OPEN MINDS

Texas Health & Human Services Market Profile: 2025

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Health & Human Services Market Profile Overview

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A. Executive Summary

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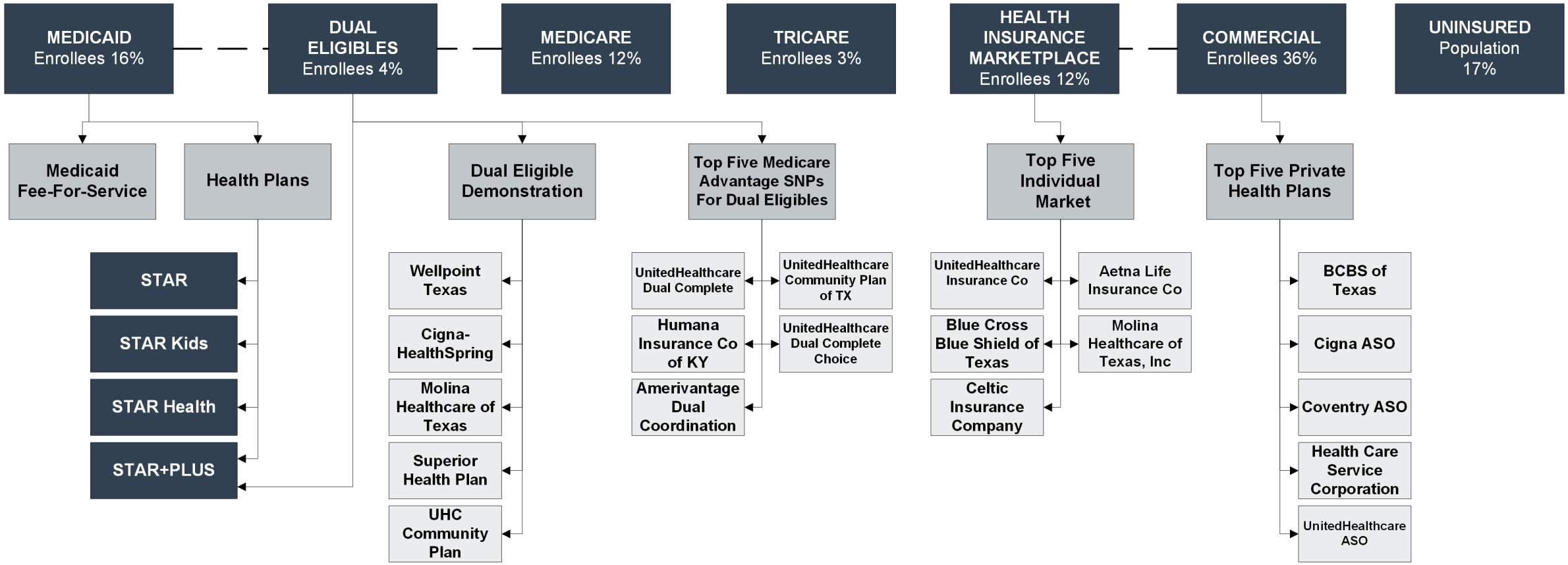
A.1. Texas Physical Health Care Coverage by Payer

Total Texas Population- 30,503,301
Estimated SMI Population- 2,440,264



"Enrollees" refers to the percentage of the state's total population enrolled with each payer.

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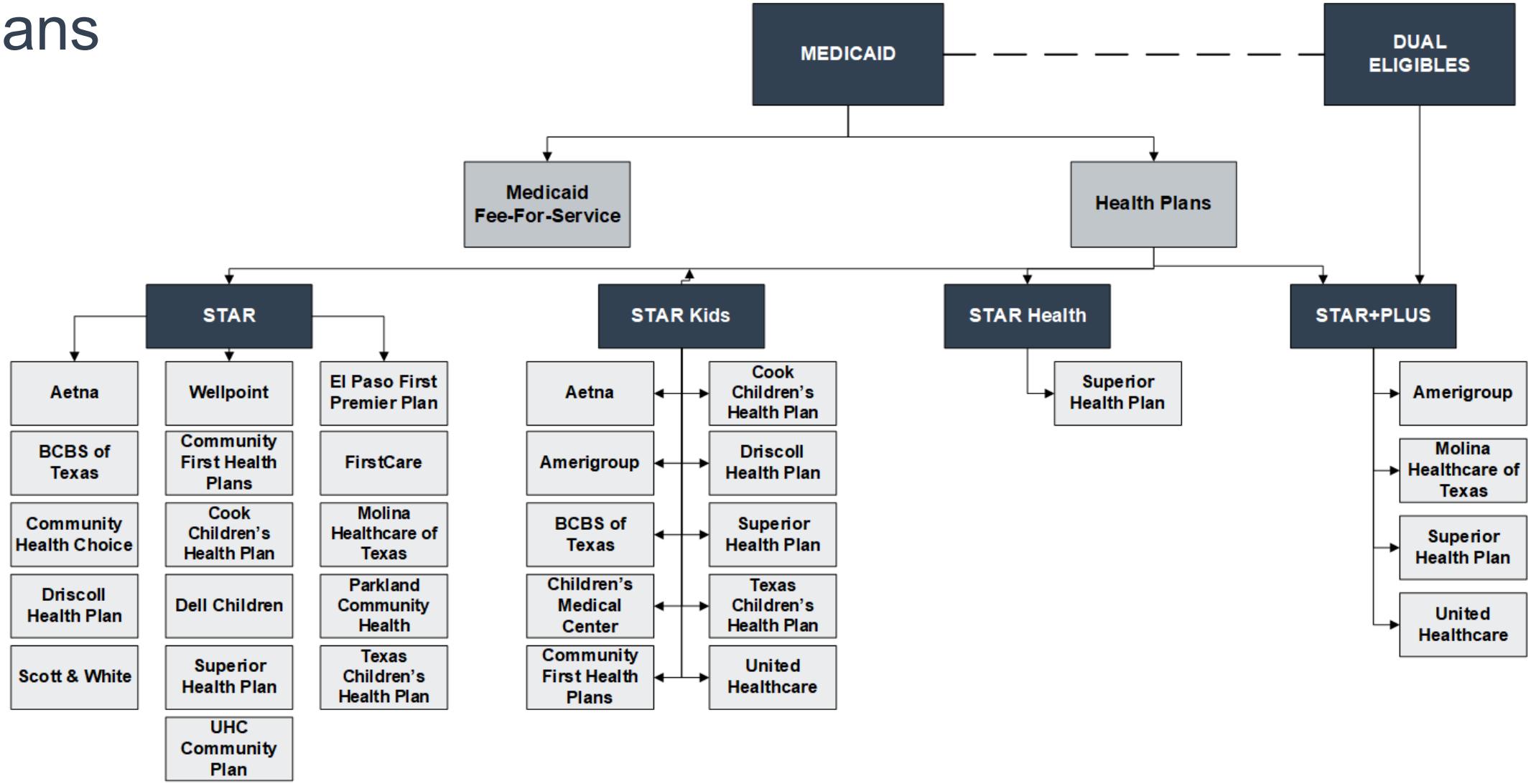
A.1. Texas Physical Health Care Coverage: Medicaid Health Plans



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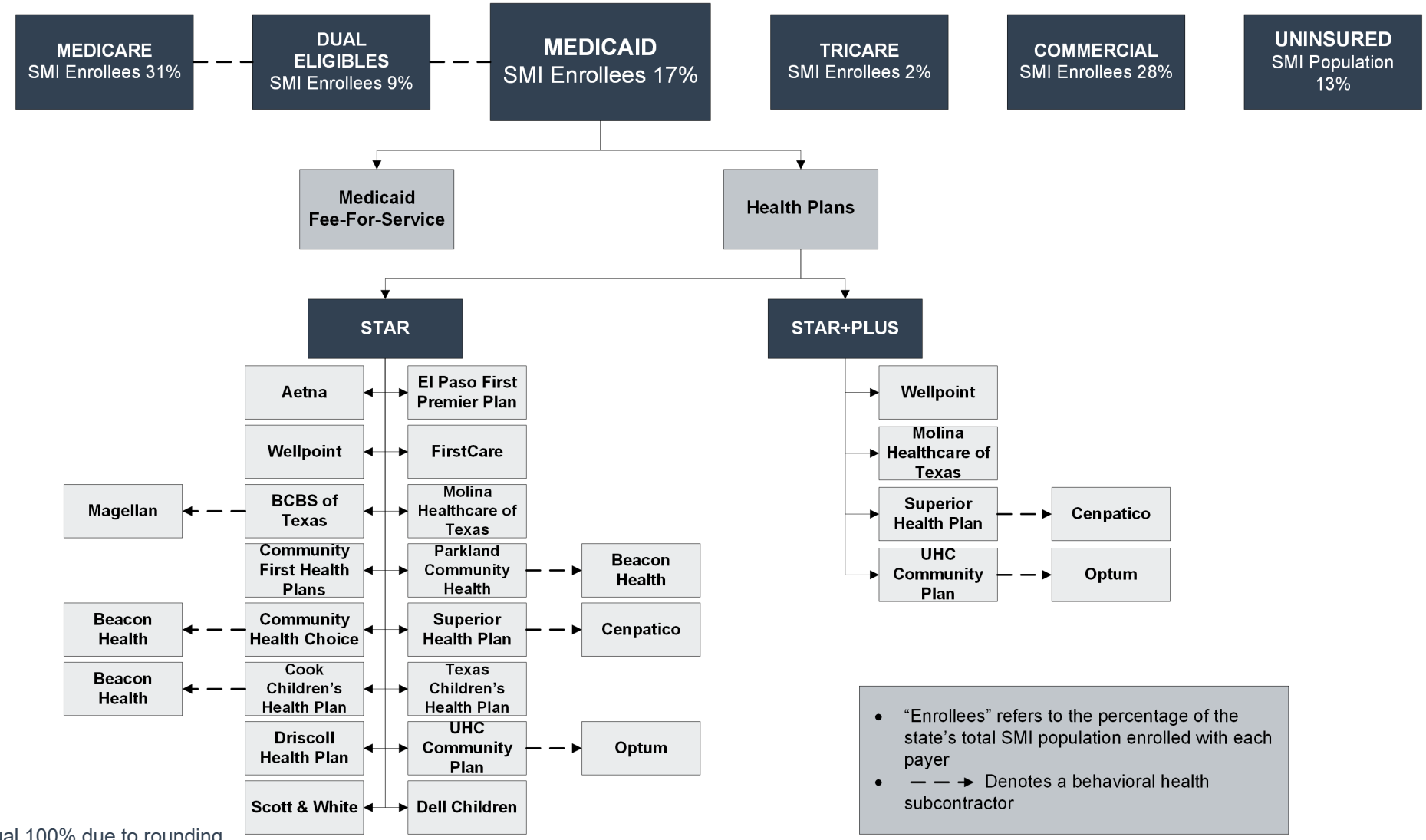
A.1. Texas Behavioral Health Care Coverage by Payer



Totals may not equal 100% due to rounding.

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A.2. Health & Human Services Care Coordination Initiatives

Care Coordination Entities For Medicaid Chronic Care Populations (Including SMI)		
Care Coordination Entity	**Active Program**	**Description**
Managed Care Plan	✓	Health plans are responsible for care coordination.
Primary Care Case Management (PCCM)		None
Accountable Care Organization (ACO) Program		None
Affordable Care Act (ACA) Model Health Home		None
Patient-Centered Medical Home (PCMH)		None
Dual Eligible Demonstration	✓	The Dual Demonstration Program will end Dec. 31, 2025, and transition Medicare-Medicaid Plans to integrated Dual Eligible Special Needs Plans by Jan. 1, 2026.
Managed Long-Term Services and Supports (MLTSS)	✓	STAR+PLUS health plans deliver LTSS for conditions not related to I/DD.
Certified Community Behavioral Health Clinics (CCBHC) Grant	✓	Texas operates 17 CCBHCS under grants from SAMHSA
Other Care Coordination Initiative	✓	The STAR+PLUS Pilot Program (SP3), is a new pilot program that will implement in phases, with services beginning by 2/1/24.

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A.3. Health Care Safety-Net Delivery System

State Agencies Responsible For Uninsured Citizens & Delivery System Model

Physical Health Services

- Through the County Indigent Health Care Program (CIHCP) administered by the Health and Human Services Commission (HHSC), state funding is available for counties, hospital districts, and public hospitals to ensure that eligible Texas residents who do not qualify for other health care assistance programs receive health care services.

Mental Health Services

- HHSC provides mental health services to the safety-net population through service area contracts with 37 local mental health authorities and two local behavioral health authorities to deliver mental health services in communities across Texas.

Addiction Treatment Services

- HHSC provides addiction treatment services to the safety-net population by funding provider organizations throughout the state. The intake organizations for safety-net addiction treatment services are called Outreach, Screening, and Referral Centers (OSARs).

