transitioned from a psychiatric facility to the community; (2) persons who have been found Not Guilty by Reason of Insanity (NGRI) and are transitioning or have transitioned from a psychiatric facility to the community; (3) persons who have been involuntarily civilly committed 3 or more times in a 2-year period; and (4) youth or adults who are experiencing a first-episode psychosis.

Permanent Supportive Housing - (1) Continuation the Texas Medicaid 1115 Transformation and Quality Improvement Waiver; (2) continuation state funding for grants administered by the Texas Department of State Health Services for the establishment and expansion of community collaboratives to provide services to persons experiencing homelessness and mental illness; (3) continuation of state funding for the Harris County Mental Health Jail Diversion Pilot Program and other local jail diversion programs that target justice-involved individuals living with behavioral health disorders; (4) support for initiatives that increase access to home and community-based services for persons with behavioral health disorders who are most at risk of institutionalization or re-institutionalization; (5) support for initiatives designed to help individuals foster recovery and function as independently as possible in their communities, including peer recovery support services and models; and (6) support for statewide initiatives that fund, create, and expand the availability of permanent supportive housing, which includes critical supportive services, for individuals living with behavioral health disorders.

Chair: Lillian Ortiz, One Voice Texas, Director of Behavioral Health Policy & Government Relations; 713.333.2242; lortiz@onevoicetexas.org

CHILDREN AND YOUTH

State Level Prevention Services – (1) Establish a Prevention and Family Strengthening (PFS) unit under the Health and Human Services Commission; (2) merge three prevention programs (recommended for move under DFPS) and two other prevention programs into one program under PFS: (HHSC’s Texas Home Visiting Program and Nurse-Family Partnership; DFPS’s Prevention and Early Intervention Unit; DSHS PPI and PADRE programs; HHSC’s and the Attorney General’s (AG) family violence prevention programs; TOPDD fetal alcohol prevention and injury prevention programs); (3) designate the following as PFS responsibilities:

- coordinating the development, funding and evaluation of this unit;
- merging IT systems to create seamless referral and communications for a coordinated service delivery system;
- developing a coordinated state strategic plan; and
- establishing coordinated intake, measurement, outcomes and data collection and analysis.

Ensure Children Achieve Permanency - Ensure the continuation and possible expansion of the CPS Court in Harris County.

Homelessness of Youth Who Age Out of Foster Care - At the beginning of the transition planning process, a housing stability plan should be developed. It should include, but not be limited to: (1) cost of housing and sources of income, benefits and/or rental assistance that can help to ensure the living arrangement is stable; (2) if the youth

plans to live with friends or family, the agreement the youth has with these individuals including but not limited to his/her length of stay, expectations regarding rent and other household obligations, knowledge of the youth's needs and identity that may conflict with household members or the type of housing they are seeking; (3) emergency shelter/housing resources so that youth can access temporary shelter and longer term housing; (4) review of a common rental application to ensure the youth has all documentation/information necessary to rent; (5) if available, the identity of a cosigner and/or references.

Protecting the Mental and Physical Health Needs of Youth - Ensure that youth who are released from juvenile facilities will be able to immediately access physical and mental healthcare while still ensuring the state is properly investing funding in eligible clients as the PE process still requires a review of the client's eligibility. Recommendations: (1) include juveniles who are released from detention under the category of presumptive eligibility (PE); (2) require those who qualify as presumptive eligibility providers to accept juvenile detention discharge papers as qualification; (3) at a minimum, presumptive eligibility services should include prescriptions, therapy and primary care physician visits. HHSC should determine any other eligible services through rule.

Protecting the Rights of Children in Foster Care - Strengthen the function and authority of the Office of Consumer Affairs (OCA) and ensure that state agency consumers, particularly children in foster care, are afforded the full rights and protections intended by the state of Texas. Recommendations: (1) Make the Office of Consumer Affairs (OCA) a truly independent office, which is defined as having control over its policy, personnel decisions and budget; (2) extend current confidentiality protections for reports of child maltreatment to cover reports to the OCA; (3) require the OCA and Child Care Licensing to develop policies regarding retaliation for reporting to the OCA, including consequences for individuals, organizations and/or agencies that engage in this behavior; (4) establish specific protocols for managing calls from children/youth in foster care; (5) support consumer knowledge of the role of the OCA by requiring an annual outreach plan; (6) strengthen the ability of the OCA to investigate and substantiate valid complaints; (7) increase the value of information the OCA receives by requiring annual reporting of data and trends to the legislature and the general public.