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B. Texas Health Financing System Overview

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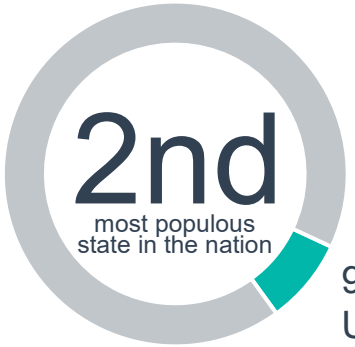
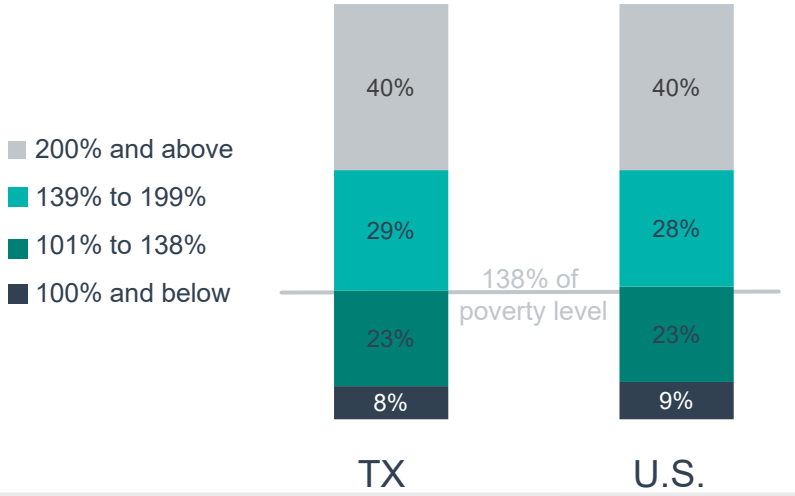
B.1. Population Demographics

Total Texas Population- 30,503,301
Estimated SMI Population- 2,440,264



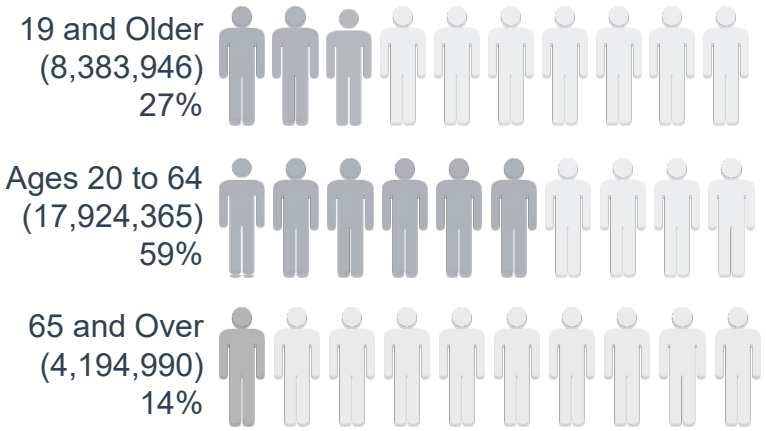
9% of the
U.S. population

Population Distribution By Income To Poverty Threshold Ratio

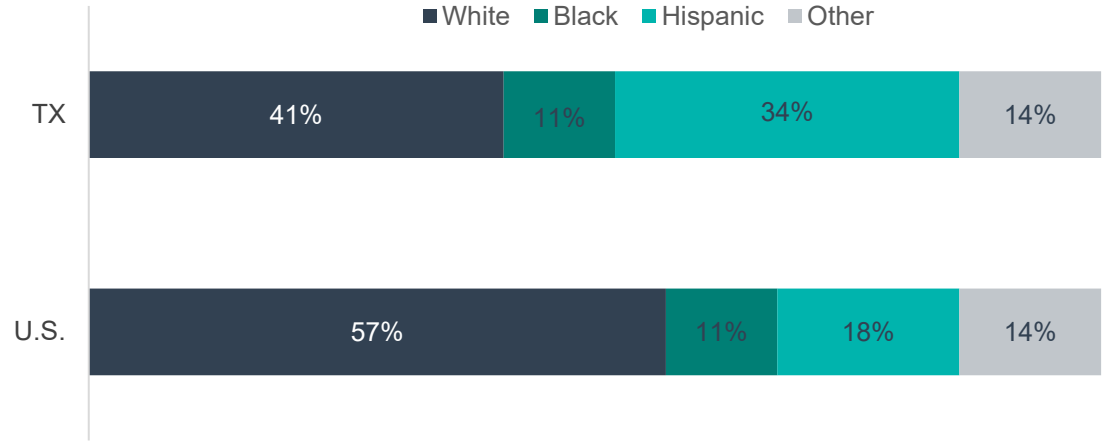


Median Household Income
Texas $75,780
U.S. $77,719

Population Distribution By Age



Texas & U.S. Racial Composition



Based on 2023 data.

Totals may not equal 100% due to rounding.

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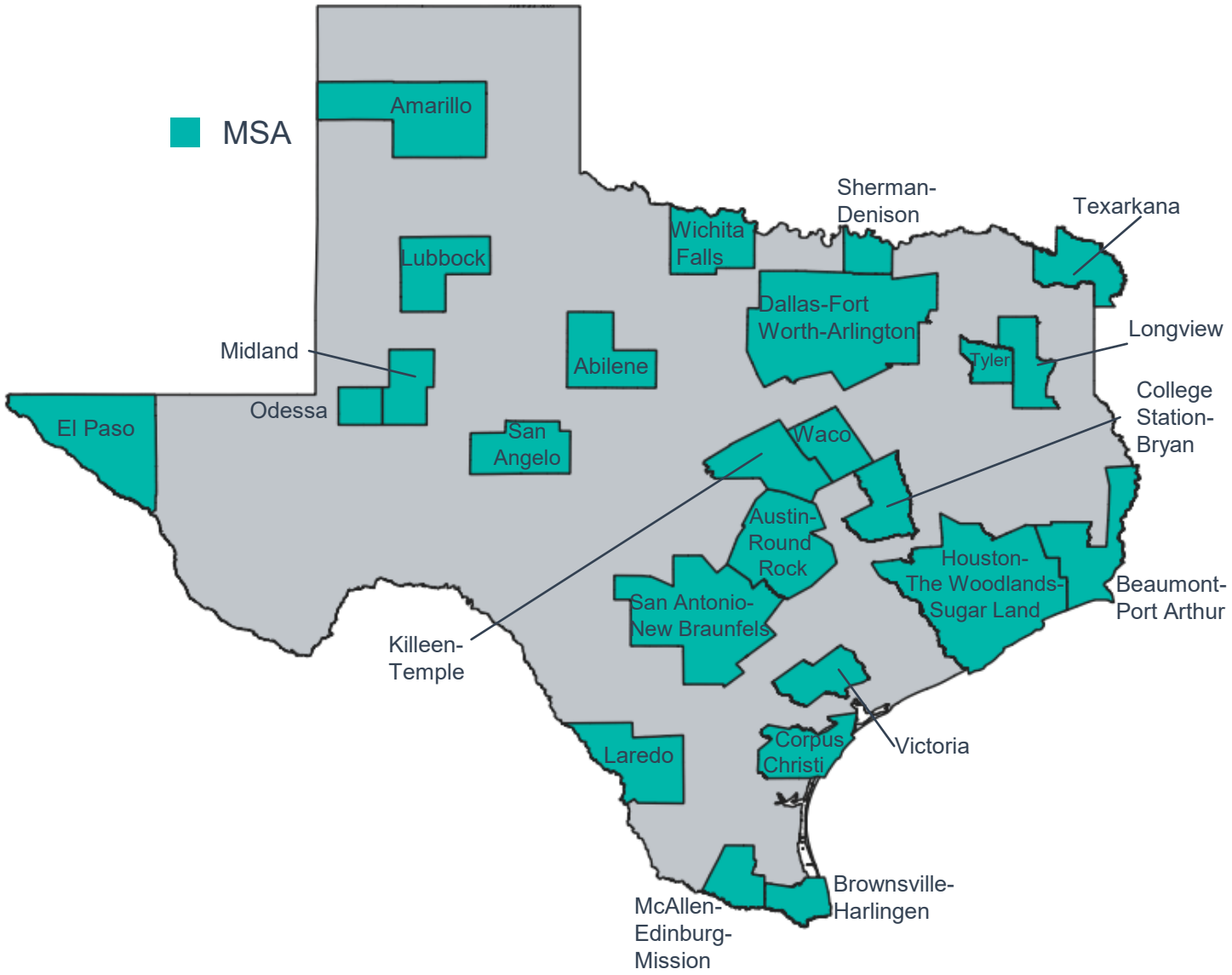
B.2. Population Centers

Metropolitan Statistical Areas (MSAs)		
MSA	**MSA Residents**	**Percent Of Population**
Total MSA Population	**27,326,164**	**90%**
Dallas-Fort Worth-Arlington	8,100,037	27%
Houston-The Woodlands-Sugar Land	7,340,118	24%
San Antonio-New Braunfels	2,703,999	9%
Austin-Round Rock-Georgetown	2,421,115	8%
McAllen-Edinburg-Mission	898,471	3%
El Paso	873,331	3%
Killeen-Temple	501,333	2%
Corpus Christi	448,323	1%
Brownsville-Harlingen	426,710	1%
Beaumont-Port Arthur	395,479	1%
Other MSAs	3,217,248	11%



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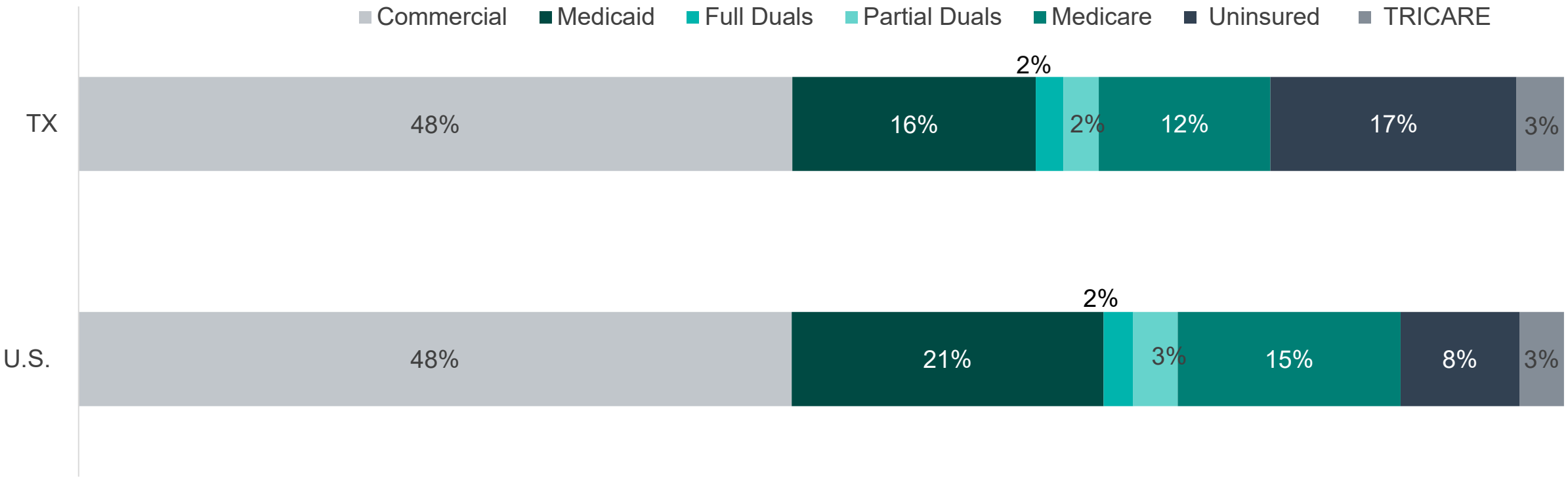
B.3. Population Distribution By Payer: National vs. State



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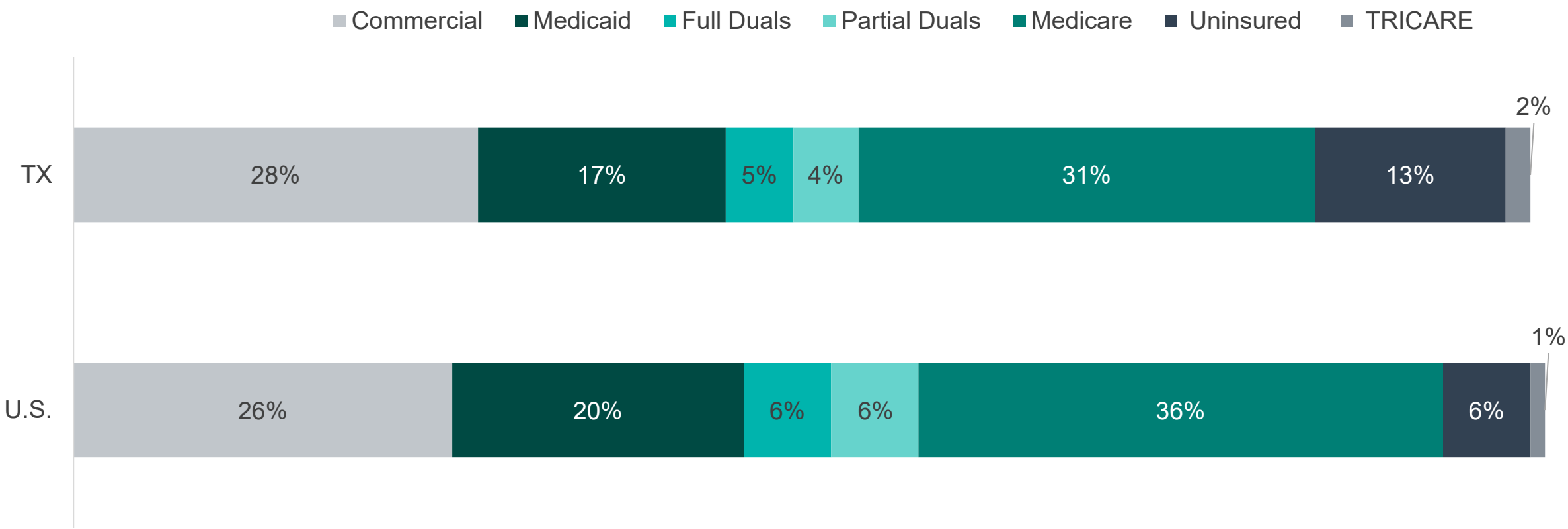
B.3. SMI Population Distribution By Payer: National vs. State



Totals may not equal 100% due to rounding.

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B.4. Largest Texas Health Plans By Enrollment

Plan Name	Type	Enrollment*
Health Care Service Corporation	Commercial	6,534,188
Blue Cross and Blue Shield of Texas	Commercial	6,202,674
UnitedHealthcare ASO	Commercial Administrative Services Organization (ASO)	2,208,672
Medicare Fee-for-service (FFS)	Medicare	2,202,871
Coventry ASO	Commercial ASO	1,950,178
Cigna ASO	Commercial ASO	1,233,485
TRICARE	Other public	937,830
Superior HealthPlan	Medicaid managed care – STAR	758,598
Wellpoint	Medicaid managed care - STAR	516,983
Texas Children's Health Plan STAR	Medicaid managed care – STAR	394,839

* Medicaid enrollment as of November 2024; TRICARE as of December 2023; Commercial as of January 2024; Medicare enrollment as of September 2024

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B.4. Largest Texas Health Plans By Estimated SMI Enrollment

Plan Name	Type	Enrollment*	Estimated SMI Enrollment
Medicare FFS	Medicare	2,202,871	500,052
Health Care Service Corporation	Commercial	6,534,188	320,175
Blue Cross and Blue Shield of Texas	Commercial	6,202,674	303,931
UnitedHealthcare ASO	Commercial ASO	2,208,672	108,225
Coventry ASO	Commercial ASO	1,950,178	95,559
Sierra Health and Life Insurance Company	Medicare Advantage	322,796	73,275
UnitedHealthcare Dual Complete	Medicare Advantage	313,805	71,324
Superior HealthPlan STAR	Medicaid managed care – STAR	758,598	66,757
TRICARE	Other public	937,830	62,835
Cigna ASO	Commercial ASO	1,233,485	60,441

* Medicaid enrollment as of November 2024; TRICARE as of December 2023; Commercial as of January 2024; Medicare enrollment as of September 2024

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B.5. Health Insurance Marketplace

Health Insurance Marketplace	
Health Plan Percentage	12%
Type of Marketplace	Federal
Individual Enrollment Contact	https://www.healthcare.gov/
	1-800-318-2596
Small Business Enrollment Contact	No small group plans are available through the marketplace. Employers must purchase coverage directly from an insurance carrier or through an insurance broker.

2025 Individual Market Health Plans	
1. Aetna/ CVS	10. Oscar Insurance Company of Texas
2. Celtic Ambetter	11. Scott and White Health Plan
3. Superior Health Plan/ Ambetter	12. Sendero Health Plans, Inc.
4. Blue Cross Blue Shield of Texas	13. UnitedHealthcare of Texas
5. CHRISTUS	14. Cigna
6. Community First Insurance Plans	15. Imperial Insurance Companies
7. Community Health Choice	16. Wellpoint
8. Moda Health Plan, Inc	
9. Molina Healthcare of Texas, Inc	

2025 Small Group Market Health Plans
None

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B.6. Accountable Care Organizations: Commercial

Commercial ACOs	
ACO	**Commercial Insurer**
Austin Regional Clinic	BCBSTX, Cigna
Baylor Scott & White Quality Alliance	UnitedHealthcare, Cigna, Aetna
BHS Accountable Care, LLC	Aetna
Catalyst Health Network	Aetna, BCBS TX, UnitedHealthcare
HealthTexas Provider Network Collaborative Accountable Care	Cigna
Kelsey-Seybold Collaborative Accountable Care	Cigna
Memorial Hermann Accountable Care Organization	BCBS TX, Aetna
Nexus ACO	UnitedHealthcare
Patient Physician Network	BCBSTX, United Healthcare

Commercial ACOs	
ACO	**Commercial Insurer**
PracticeEdge Alliance ACO	BCBSTX
Seton Accountable Care Organization, Inc.	UnitedHealthcare, Aetna
St Joseph Regional Health Partners ACO	Cigna
St Luke's-Renaissance Collaborative Accountable Care	Cigna
Tenet Healthcare	BCBSTX
Texas Health Resources	Aetna
The Austin Diagnostic Clinic CCC	Cigna
TXCIN	Cigna, BCBSTX, UnitedHealthcare
UT Connect ACO	BCBSTX
Village Health Partners	Cigna

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B.6. Accountable Care Organizations: Medicare

Medicare Shared Savings Program		
1. Accountable Care Coalition of Southeast Partners	20. Health Plus Network	39. St Joseph Health Partners ACO
2. Alliance ACO, LLC	21. Houston Methodist Coordinated Care	40. Steward National Care Network, Inc
3. Ascension Seton Accountable Care Organization	22. IntraCare Premier ACO	41. TEAM ACO
4. Baptist Integrated Physician Partners	23. LTC ACO	42. Aledade 158 Texas MSSP Enhanced
5. Baylor Scott & White Quality Alliance	24. Main Street Rural Health Cottonwood ACO LLC	43. Texas Panhandle Clinical Partners ACO LLC
6. Baylor St. Lukes's Health Network ACO	25. Main Street Rural Health Dogwood ACO LLC	44. Texoma Clinical Partners ACO LLC
7. Buena Vida y Salud	26. Main Street Rural Health Hickory ACO LLC	45. The Accountable Care Organization, Ltd
8. Caravan Collaborative Pathways	27. Main Street Rural Health Juniper ACO LLC	46. The Rural Advantage LLC
9. Caravan Health ACO 43, LLC	28. Main Street Rural Health Magnolia ACO LLC	47. TP-ACO LLC
10. Caravan Health ACO 50, LLC	29. Main Street Rural Health Maple ACO LLC	48. Aledade 57 Western Sky MSSP Enhanced
11. Care Partners ACO, LLC	30. Main Street Rural Health Willow ACO LLC	49. USMM Accountable Care Partners
12. CareMax Accountable Care Network, LLC	31. Medical Partners Management Group ACO	50. UT Health San Antonio Regional Physician Network
13. CHRISTUS Health Quality Care Alliance	32. Memorial Hermann Accountable Care Organization	51. Select Physicians Associates, LLC
14. CHSPSC ACO 6, LLC	33. Methodist Alliance for Patients and Physicians	52. WellMed DFW Medicare ACO
15. CHSPSC ACO 8, LLC	34. Oschner Accountable Care Network, LLC	53. WellMed Greater Texas Medicare ACO
16. CHSPSC ACO 17, LLC	35. On Belay Health Solutions	54. WellMed Texas Medicare ACO
17. Covenant ACO	36. PQN – Central Texas, LLC	55. Wellvana Essential Care LLC
18. Elite Patient Care, LLC	37. Prime Care Managers	56. Aledade 149 Regional MSSP
19. Health Choice Community Partners, LLC	38. Privia Quality Network Gulf Coast II, LLC	57. Zenith Independent Physicians ACO

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C. Medicaid Administration, Governance & Operations

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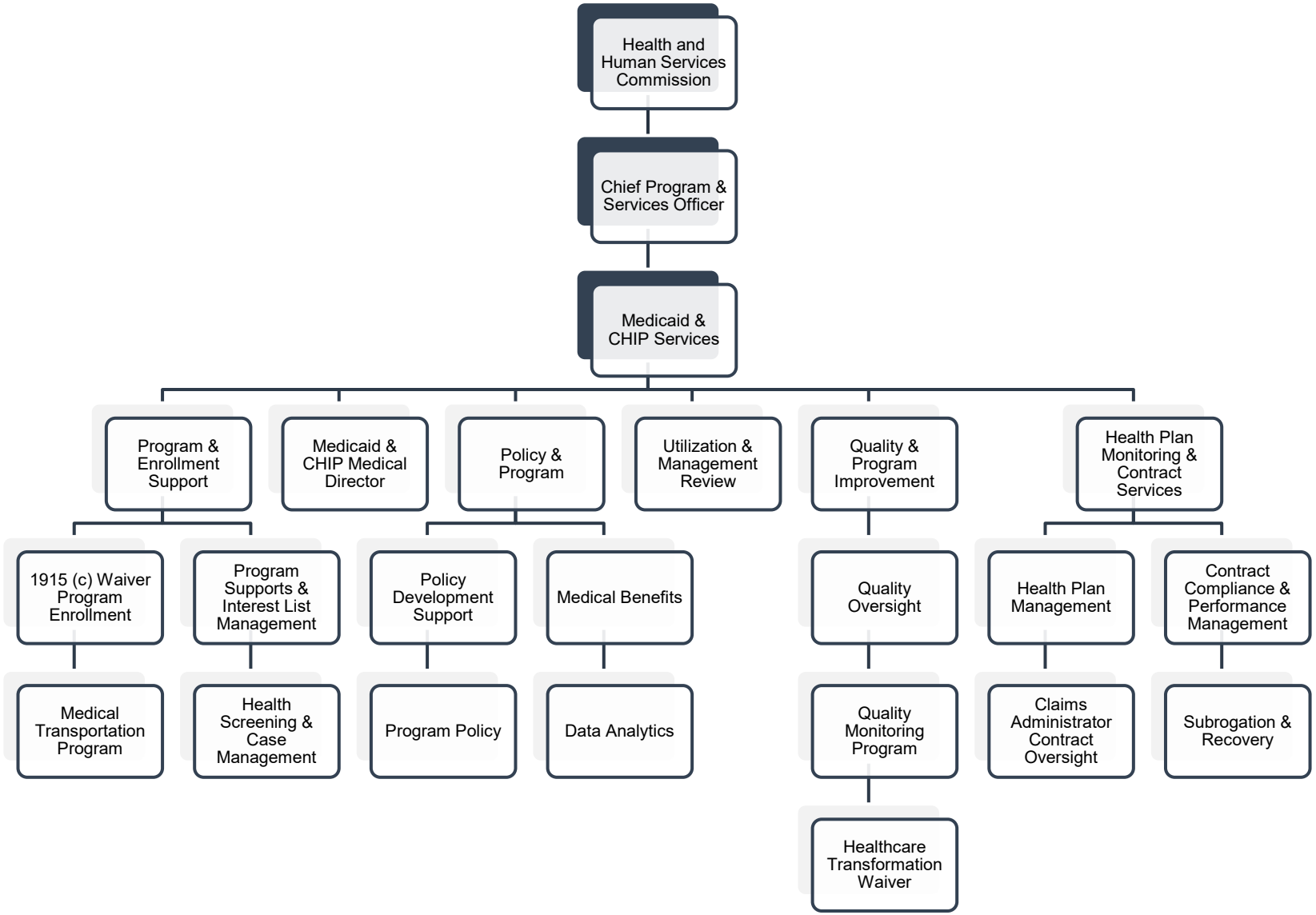
C.1. Medicaid Governance: Organization Chart



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C.1. Medicaid Governance: Key Leadership

Name	Position	Department	Email
Cecile Erwin Young	Executive Commissioner	Texas Health & Human Services (HHSC)	cecile.young@hhs.texas.gov
Kate Hendrix	Chief of Staff	HHSC	kate.hendrix@hhs.texas.gov
Michelle Alletto	Chief Program and Services Officer	HHSC	michelle.alletto@hhs.texas.gov
Emily Zalkovsky	Chief Medicaid and CHIP Services Officer	HHSC, Medicaid & CHIP Services	emily.zalkovsky@hhs.texas.gov
Valerie Mayes	Deputy State Medicaid Director	HHSC, Medicaid & CHIP Services	valerie.mayes@hhs.texas.gov
Ryan Van Ramshorst	Chief Medical Director	HHSC, Medicaid & CHIP Services	ryan.vanramshorst@hhs.texas.gov
Camisha Banks	Deputy Executive Commissioner for Managed Care	HHSC, Medicaid & CHIP Services	camisha.banks@hhs.texas.gov

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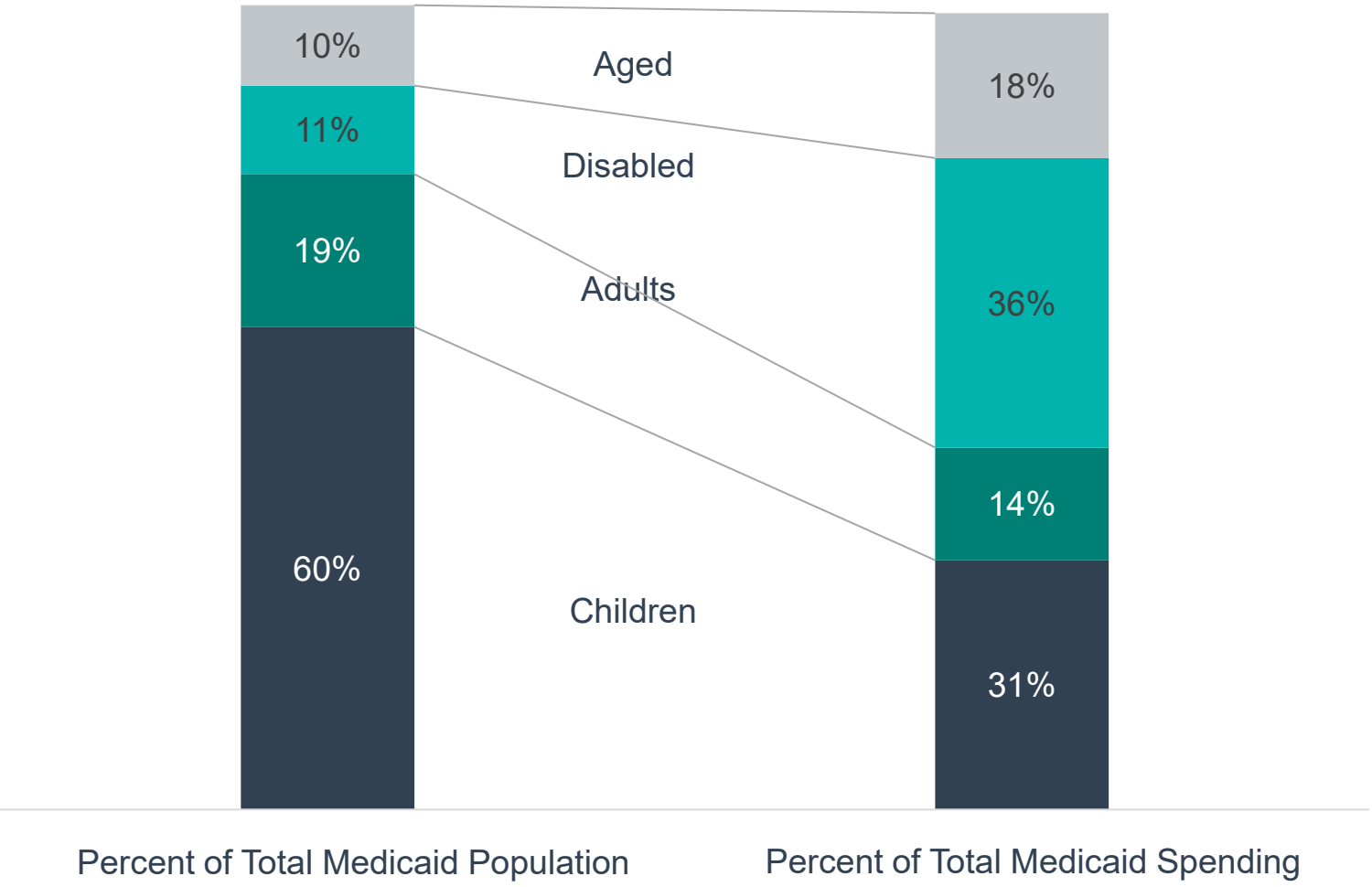
C.2. Medicaid Program Spending By Eligibility Group



Medicaid Spending Per Enrollee, FY 2022		
	U.S.	TX
All populations	$8,813	$8,406
Children	$3,786	$4,391
Adults	$5,443	$6,377
Expansion adults	$7,569	$3,058
Blind and disabled	$25,483	$25,915
Aged	$19,191	$16,355

Based on FY 2022 data

Totals may not equal 100% due to rounding.