Strengthening the Ability of Kin to Care for Relative Children - (1) Schools should accept an affidavit from family members who are caring for relative children so that the caregivers can enroll the children in school; (2) eligible kinship caregivers should receive the \$1,000 one-time integration payment within two weeks of a child being placed in their home as opposed to the 90 to 120 day wait that is currently in CPS policy; (3) relatives can receive up to \$500 a year as reimbursement for a child's expenses. Reimbursement currently takes place on the anniversary of child's placement which leaves low-income relatives struggling to meet needs. Expense reimbursements should be made by CPS to caregivers within one month after receiving proof of expense; (4) require that Texas law offers TANF recipients who are currently caring for relative children the ability to receive good cause exemptions from certain TANF requirements if meeting the requirements will make it harder for the caregiver to become financially independent or place the recipient or children at greater risk for homelessness or entry into the foster care system; (5) waive, pursuant to a determination of good cause, program requirements including asset tests, time limits (till the child is 18) for individuals receiving assistance, residency requirements, child support cooperation requirements, and family cap provisions, in cases where compliance with such requirements would make it harder for grandparents and/or other relatives receiving assistance under this part to provide stable and safe housing and care for their relative children.

Strengthening the Ability of Stakeholders to Prevent Youth Homelessness - (1) Establish a state definition of homeless youth that mirrors the federal McKinney Vento Act; (2) direct the Texas Department of Housing and Community Affairs, Department of Family and Protective Services, and the Texas Education Agency, to conduct a study on homeless youth that will enable the state of Texas to understand the extent of the problem and what viable solutions are available.

Support for Relatives Caring for Children in Foster Care - Stable and long-term relative placements ensure more positive outcomes for children and relative supports increase opportunities for strong and stable placements.

Recommendations: (1) The court shall ensure that the difference between adoption and PMC is fully explained to the relative; (2) children for whom the courts grant PMC to a relative should be able to receive adoption benefits if they later become available for adoption, meet adoption benefit criteria, and are part of a finalized adoption; (3) DFPS and the courts should ensure kin who take PMC of a relative child should be eligible for services similar to those available in post adoption services; (4) the courts should ensure that relatives sign the final order for PMC; (5) the court should ensure final orders for PMC include, but not be limited to:

- authorization of medical, dental, psychological, surgical, immunizations and any other treatment that requires consent;
- ability to secure health and automobile insurance for the child;
- authorization to enroll child in child care or any form of school and/or extra-curricular activities including athletics and social activities;
- authorization for child to receive a learner's permit, driver's license, state issued ID;
- permission for child to obtain appropriate employment;
- authorization to receive public benefits for or on behalf of the child; and
- authorization to obtain legal services and or sign legal documents/contracts.

Chair: Dr. Katherine Barillas, One Voice Texas, Director of Child Welfare Policy; 713.333.2243; kbarillas@onevoicetexas.org

HEALTHCARE

Children's Health Insurance Program (CHIP) - Support federal reauthorization of CHIP funds.

Healthcare Coverage Models - Support models that will provide healthcare coverage to the over one million uninsured Texans who are not eligible for current healthcare options.

Immunization Registry - Increase the efficiency and reduce the cost of the state's immunization registry, ImmTrac and modify the current consent process from an opt-in to an opt-out system.

Texas Medicaid 1115 Transformation and Quality Improvement Waiver - Support policies that will preserve Texas Medicaid 1115 Transformation and Quality Improvement Waiver Projects.

Women's Healthcare – (1) Support policies that establish available, affordable, accessible, resources that enable women to assume personal responsibility for their healthcare; (2) support strategic planning for consolidation of women's health programs as recommended by HHSC Sunset staff that includes expertise from inside the agencies but also independent organizational expertise that can guide the process and serve to ensure Texas invests its money wisely.

Chair: Freddy Warner, Memorial Hermann Healthcare System, Systems Executive, Public Policy & Government Relations; 713.338.6717; Frederic.Warner@memorialhermann.org