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C.2. Medicaid Program Spending

Budget Item	FY 2023 Spending	Percent Of Budget
Managed care and premium assistance	$38,784,000,000	67%
Hospital	$8,721,000,000	15%
Home- and community-based LTSS	$2,873,000,000	5%
Other acute	$2,507,000,000	4%
Medicare premiums and coinsurance	$1,817,000,000	3%
Institutional LTSS	$1,763,000,000	3%
Other practitioner	$627,000,000	1%
Drugs	$456,000,000	1%
Physician	$154,000,000	<1%
Clinic and health center	$22,000,000	<1%
Dental	$10,000,000	<1%
Budget Total: $57,734,000,000		

Federal & County Financial Participation	
FY 2025 Federal Medical Assistance Percentage (FMAP)	60.0%
CY 2025 Newly Eligible FMAP (expansion population)	N/A
Counties contribute to state Medicaid share	No

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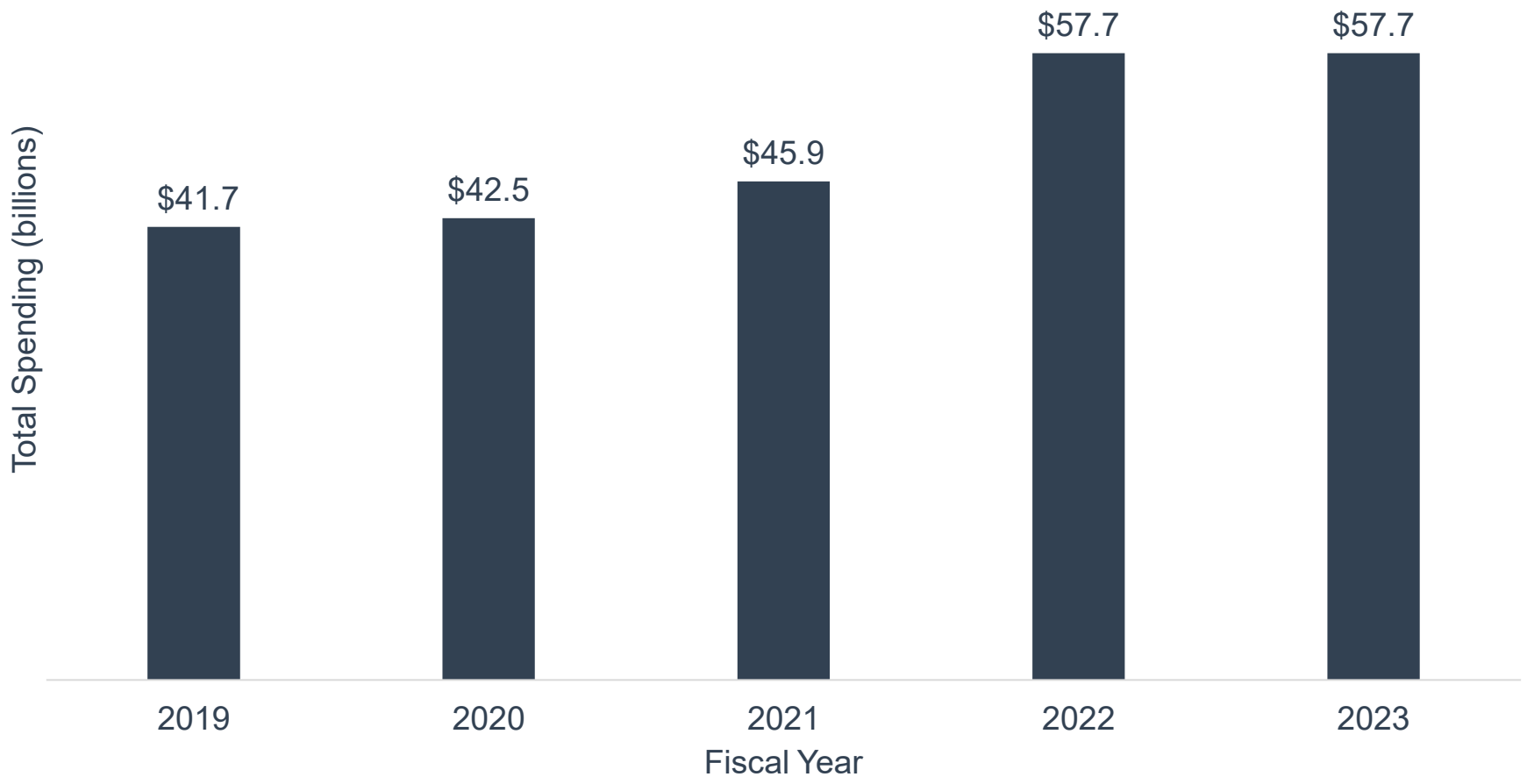
C.2. Medicaid Program Spending: Change Over Time



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C.3. Medicaid Expansion Status

Medicaid Expansion	
Participating In Expansion	No
Date Of Expansion	N/A
Medicaid Eligibility Income Limit For Able-Bodied Adults	16% of the Federal Poverty Level (FPL) for parents; no coverage for able-bodied adults
Legislation Used To Expand Medicaid	N/A
Number Of Individuals Enrolled In The Expansion Group (January 2025)	N/A
Number Of Enrollees Newly Eligible Due To Expansion	N/A
Benefits Plan For Expansion Population	N/A

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C.4. Medicaid Program Benefits

Federally Mandated Benefits

1. Inpatient hospital services other than services in an institution for mental disease (IMD)
2. Outpatient hospital services
3. Rural Health Clinic services
4. Federally Qualified Health Center (FQHC) services
5. Laboratory and x-ray services
6. Nursing facilities for individuals 21 and over
7. Early and Periodic Screening and Diagnosis and Treatment (EPSDT)
8. Family planning services and supplies
9. Free standing birth centers
10. Pregnancy-related and postpartum services
11. Nurse midwife services
12. Tobacco cessation programs for pregnant women
13. Physician services
14. Medical and surgical services of a dentist
15. Home health services
16. Nurse practitioner services
17. Non-emergency transportation to medical care

Texas's Optional Benefits

1. Podiatry services
2. Optometry services
3. Chiropractor services
4. Other practitioner services
5. Clinic services
6. Private duty nursing services
7. Prescribed drugs
8. Physical therapy and related services
9. Speech therapy
10. Non-prescription drugs
11. Prosthetic devices
12. Eyeglasses
13. Preventative services
14. Services for individuals over age 65 in IMDs
15. Inpatient psychiatric facility services for individuals under age 21
16. Rehabilitative services
17. Targeted case management
18. Personal care services
19. Respiratory care services
20. Services provided in religious nonmedical health care institutions

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D. Medicaid Financing & Service Delivery System

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D.1. Medicaid Financing & Service Delivery System

Medicaid System Characteristics					
Characteristics	**Medicaid Fee-For-Service (FFS)**	**Medicaid Managed Care – STAR**	**Medicaid Managed Care – STAR+PLUS**	**Medicaid Managed Care – STAR Kids**	**Medicaid Managed Care – STAR Health**
Enrollment* (November 2024)	214,398	3,134,746	521,470	138,752	21,315
SMI Enrollment	Texas does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI. As a result, most of the SMI population is enrolled in managed care. • Estimated 5% of the SMI population in FFS; 95% in managed care				
Management	• Health and Human Services Commission • Texas Medicaid and Healthcare Partnership provides administrative functions	16 health plans	7 health plans	9 health plans	One health plan
Payment Model	FFS	Capitated rate	Capitated rate	Capitated rate	Capitated rate
Geographic Service Area	Statewide	Statewide; plans available regionally	Statewide; plans available regionally	Statewide; plans available regionally	Statewide; plans available regionally

Total Medicaid: 4,030,681 | Total Medicaid With SMI: 355,492

*An additional 19,460 individuals are enrolled in the state's dual demonstration. See Section E. for more information.

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D.1. Medicaid System Overview

Medicaid Financial Delivery System Enrollment	
Total Medicaid population distribution	As of November 2024: 5% in fee-for-service (FFS); 95% in managed care
SMI population inclusion in managed care	• Texas does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI. As a result, the majority of the SMI population is enrolled in managed care. • Estimated 5% of the SMI population in FFS; 95% in managed care
Dual eligible population inclusion in managed care	• Dual eligibles are mandatorily enrolled in managed care unless they receive LTSS for an intellectual/developmental disability (I/DD). • Estimated 7% in FFS; 93% in managed care
Long-term services and supports (LTSS) inclusion in managed care	• All individuals, except for children in need of nursing facility level of care or individuals with I/DD, are included in managed care

Medicaid Financing & Risk Arrangements: Behavioral Health		
Service Type	**FFS Population**	**Managed Care Population**
Traditional behavioral health	Covered FFS by the state	Included in the health plan's capitation rate
Specialty behavioral health	Covered FFS by the state	Included in the health plan's capitation rate
Pharmaceuticals	Covered FFS by the state	Included in the health plan's capitation rate
Long-term services and supports (LTSS)	Covered FFS by the state	Included in the health plan's capitation rate, except for LTSS for the I/DD population and for children in need of nursing facility level of care

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D.1. Medicaid Care Coordination Initiatives

Care Coordination Entities For Medicaid Chronic Care Populations (Including SMI)		
Care Coordination Entity	**Active Program**	**Description**
Managed Care Plan	✓	Health plans are responsible for care coordination.
Primary Care Case Management (PCCM)		None
Accountable Care Organization (ACO) Program		None
Affordable Care Act (ACA) Model Health Home		None
Patient-Centered Medical Home (PCMH)		None
Dual Eligible Demonstration	✓	The Dual Demonstration Program will end Dec. 31, 2025, and transition Medicare-Medicaid Plans to integrated Dual Eligible Special Needs Plans by Jan. 1, 2026.
Managed Long-Term Services and Supports (MLTSS)	✓	STAR+PLUS health plans deliver LTSS for conditions not related to I/DD.
Certified Community Behavioral Health Clinics (CCBHC) Grant	✓	Texas operates 17 CCBHCS under grants from SAMHSA
Other Care Coordination Initiative	✓	The STAR+PLUS Pilot Program (SP3), is a new pilot program that will implement in phases, with services expected to start by 2/1/24.

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D.1. Medicaid Service Delivery System Enrollment By Eligibility Group

Population	Mandatory FFS Enrollment	Option To Enroll In FFS Or Managed Care	Mandatory Managed Care Enrollment
Parents and caretakers			X
Children			X
Blind and disabled individuals			X
Aged individuals			X
Dual eligibles	Dual eligibles receiving I/DD waiver services		All other dual eligibles
Medicaid expansion	Not applicable		
Individuals residing in nursing homes			X
Individuals residing in ICF/IID			X
Individuals in foster care			X
Other populations	• Medically needy • Residents of state-supported living centers		• Medicaid for Breast and Cervical Cancer

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D.2. Medicaid FFS Program: Overview

- Full-benefit FFS enrollment as of November 2024 was 214,398.
- The state contracts with a group of vendors to perform administrative functions for the FFS program.
  - These vendors operate under the umbrella of the Texas Medicaid and Healthcare Partnership (TMHP), which is led by Accenture.
- Administrative services provided by TMHP include services such as encounter processing, provider enrollment, claims processing, and more beneficiary specific services.

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D.2. Medicaid FFS Program: Behavioral Health Benefits

- Behavioral health services and pharmacy are provided FFS by the state.
- Individuals with SMI may also be eligible for adult mental health home- and community-based services (HCBS-AMH). For more details see Section D.3.

FFS Mental Health Benefits
1. Screening services
2. Psychiatric diagnostic evaluation
3. Psychotherapy
4. Psychological and neuropsychological testing
5. Inpatient care
6. Electroconvulsive therapy
7. Pharmacological management
8. Rehabilitative services • Day program • Medication training and support • Crisis intervention • Skills training and development • Psychosocial rehabilitative services
9. Peer specialists
10. Targeted case management
11. HCBS-AMH

FFS Addiction Treatment Benefits
1. Inpatient services
2. Assessment
3. Withdrawal management (outpatient and residential)
4. Individual and group counseling
5. Residential treatment services
6. Outpatient treatment services
7. Medication assisted treatment

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D.2. Medicaid FFS Program: SMI Population

- Texas does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI. As a result, most of the SMI population is enrolled in managed care.
- As of November 2024, OPEN MINDS estimates that 5% of the SMI population was enrolled in FFS.

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D.2. Medicaid FFS Program: Pharmacy Benefit

Texas FFS Program Pharmacy Benefit & Utilization Restrictions	
State Uses Pharmacy Benefit Manager	The state operates the Vendor Drug Program, under which it contracts with four different organizations for the following: • Pharmacy claims and rebates • Clinical and auto prior authorization • Retrospective drug utilization review • Preferred drug list (PDL)
Responsible For Financing General Pharmacy Benefit	Medicaid FFS
Responsible For Financing Mental Health Pharmacy Benefit	Medicaid FFS
State Uses A PDL For General Pharmacy	Yes
State Uses A PDL For Mental Health Drugs	Yes, antidepressants and antipsychotics are included on the PDL
State Uses A PDL For Addiction Treatment Drugs	Yes, addiction treatment drugs are included on the PDL.
Coverage Of Antipsychotic Injectable Medications	No, drugs administered by a clinical professional are covered under the Texas medical benefit. The state is currently evaluating a pilot program that would allow the coverage of some long-acting injectables via the pharmacy benefit.
Utilization Restrictions For Mental Health Or Addiction Treatment Drugs	• Adults in FFS are limited to three prescriptions per month, with some exceptions • Treatment failure of a preferred drug, contraindication of a preferred drug, or allergy to preferred drug required before non-preferred drug prescribed • Many preferred antipsychotics and addiction treatment drugs are subject to clinical prior authorizations
State Has A Pharmacy Lock-In Program Or Other Restriction Program	Yes, Texas has a lock-in program for individuals who misuse health or pharmacy services. Individuals are locked-in to a single clinical professional and/or pharmacy for an initial period of 36 months. After 36 months, individuals may be locked-in for an additional 60 months.

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D.3. Medicaid Managed Care Program: Overview

- As of November 2024, enrollment in managed care was 3,819,409.
- Texas has four managed care programs that serve subsets of the Medicaid population:
  - **STAR** (State of Texas Access Reform) – Provides physical and behavioral health services to low-income children and families.
  - **STAR+PLUS** – Provides physical and behavioral health services and some long-term services and supports (LTSS) to the disabled population over the age of 21, as well as the elderly.
  - **STAR Kids** – Provides physical and behavioral health services and LTSS related to a single waiver—the Medically Dependent Children's Program—to persons with disabilities under age 21.
  - **STAR Health** – Provides physical and behavioral health services to children and young adults in the foster care system.
- The STAR, STAR+PLUS, and STAR Kids programs operate statewide, with plans available regionally in 13 service areas. STAR Health is a statewide program served by a single health plan, Superior (Centene-WellCare). Eligible individuals who choose not to enroll in STAR Health must enroll in STAR or STAR Kids.
- 3% of the health plan's capitation rate is withheld and returned based on performance on a set of quality measures. Undistributed funds are returned in the form of bonus pool payments. Quality measures vary by program. This program is called the "Pay For Quality (P4Q)" Program.
- The state requires the health plans to meet value-based reimbursement targets using the Health Care Payment Learning and Action Network (HCP LAN) alternative payment models (APM) framework.
  - 50% of expenditures must be in APMs, and 25% of expenditures must be in risk-based APMs.
  - If targets are not met, there will be a penalty of $.10 PMPM for both rates.

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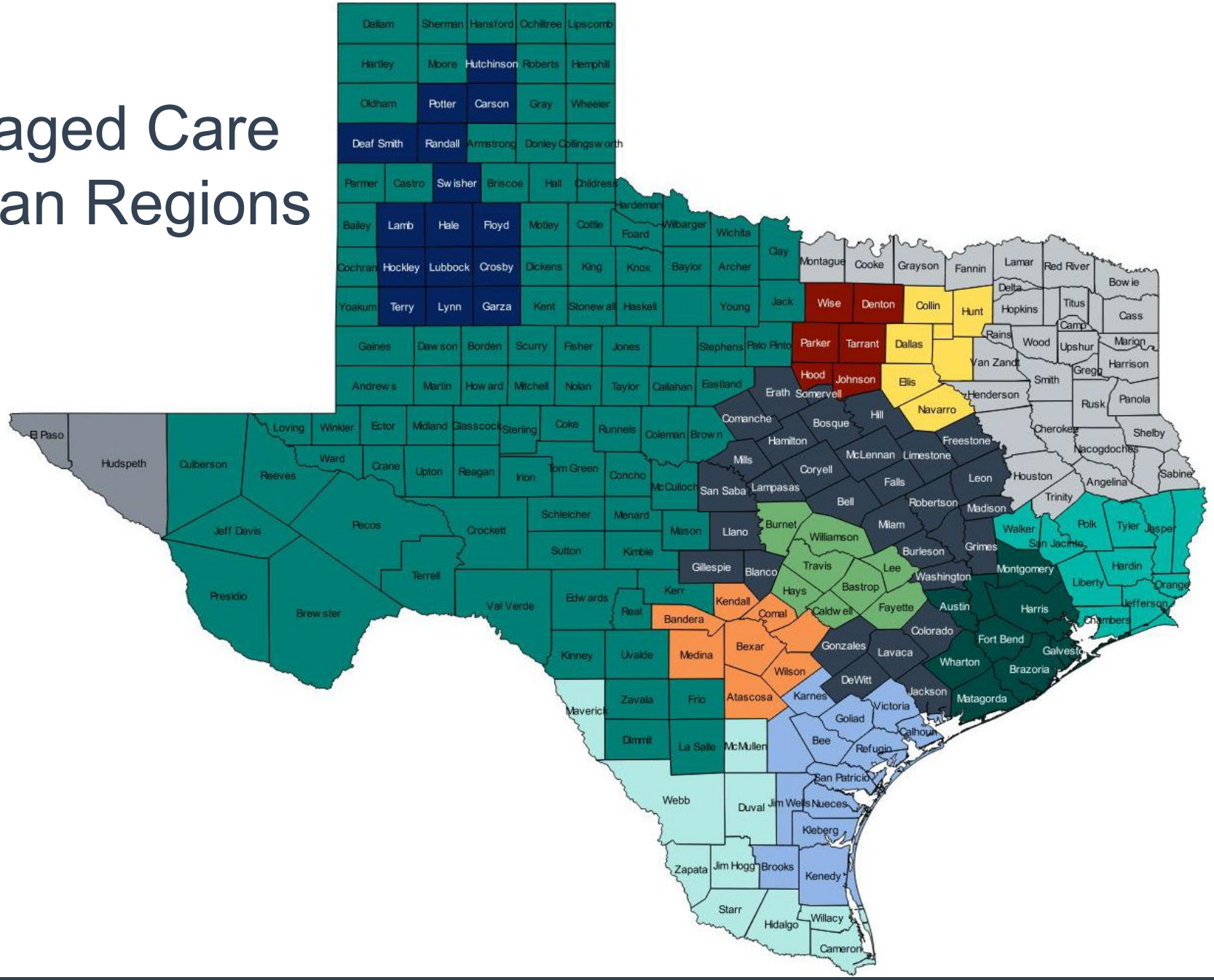
D.3. Medicaid Managed Care Program: Health Plan Regions

Health Plan Regions

- Bexar
- Dallas
- El Paso
- Harris
- Hidalgo
- Jefferson
- Lubbock
- MRSA Central
- MRSA Northeast
- MRSA West
- Nueces
- Tarrant
- Travis



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D.3. Medicaid Managed Care Program: Health Plan Regions

Region	Counties
Bexar	Atascosa, Bandera, Bexar, Comal, Guadalupe, Kendall, Medina, Wilson
Dallas	Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, Rockwall
El Paso	El Paso, Hudspeth
Harris	Austin, Brazoria, Fort Bend, Galveston, Harris, Matagorda, Montgomery, Waller, Wharton
Hidalgo	Cameron, Duval, Hidalgo, Jim Hogg, Maverick, McMullen, Starr, Webb, Willacy, Zapata
Jefferson	Chambers, Hardin, Jasper, Jefferson, Liberty, Newton, Orange, Polk, San Jacinto, Tyler, Walker
Lubbock	Carson, Crosby, Deaf Smith, Floyd, Garza, Hale, Hockley, Hutchinson, Lamb, Lubbock, Lynn, Potter, Randall, Swisher, Terry
Medicaid Rural Service Area (MRSA) Central	Bell, Blanco, Bosque, Brazos, Burleson, Colorado, Comanche, Coryell, DeWitt, Erath, Falls, Freestone, Gillespie, Gonzales, Grimes, Hamilton, Hill, Jackson, Lampasas, Lavaca, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Somervell, Washington

Region	Counties
MRSA North	Anderson, Angelina, Bowie, Camp, Cass, Cherokee, Cooke, Delta, Fannin, Franklin, Grayson, Gregg, Harrison, Henderson, Hopkins, Houston, Lamar, Marion, Montague, Morris, Nacogdoches, Panola, Rains, Red River, Rusk, Sabine, San Augustine, Shelby, Smith, Titus, Trinity, Upshur, Van Zandt, Wood
MRSA West	Andrews, Archer, Armstrong, Bailey, Baylor, Borden, Brewster, Briscoe, Brown, Callahan, Castro, Childress, Clay, Cochran, Coke, Coleman, Collingsworth, Concho, Cottle, Crane, Crockett, Culberson, Dallam, Dawson, Dickens, Dimmit, Donley, Eastland, Ector, Edwards, Fisher, Foard, Frio, Gaines, Glasscock, Gray, Hall, Hansford, Hardeman, Hartley, Haskell, Hemphill, Howard, Irion, Jack, Jeff Davis, Jones, Kent, Kerr, Kimble, King, Kinney, Knox, La Salle, Lipscomb, Loving, Martin, Mason, McCulloch, Menard, Midland, Mitchell, Moore, Motley, Nolan, Ochiltree, Oldham, Palo Pinto, Parmer, Pecos, Presidio, Reagan, Real, Reeves, Roberts, Runnels, Schleicher, Scurry, Shackelford, Sherman, Stephens, Sterling, Stonewall, Sutton, Taylor, Terrell, Throckmorton, Tom Green, Upton, Uvalde, Val Verde, Ward, Wheeler, Wichita, Wilbarger, Winkler, Yoakum, Young, Zavala
Nueces	Aransas, Bee, Brooks, Calhoun, Goliad, Jim Wells, Karnes, Kenedy, Kleberg, Live Oak, Nueces, Refugio, San Patricio, Victoria
Tarrant	Denton, Hood, Johnson, Parker, Tarrant, Wise
Travis	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson

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D.3. Medicaid Managed Care Program: STAR Program

- As of November 2024, enrollment in STAR was 3,134,745, representing 82% of the total Medicaid managed care population.
- The STAR program provides physical health, behavioral health, and pharmacy services for pregnant women, newborns, and children and families with limited income.
- The STAR program operates statewide. There are 16 STAR health plans available regionally in the 13 service delivery areas.
- There are at least two STAR plans available in each region, and enrollees may choose between them.

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D.3. Medicaid Managed Care Program: STAR Program Plans By Region

Region	STAR Managed Care Plans	Enrollment	Percentage
Bexar	Aetna, Wellpoint, Community First, Superior	281,333	9%
Dallas	Wellpoint, Molina, Parkland	407,217	13%
El Paso	El Paso First, Molina, Superior	113,098	4%
Harris	Wellpoint, Community Health Choice, Molina, Texas Children's, UnitedHealthcare	782,055	25%
Hidalgo	Driscoll, Molina, Superior, UnitedHealthcare	340,939	11%
Jefferson	Wellpoint, Community Health Choice, Molina, Texas Children's, UnitedHealthcare	97,111	3%
Lubbock	Wellpoint, FirstCare, Superior	78,400	3%
MRSA Central	Wellpoint, Scott and White, Superior	147,710	5%
MRSA North	Wellpoint, Superior	182,617	6%
MRSA West	Wellpoint, FirstCare, Superior	165,494	5%
Nueces	Driscoll, Superior, UnitedHealthcare	90,685	3%
Tarrant	Aetna, Wellpoint, Cook Children's	290,309	9%
Travis	Blue Cross and Blue Shield of Texas, Dell Children’s, Superior	157,778	5%
Total November 2024 Enrollment: 3,134,745			

Totals may not equal 100% due to rounding.

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D.3. Medicaid Managed Care Program: STAR+PLUS Program

- As of November 2024, enrollment in STAR+PLUS was 524,594, representing 14% of the total Medicaid managed care population.
- STAR+PLUS provides physical health, behavioral health, pharmacy nursing facility services, and community-based LTSS.
  - Access to home- and community-based services (HCBS) is limited to the enrollment caps put in place by Texas's 1115 demonstration waiver.
- To qualify for the STAR+PLUS program, a Medicaid beneficiary must meet at least one of the following criteria:
  - Age 21 or older, receiving Supplemental Security Income (SSI) benefits, and eligible for Medicaid due to low-income
  - Not receiving SSI, but eligible for STAR+PLUS HCBS waiver
  - Age 21 or older, receiving Medicaid through what are called "Social Security Exclusion programs," and meeting program rules for income and asset levels
  - Age 21 or over, residing in a nursing home, and receiving Medicaid while in the nursing home
  - Enrolled in the Breast and Cervical Cancer Program
- The STAR+PLUS program operates statewide, with a total of seven health plans available regionally by service area. STAR+PLUS Medicaid members can select from at least two health plans in each region.
- Members who are dual eligibles, have a history of mental health or addiction disorder, or receive LTSS must be contacted by the service coordinator at least once via phone and at least once face-to-face.
- The STAR+PLUS HCBS provisions of the state's section 1115 waiver authorize additional LTSS for those who qualify for a nursing facility level of care. These services—such as nursing, personal assistance services, adaptive aids, medical supplies, and minor modifications to make members' homes more accessible—are also included in the health plan's capitation.

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D.3. Medicaid Managed Care Program: STAR+PLUS Program Plans By Region

Region	STAR+PLUS Program Plans	Enrollment	Percentage
Bexar	Wellpoint, Molina, Superior	46,110	9%
Dallas	Molina, Superior	62,564	12%
El Paso	Wellpoint, Molina	21,571	4%
Harris	Wellpoint, Molina, UnitedHealthcare	109,423	21%
Hidalgo	Molina, Superior	61,619	12%
Jefferson	Wellpoint, Molina, UnitedHealthcare	17,739	3%
Lubbock	Wellpoint, Superior	12,124	2%
MRSA Central	Superior, UnitedHealthcare	28,692	6%
MRSA North	UnitedHealthcare	41,616	8%
MRSA West	Wellpoint, Superior	32,060	6%
Nueces	Superior, UnitedHealthcare	18,929	4%
Tarrant	Wellpoint	43,763	8%
Travis	Wellpoint, UnitedHealthcare	25,260	5%
Total November 2024 Enrollment: 521,470			

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D.3. Medicaid Managed Care Program: STAR Kids

- As of November 2024, enrollment in STAR Kids was 138,753, representing 4% of the total Medicaid managed care population.
- Children and young adults under the age of 21 who receive Supplemental Security Income (SSI), who reside in an ICF/IID or nursing facility, or who are served by the following waiver programs are required to enroll:
  - Medically Dependent Children Program (MDCP)
  - HCBS
  - Community Living Assistance and Supports Services (CLASS)
  - Deaf Blind with Multiple Disabilities (DBMD)
  - Texas Home Living (TxHmL)
  - Youth Empowerment Services (YES)
- The STAR Kids capitation rate includes physical health, behavioral health, pharmacy services, and MDCP waiver services for eligible children.
  - Individuals enrolled in the other listed HCBS waiver programs or residing in an ICF/IDD or nursing facility receive acute care services and service coordination through their STAR Kids MCO but receive LTSS on an FFS basis.
- The STAR Kids program operates statewide, with a total of 9 health plans available regionally by service area. STAR Kids Medicaid members can select from at least two health plans in each area.

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D.3. Medicaid Managed Care Program: STAR Kids Program Plans By Region

Region	STAR Kids Plans	Enrollment	Percentage
Bexar	Community First, Superior	12,178	9%
Dallas	Wellpoint, Children's Medical Center	18,271	14%
El Paso	Wellpoint, Superior	4,015	3%
Harris	Wellpoint, Texas Children's, UnitedHealthcare	32,792	24%
Hidalgo	Driscoll, Superior, UnitedHealthcare	18,860	14%
Jefferson	Texas Children's, UnitedHealthcare	4,350	3%
Lubbock	Wellpoint, Superior	2,741	2%
MRSA Central	Blue Cross and Blue Shield of Texas, UnitedHealthcare	7,743	6%
MRSA North	Texas Children's, UnitedHealthcare	9,176	7%
MRSA West	Wellpoint, Superior	5,687	4%
Nueces	Driscoll, Superior	4,167	3%
Tarrant	Aetna, Cook Children's	12,541	9%
Travis	Blue Cross and Blue Shield of Texas, Superior	6,231	4%
Total November 2024 Enrollment: 138,752			

Totals may not equal 100% due to rounding.

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D.3. Medicaid Managed Care Program: STAR Health

- As of November 2024, enrollment in STAR Health was 21,317, representing <1% of the total Medicaid managed care population.
- In partnership with Texas Department of Family and Protective Services (DFPS), Medicaid provides a managed care program, STAR Health, for the following groups:
  - Children in DFPS conservatorship (under 18).
  - Children in the Adoption Assistance or Permanency Care Assistance program who are transitioning from STAR Health to STAR or STAR Kids.
  - Youth age 21 years and younger with voluntary extended foster care placement agreements (Extended Foster Care).
  - Youth age 20 and younger who are Former Foster Care Children (FFCC).The STAR Kids capitation rate includes physical health, behavioral health, pharmacy services, and MDCP waiver services for eligible children.
- STAR Health provides a full-range of Medicaid covered medical and behavioral health services for children in DFPS conservatorship and young adults in DFPS paid placements.
- The main goal of STAR Health is to quickly give children in state care the coordinated medical and behavioral health care services they need. These services are available to these children no matter where they are in the state and even when they move.
- The STAR Health program operates statewide, with 1 health plan available.

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D.3. Medicaid Managed Care Program: STAR Health Program Plans By Region

Region	STAR Health	Enrollment	Percentage
Dallas	Superior	2,471	12%
Tarrant	Superior	1,962	9%
Harris	Superior	4,397	21%
Nueces	Superior	710	3%
Bexar	Superior	2,504	12%
Travis	Superior	1,482	7%
El Paso	Superior	203	1%
Lubbock	Superior	953	4%
Hidalgo	Superior	997	4%
Jefferson	Superior	604	3%
MRSA Central	Superior	1,797	8%
MRSA North	Superior	1,541	7%
MRSA West	Superior	1,694	8%
Total November 2024 Enrollment: 21,315			

Totals may not equal 100% due to rounding.

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D.3. Medicaid Managed Care Program: Health Plan Characteristics 3816283

Aetna Better Health

1. Profit status: For-profit
2. Parent company: Aetna/ CVS
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: CVS Caremark
5. Managed care programs: STAR, STAR Kids
6. Enrollment share: 3%

Wellpoint

1. Profit status: For-profit
2. Parent company: Anthem
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: IngenioRx
5. Managed care programs: STAR, STAR+PLUS, Dual Demonstration, STAR Kids
6. Enrollment share: 15%

Blue Cross Blue Shield of Texas

1. Profit status: For-profit
2. Parent company: Health Care Service Corp.
3. Behavioral health subcontractor: Magellan
4. Pharmacy benefit manager: Prime Therapeutics
5. Managed care programs: STAR, STAR Kids
6. Enrollment share: 1%

Dell Children

1. Profit status: Non-profit
2. Parent company: Dell Children's Medical Center
3. Behavioral health subcontractor: Magellan
4. Pharmacy benefit manager: None
5. Managed care programs: STAR
6. Enrollment share: 1%

Scott & White

1. Profit status: Non-profit
2. Parent company: None
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: None
5. Managed care programs: STAR
6. Enrollment share: 1%

Community First Health Plans

1. Profit status: Non-profit
2. Parent company: University Health System
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Kids
6. Enrollment share: 3%

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D.3. Medicaid Managed Care Program: Health Plan Characteristics

Community Health Choice

1. Profit status: Non-profit
2. Parent company: None
3. Behavioral health subcontractor: Beacon Health Options
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Plus
6. Enrollment share: 8%

Cook Children's Health Plan

1. Profit status: Non-profit
2. Parent company: None
3. Behavioral health subcontractor: Beacon Health Options
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Kids
6. Enrollment share: 3%

Driscoll Health Plan

1. Profit status: Non-profit
2. Parent company: Driscoll Children's Hospital
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Kids
6. Enrollment share: 5%

El Paso Health

1. Profit status: Non-profit
2. Parent company: University Medical Center of El Paso
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Health
6. Enrollment share: 2%

FirstCare

1. Profit status: For-profit
2. Parent company: Covenant Health and Hendrick Health System
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR
6. Enrollment share: 2%

Molina Healthcare

1. Profit status: For-profit
2. Parent company: Molina Healthcare, Inc.
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: CVS Caremark
5. Managed care programs: STAR, STAR+PLUS, Dual Demonstration
6. Enrollment share: 7%

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D.3. Medicaid Managed Care Program: Health Plan Characteristics

UnitedHealthcare/ Evercare of Texas

1. Profit status: For-profit
2. Parent company: UnitedHealthcare
3. Behavioral health subcontractor: Optum
4. Pharmacy benefit manager: OptumRx
5. Managed care programs: STAR, STAR+PLUS, Dual Demonstration, STAR Kids
6. Enrollment share: 10%

Superior HealthPlan

1. Profit status: For-profit
2. Parent company: Centene-WellCare Corporation
3. Behavioral health subcontractor: Cenpatico
4. Pharmacy benefit manager: Express Scripts
5. Managed care programs: All programs
6. Enrollment share: 24%

Texas Children's Health Plan, Inc.

1. Profit status: Non-profit
2. Parent company: Texas Children's Hospital
3. Behavioral health subcontractor: None
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Kids, STAR Health
6. Enrollment share: 11%

Parkland Community Health

1. Profit status: Non-profit
2. Parent company: Parkland Health and Hospital System
3. Behavioral health subcontractor: Beacon Health Options
4. Pharmacy benefit manager: Navitus
5. Managed care programs: STAR, STAR Plus, STAR Kids
6. Enrollment share: 4%

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D.3. Medicaid Managed Care Program: Behavioral Health Overview

- Most behavioral health services and pharmacy are included in the health plan's capitation in all Texas managed care programs.
- Home & Community Based Services – Adult Mental Health (HCBS-AMH) services are not included in the health plan's capitation rate and are delivered FFS.
  - The health plans must work with the service coordinators to ensure the non-duplication of services between the programs.
  - For more information on the HCBS-AMH program, see section D.2.

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D.3. Medicaid Managed Care Program: Behavioral Health Benefits

Managed Care Mental Health Benefits
1. Screening services
2. Psychiatric diagnostic evaluation
3. Psychotherapy
4. Psychological and neuropsychological testing
5. Inpatient care
6. Electroconvulsive therapy
7. Pharmacological management
8. Rehabilitative services • Day program • Medication training and support • Crisis intervention • Skills training and development • Psychosocial rehabilitative services
9. Peer specialists
10. Targeted case management

Managed Care Addiction Treatment Benefits
1. Inpatient services
2. Assessment
3. Withdrawal management (outpatient and residential)
4. Individual and group counseling
5. Residential treatment services
6. Outpatient treatment services
7. Medication assisted treatment

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D.3. Medicaid Managed Care Program: SMI Population

- Texas does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI. As a result, most of the SMI population is enrolled in managed care.
- As of November 2024, OPEN MINDS estimates that 95% of the SMI population was enrolled in managed care. Most of these individuals are served by STAR+PLUS health plans.

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D.3. Medicaid Managed Care Program: Pharmacy Benefit

Texas Managed Care Program Pharmacy Benefit	
Responsible For Financing General Pharmacy Benefit	Health plans; the state requires the health plans to contract with a pharmacy benefit manager to process prescription claims.
Responsible For Financing Mental Health Pharmacy Benefit	Health plans
Health Plan Uses A Preferred Drug List (PDL) For General Pharmacy	Health plans are required to adhere to the FFS PDL, which includes mental health and addiction treatment drugs.
Health Plan Uses A PDL For Mental Health Drugs	
Health Plan Uses A PDL For Addiction Treatment Drugs	
Health Plan Use Of Utilization Restrictions For Mental Health & Addiction Treatment Drugs	Health plans are required to follow some prior authorizations put into place by the Medicaid FFS program, however, they may put into place additional clinical prior authorizations by selecting from a pre-approved list. Additionally, health plans may use different strategies to drive member utilization to different drugs on the PDL.
Health Plan Allowed To Implement Pharmacy Lock-In Program	Yes, health plans are required to have written procedures for a Medicaid lock-in program, which was approved by the Texas HHSC Office of Inspector General.

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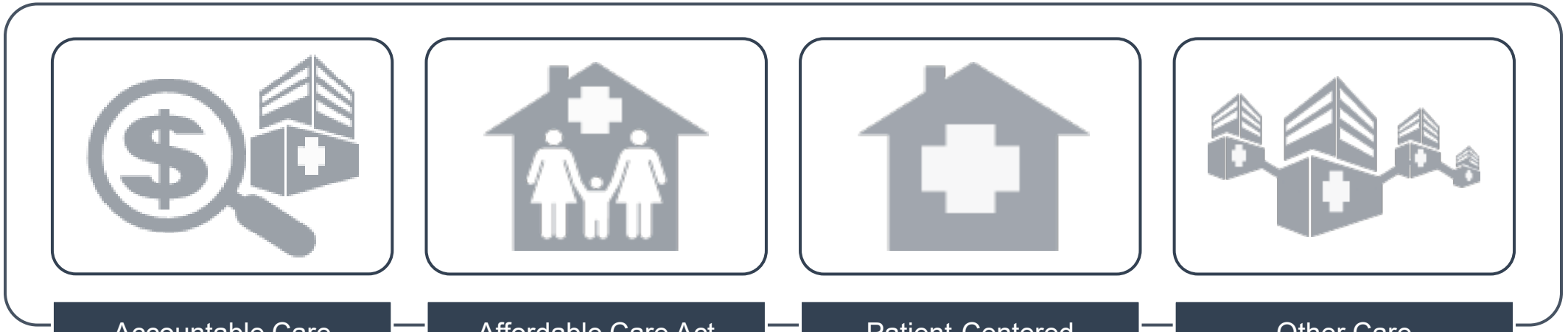
D.4. Medicaid Program: Care Coordination Initiatives



Accountable Care Organization (ACO) Program	Affordable Care Act Health Home	Patient-Centered Medical Home (PCMH)	Other Care Coordination Initiatives
None	None	None	• HCBS for adults with SMI • SP3 for people with MLTSS, I/DD, TBI, ABI. • Comprehensive Health Homes for Integrated Care (CHIC) Kids Pilot

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D.4 Medicaid Program: Care Coordination Initiatives (cont.)

- The Comprehensive Health Homes for Integrated Care (CHIC) Kids Pilot program is being tested within the STAR Kids program model for the effectiveness of enhanced care coordination provided through health homes designed specifically to support children with medically complex conditions and their families.
- Participation in the pilot is voluntary for MCOs, health home providers, and Medicaid members.
- The pilot will run from December 1, 2022, until September 1, 2025.
- To participate in the CHIC Kids Pilot program, STAR Kids managed care organizations (MCOs) and their contracted provider participants will be required to engage in an alternative payment model or other reimbursement arrangement that provides enhanced care coordination through health homes specially designed for children with medically complex conditions.
- Member participation requirements:
  - Children and youth enrolled in STAR Kids who are determined to need a referral for nursing care at home based on the results of the STAR Kids screening and assessment instrument.
  - Must consent to participate
  - Must meet definition of “child with medically complex conditions”.

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D.4 Medicaid Program: Care Coordination Initiatives (cont.)

- The Peer Re-entry Pilot Program provides community-based peer services and access to services from licensed mental health processionals who assist with transition or “re-entry” into clinically appropriate community-based mental health services.
- The peer specialist builds a relationship with the participant while incarcerated and maintains this relationship during and after transition into the community and community-based mental health services.
- The goals of the program are to support recovery through ongoing mental health peer supports.
- Three local mental health authorities were selected based on the state’s assessment of the facility’s level of need, capacity and existing relationships with law enforcement.
- The following LMHAs implemented the Peer Support Re-entry Pilot program:
  - The Harris Center (Harris County)
  - My Health My Resources of Tarrant County (Tarrant County)
  - Tropical Texas Behavioral Health (Cameron, Hidalgo, and Willacy counties)

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D.5. Medicaid Program: Demonstration & Care Management Waivers

Waiver Title	Waiver Description	Waiver Type	Enrollment Cap	Effective Date	Expiration Date
Texas Healthcare Transformation and Quality Improvement Program	• Authorizes statewide managed care for most populations; with the savings financing an uncompensated care pool, and a Delivery System Reform Incentive Payment pool. • Authorizes HCBS for persons age 65 and older, and physically disabled individuals age 21 to 64.	1115	None; Caps in place for HCBS: • SSI-related eligibles- 45,562 • 217-like HCBS group- 24,742	12/12/2011	09/30/2030
Community First Choice (TX-25)	Authorizes selective contracting for Community First Choice services for certain I/DD waiver recipients.	1915 (b)	None	06/01/2020	05/31/2025
Texas Non-Emergency Medical Transportation (TX-28)	HHSC will selectively contract with providers for the provision of NEMT demand response transportation services (DRTS) to the Medicaid fee-for-service (FFS) population in the State of Texas.	1915 (b)	None	06/01/2021	05/31/2026
Healthy Texas Women	Seeks to provide women's health and family planning services at no cost to eligible, low-income Texas women. Currently, there is a waiver amending waiting approval detailing extended postpartum care services.	1115	None	1/22/2020	06/30/2025
Specialized Add-on Services (TX-27)	Provide the Pre-Admission Screening and Resident Review services under the array of habilitative specialized services, called Habilitation Coordination.	1915 (b)	None	12/01/2022	11/30/2027

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D.5. Medicaid Program: Section 1915 (c) HCBS Waivers

Waiver Title	Target Population	2025 Enrollment Cap	Operating Unit	Concurrent Management Authority
TX HCBS Program (0110.R08.04)	Individuals of any age with I/DD	30,675	Department of Aging and Disability Services (DADS)	None
TX Home Living Program (0403.R04.00)	Individuals of any age with I/DD	5,393	Medicaid and CHIP Services	None
TX Community Living Assistance & Support Services (CLASS) (0221.R07.00)	Individuals of any age with I/DD	6,648	DADS	None
TX Youth Empowerment Services (YES) (0657.R03.00)	Individuals with serious emotional disturbance ages 3 to 18	3,591	Medicaid and CHIP Services	None
TX Deaf Blind w/Multiple Disabilities (0281.R06.03)	Individuals of any age with a developmental disability and deaf-blindness	362	Medicaid and CHIP Services	None
TX Medically Dependent Children Program (MDCP) Waiver (0181.R07.00)	Families and primary caregivers of individuals who wish to move from a nursing facility to the community or who wish to remain in the community.	6,796	Medicaid and CHIP Services	None

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D.6. Medicaid Program: New Initiatives

- There are no new or pending initiatives currently.

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E. Medicare Financing & Service Delivery System

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E.1. Medicare Financing & Service Delivery System

Medicare System Characteristics		
Characteristics	**Traditional Medicare (FFS)**	**Medicare Advantage**
Enrollment (September 2024)	2,202,871	3,589,330
SMI Enrollment	• *OPEN MINDS* estimates 62% of the population in Medicare Advantage, 38% in Traditional Medicare.	
Management	• Part A: Inpatient hospital, skilled nursing facility care, nursing home care, hospice and home health care • Part B: Clinical research, ambulance services, durable medical equipment, mental health and limited outpatient prescription drugs	• Medicare Advantage Plans provide Part A and Part B benefits, plus additional benefits based on plan chosen
Payment Model	• Part A & B cover up to 80%, remaining costs can be paid out of pocket	• Fixed amounts paid based on health plan chosen
Geographic Service Area	Statewide	Statewide

Total Medicare: 5,792,201 | Total Medicare With SMI: 1,314,829

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E.1. Medicare Financing & Service Delivery System

Medicare Financial Delivery System Enrollment	
Total Medicare population distribution	As of September 2024: 62% Medicare Advantage, 38% in traditional Medicare.
SMI population inclusion in managed care	Estimated 62% of population in Medicare Advantage, 38% in traditional Medicare.
Medicare population inclusion in Chronic special needs plan or (C-SNP).	Estimated that around 2% of population is enrolled in C-SNP plans.
Medicare population inclusion in Institutional Special Needs Plan (I-SNP).	Estimated that less than 1% of population is enrolled in I-SNP plans.

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E.2. Medicare System: Overview

- Medicare enrollment as of January 2024 was 5,500,498.
- Only about 12% of the Texas population is enrolled in Medicare, compared with nearly 20% of the United States population enrolled in Medicare.
  - Around 10% of all Medicare beneficiaries in Texas were under the age of 65 as of late 2024.
- Medicare Advantage plans are available in all 254 counties in Texas in 2025, but plan availability ranges from as few as six plans in some of the state's service areas to as many as 77 plans for sale in Harris County.
- There are 45 insurers licensed to sell Medigap plans in Texas.
- In Texas, there are 17 stand-alone Medicare Part D prescription drug plans in 2025, with premiums starting at $0..
  - As of late 2024, there were about 1.5 million Medicare beneficiaries in Texas with stand-alone Medicare Part D prescription drug plans. More than 2 million Texas residents had Medicare Part D prescription drug coverage integrated with their Medicare Advantage plans.
- Many Medicare beneficiaries receive financial assistance through Medicaid with the cost of Medicare premiums, prescription drug expenses, and services not covered by Medicare – such as long-term care.

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E.3. Medicare ACOs

Medicare Shared Savings Program		
1. Accountable Care Coalition of Southeast Partners	20. Health Plus Network	39. St Joseph Health Partners ACO
2. Alliance ACO, LLC	21. Houston Methodist Coordinated Care	40. Steward National Care Network, Inc
3. Ascension Seton Accountable Care Organization	22. IntraCare Premier ACO	41. TEAM ACO
4. Baptist Integrated Physician Partners	23. LTC ACO	42. Aledade 158 Texas MSSP Enhanced
5. Baylor Scott & White Quality Alliance	24. Main Street Rural Health Cottonwood ACO LLC	43. Texas Panhandle Clinical Partners ACO LLC
6. Baylor St. Lukes's Health Network ACO	25. Main Street Rural Health Dogwood ACO LLC	44. Texoma Clinical Partners ACO LLC
7. Buena Vida y Salud	26. Main Street Rural Health Hickory ACO LLC	45. The Accountable Care Organization, Ltd
8. Caravan Collaborative Pathways	27. Main Street Rural Health Juniper ACO LLC	46. The Rural Advantage LLC
9. Caravan Health ACO 43, LLC	28. Main Street Rural Health Magnolia ACO LLC	47. TP-ACO LLC
10. Caravan Health ACO 50, LLC	29. Main Street Rural Health Maple ACO LLC	48. Aledade 57 Western Sky MSSP Enhanced
11. Care Partners ACO, LLC	30. Main Street Rural Health Willow ACO LLC	49. USMM Accountable Care Partners
12. CareMax Accountable Care Network, LLC	31. Medical Partners Management Group ACO	50. UT Health San Antonio Regional Physician Network
13. CHRISTUS Health Quality Care Alliance	32. Memorial Hermann Accountable Care Organization	51. Select Physicians Associates, LLC
14. CHSPSC ACO 6, LLC	33. Methodist Alliance for Patients and Physicians	52. WellMed DFW Medicare ACO
15. CHSPSC ACO 8, LLC	34. Oschner Accountable Care Network, LLC	53. WellMed Greater Texas Medicare ACO
16. CHSPSC ACO 17, LLC	35. On Belay Health Solutions	54. WellMed Texas Medicare ACO
17. Covenant ACO	36. PQN – Central Texas, LLC	55. Wellvana Essential Care LLC
18. Elite Patient Care, LLC	37. Prime Care Managers	56. Aledade 149 Regional MSSP
19. Health Choice Community Partners, LLC	38. Privia Quality Network Gulf Coast II, LLC	57. Zenith Independent Physicians ACO

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E.4. Medicare System: New Initiatives

- There are no new or pending Medicare initiatives in the state.

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F. Dual Eligible Financing & Service Delivery System

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F.1. Dual Eligible Medicaid Financing & Service Delivery System

Dual Eligible* Medicaid System Characteristics				
Characteristics	**Medicaid Fee-For-Service (FFS)**	**STAR+PLUS Medicaid Managed Care**	**Dual Eligible Demonstration**	**PACE**
Enrollment (December 2024)	16,728	524,594	19,460	1,264
Estimated SMI Enrollment	3,512	110,164	4,086	265
Management	• Health and Human Services Commission • Texas Medicaid and Healthcare Partnership provides administrative functions	Seven health plans	Four health plans	3 non-profit organizations
Payment Model	FFS	Capitated rate	Blended capitated rate	Blended capitated rate
Geographic Service Area	Statewide	Statewide; plans available regionally	Six counties: Bexar, Dallas, El Paso, Harris, Hidalgo, and Tarrant	Certain ZIP codes

Total Dual Eligible Enrollment: 562,046 | Total Dual Eligible Enrollment With SMI: 118,027

*Unless otherwise noted, the term *dual eligibles* in this section refers to Medicare enrollees with full Medicaid benefits.

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F.2. Largest Dual Eligible Health Plans By Estimated SMI Enrollment

Health Plans	Parent Company	Plan Type	Enrollment (April 2024)	Estimated SMI Enrollment
UnitedHealthcare Dual Complete	UnitedHealthcare	Medicare Advantage D-SNP	127,823	26,843
UnitedHealthcare Community Plan of Texas, LLC	UnitedHealthcare	Medicare Advantage D-SNP	70,618	14,830
Humana Insurance Company of Kentucky	Humana, Inc	Medicare Advantage D-SNP	58,278	12,238
UnitedHealthcare Dual Complete Choice	UnitedHealthcare	Medicare Advantage D-SNP	46,404	9,745
Amerivantage Dual Coordination	Amerigroup Texas, Inc	Medicare Advantage D-SNP	31,639	6,644
Cigna-HealthSpring TotalCare	HealthSpring Life and Health Insurance Company, Inc	Medicare Advantage D-SNP	31,603	6,637
Aetna Medicare Dual Core	Aetna Better Health of Texas, Inc	Medicare Advantage D-SNP	28,347	5,953
Humana Gold Plus	Humana, Inc	Medicare Advantage D-SNP	18,535	3,892
UnitedHealthcare Dual Complete Plan 1	UnitedHealthcare	Medicare Advantage D-SNP	14,269	2,996
WellCare Access	WellCare of Texas, Inc	Medicare Advantage D-SNP	10,474	2,200

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F.3. Dual Eligible Medicaid Financing & Delivery System: Overview

- Dual eligible enrollment as of April 2024 was 462,046.
- Medicare covers most acute services (which may include psychiatric care), while Medicaid, the payer of last resort, covers LTSS and non-physician behavioral health services.
- Dual eligibles are enrolled in STAR+PLUS unless they receive LTSS services for an intellectual/developmental disability (I/DD).
- Dual eligibles also have the option to enroll in the state's dual demonstration or PACE program in select areas of the state.
- D-SNP enrollment as of April 2024 is 481,171, estimated SMI was 101,046.

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F.3. Dual Eligible Medicaid Financing & Delivery System: Integrated Care Project Demonstration

- The Texas dual eligible demonstration program is called the Texas Dual Eligible Integrated Care Project.
- The demonstration contracts with STAR+PLUS health plans to provide all STAR+PLUS and Medicare covered services.
- As of January 2025, enrollment in the demonstration is 19,460.
- HHSC will end the Dual Demonstration Program by Dec. 31, 2025, and transition Medicare-Medicaid Plans (MMPs) to integrated Dual Eligible Special Needs Plans (D-SNPs) by Jan. 1, 2026.
- This transition is being implemented in accordance with the Centers for Medicare & Medicaid Services (CMS) Contract Year 2023 Medicare Advantage and Part D Final Rule.
- When MMP members transition to a STAR+PLUS MCO, they must choose between a Medicare Advantage Plan, D-SNP or fee-for-service Medicare. MMP members are encouraged to choose companion D-SNPs operated by the same parent organization or that are the same entity as their STAR+PLUS MCOs for better coordination of their Medicare and Medicaid services.

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F.3. Dual Eligible Medicaid Financing & Delivery System: Integrated Care Project Demonstration

Texas Dual Eligible Integrated Care Project Demonstration Overview	

Target Population	▪ Full benefit dual eligibles ages 21 and over in the selected regions who are required to enroll in the STAR+PLUS program to receive Medicaid covered services.
	▪ Excludes persons residing in intermediate care facilities for individuals with intellectual disabilities and individuals receiving services through the following waivers:
	  • Community Living Assistance and Support Services (CLASS)
	  • Deaf Blind with Multiple Disabilities Program (DBMD)
	  • Home and Community-based Services (HSC)
	  • Texas Home Living Program (TxHmL)
	▪ Excludes individuals with third party private insurance

Geographic Service Area	Six counties: Bexar, Dallas, El Paso, Harris, Hidalgo, and Tarrant
Enrollment Model	• Passive enrollment with opt-out • Opt-in enrollment for individuals enrolled in PACE and the CMS Independence at Home demonstration • Individuals receiving services through a Medicare Advantage plan who are not participating in the demonstration must disenroll from that plan before opting-in
Care Delivery Model	• Integrated plan of care developed by a service coordinator with the individual and their chosen support team • Risk stratification of members into two levels using predictive-modeling software • Comprehensive risk assessment completed every 12 months at minimum • Individual Support Plan for individuals needing home- and community-based services (HCBS)

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F.3. Dual Eligible Medicaid Financing & Delivery System: Integrated Care Project Demonstration

Texas Dual Eligible Integrated Care Project Demonstration Overview	
Benefits	• Physical health, behavioral health, community-based and nursing facility LTSS, and pharmacy services • Services available in the STAR+PLUS HCBS waiver for those who meet the waiver requirements • Excluded are hospice services, pre-admission screening and resident review (PASR), and Medicaid transportation
Payment Model	Three monthly capitation payments • From CMS: One payment for Medicare Parts A and B and one payment for Medicare Part D • From the state: One payment for Medicaid services
Practice Performance & Improvement	• Quality withhold of 3% for demonstration years three, four, and five (calendar years 2018, 2019, and 2020). There is an additional 1% added for years six, seven, and eight (2021, 2022,2023). • State-defined measures evaluating LTSS • HEDIS/NCQA and AHRQ/CAHPS measures • CMS measures

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F.4. Dual Eligible Medicaid Financing & Delivery System: New Initiatives

- There are no new or pending initiatives currently.

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G. Long-Term Services & Supports Financing & Service Delivery System

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G.1. LTSS Financing & Service Delivery System

- STAR+PLUS provides physical health, behavioral health, pharmacy nursing facility services, and community-based LTSS.
- Access to HCBS is limited to the enrollment caps put in place by Texas's 1115 demonstration waiver.

LTSS* Medicaid System Characteristics	
Characteristics	**Medicaid Managed Care**
Enrollment (January 2025)	524,594
Estimated SMI Enrollment	110,164
Management	• Physical health: Seven health plans • Behavioral health: Seven health plans
Payment Model	• Physical health: Capitated rate • Behavioral health: Capitated rate
Geographic Service Area	Statewide

Total LTSS: 524,594 | Total LTSS With SMI: 110,164

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G.1. Medicaid LTSS Service Delivery System Enrollment By Eligibility Group

The only individuals excluded from managed care are dual eligibles receiving services through the I/DD waiver.

Population	Mandatory FFS Enrollment	Option To Enroll In FFS Or Managed Care	Mandatory Managed Care Enrollment
Disabled adults			X
Disabled children			X
Blind individuals			X
Aged individuals			X
Dual eligibles	X* (Individuals receiving services through the I/DD Waiver)		X* (All Other Dual Eligibles)
Individuals with I/DD			X
Individuals residing in nursing homes			X
Individuals residing in ICF/IID			X
Other HCBS Recipients			X
Other populations			

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G.2. LTSS Medicaid Financing & Delivery System: Overview

- STAR+PLUS provides physical health, behavioral health, pharmacy, nursing facility services, and community-based LTSS.
- Access to HCBS is limited to the enrollment caps put in place by Texas's 1115 demonstration waiver.
- As of January 2025, enrollment in STAR+PLUS was 524,594, representing 14% of the total managed care population.
- To qualify for the STAR+PLUS program, a Medicaid beneficiary must meet at least one of the following criteria:
  - Age 21 or older, receiving Supplemental Security Income (SSI) benefits, and eligible for Medicaid due to low-income
  - Not receiving SSI, but eligible for STAR+PLUS HCBS waiver
  - Age 21 or older, receiving Medicaid through what are called "Social Security Exclusion programs," and meeting program rules for income and asset levels
  - Age 21 or over, residing in a nursing home, and receiving Medicaid while in the nursing home
  - Enrolled in the Breast and Cervical Cancer Program
- The STAR+PLUS program operates statewide, with a total of five health plans available regionally by service area. STAR+PLUS Medicaid members can select from at least two health plans in each region.
- Members who are dual eligibles, have a history of mental health or addiction disorder, or receive LTSS must be contacted by the service coordinator at least once via phone and at least once face-to-face.
- The STAR+PLUS HCBS provisions of the state's section 1115 waiver authorizes additional LTSS for those who qualify for a nursing facility level of care. These services—such as nursing, personal assistance services, adaptive aids, medical supplies, and minor modifications to make members' homes more accessible—are also included in the health plan's capitation.

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G.3. Medicaid LTSS Program: Health Plan Characteristics

Wellpoint

1. **Profit status:** For-profit
2. **Parent company:** Anthem
3. **Behavioral health subcontractor**: None
4. **Pharmacy benefit manager:** CarelonRx
5. **Managed care programs:** STAR, STAR+PLUS, Dual Demonstration, STAR Kids

Molina Healthcare

1. **Profit status:** For-profit
2. **Parent company:** Molina Healthcare, Inc.
3. **Behavioral health subcontractor:** None
4. **Pharmacy benefit manager:** CVS Caremark
5. **Managed care programs:** STAR, STAR+PLUS, Dual Demonstration

Superior HealthPlan

1. **Profit status:** For-profit
2. **Parent company:** Centene Corporation
3. **Behavioral health subcontractor:** Cenpatico
4. **Pharmacy benefit manager:** Envolve Rx
5. **Managed care programs:** All programs

UnitedHealthcare Community Plan

1. **Profit status:** For-profit
2. **Parent company:** UnitedHealthcare
3. **Behavioral health subcontractor:** Optum
4. **Pharmacy benefit manager:** OptumRx
5. **Managed care programs:** STAR, STAR+PLUS, Dual Demonstration, STAR Kids

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G.4. Medicaid LTSS Program: Health Benefits

Most behavioral health services and pharmacy are included in the health plan's capitation in all Texas managed care programs.

Managed Care Mental Health Benefits
1. Screening services
2. Psychiatric diagnostic evaluation
3. Psychotherapy
4. Psychological and neuropsychological testing
5. Inpatient care
6. Electroconvulsive therapy
7. Pharmacological management
8. Rehabilitative services • Day program • Medication training and support • Crisis intervention • Skills training and development • Psychosocial rehabilitative services
9. Peer specialists
10. Targeted case management

Managed Care Addiction Treatment Benefits
1. Inpatient services
2. Assessment
3. Withdrawal management (outpatient and residential)
4. Individual and group counseling
5. Residential treatment services
6. Outpatient treatment services
7. Medication assisted treatment

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G.5. LTSS Medicaid Financing & Delivery System: New Initiatives

- There are no new or pending initiatives currently.

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H. State Behavioral Health Administration & Finance System

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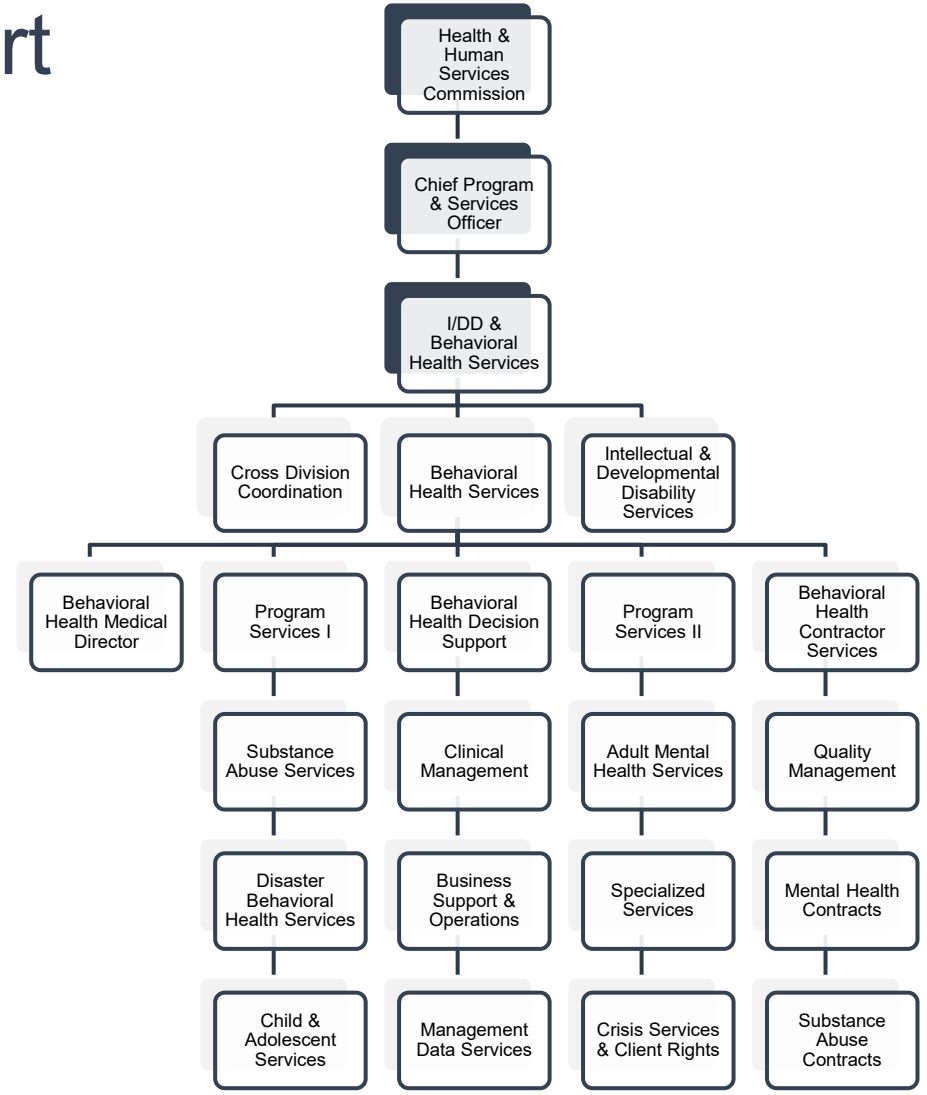
H.1. Health & Human Services Commission Governance: Organization Chart



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H.1. Health & Human Services Commission Governance: Key Leadership

Name	Position	Department	Email
Cecile Erwin Young	Executive Commissioner	Texas Health & Human Services Commission (HHSC)	cecile.young@hhs.texas.gov
Michelle Alletto	Chief Program and Services Officer	HHSC	michelle.alletto@hhs.texas.gov
Trina Ita	Deputy Executive Commissioner, Behavioral Health Services	HHSC, Behavioral Health Services	trina.ita@hhs.texas.gov

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H.2. Health & Human Services Commission: Behavioral Health Budget

Budget Item	SFY 2025 Budget Request	Percent Of Budget
Mental health state hospitals	$484,296,192	35%
Adult community mental health services	$431,551,930	30%
Substance abuse prevention, intervention, treatment	$227,093,614	19%
Community mental health crisis services	$129,468,815	9%
Children community mental health services	$93,594,042	6%
Behavioral health waiver	$26,451,746	2%
Budget Total: $1,442,456,339		

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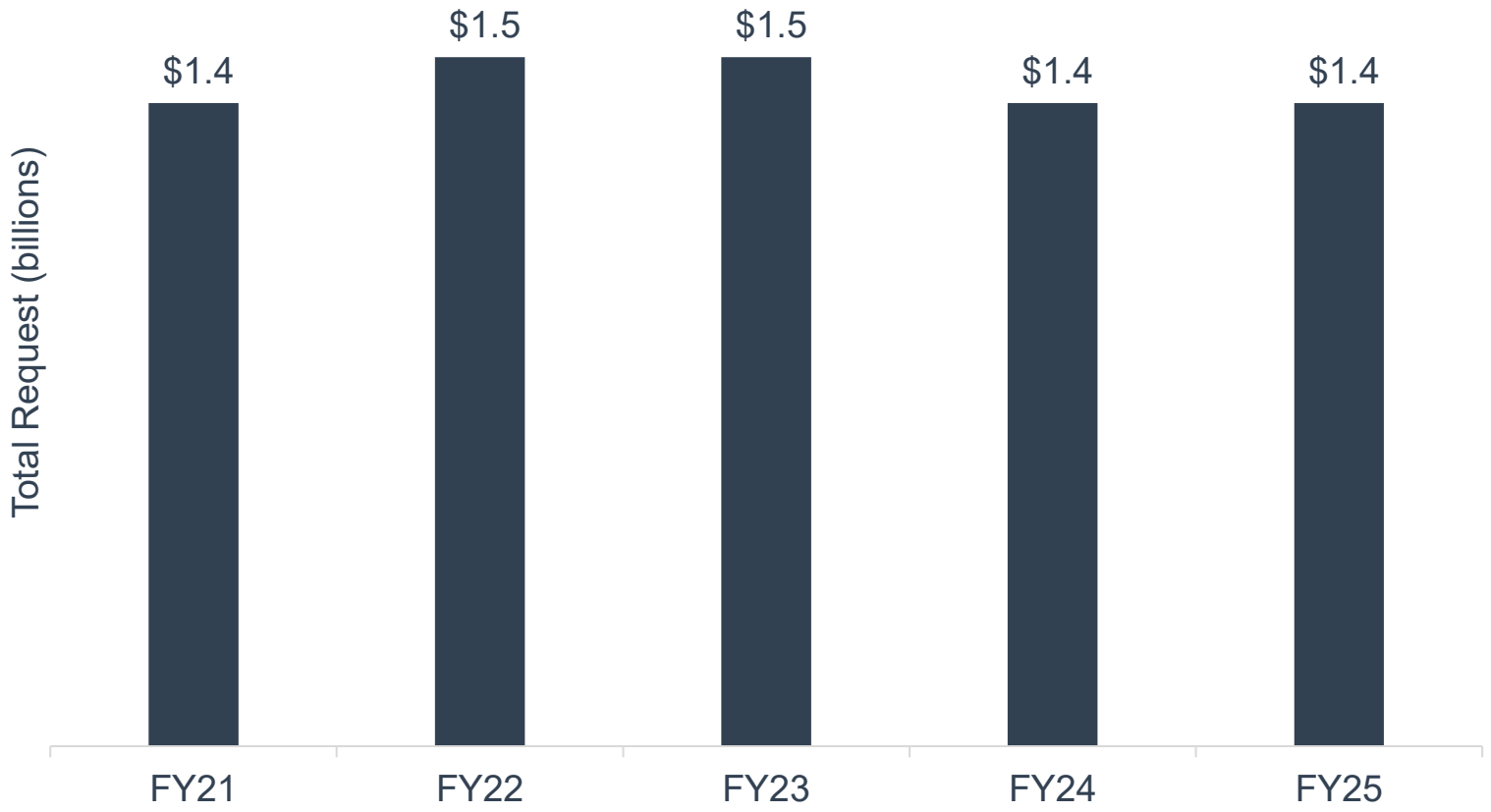
H.2. Health & Human Services Commission: Behavioral Health Budget Over Time



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H.3. State Psychiatric Institutions

Institution	Location	Type Of Services	Beds
Austin State Hospital	Austin	Forensic/Civil	240
Big Spring State Hospital	Big Spring	Forensic/Civil	144
El Paso Psychiatric Center	El Paso	Forensic/Civil	74
Kerrville State Hospital	Kerrville	Forensic	218
North Texas State Hospital	Vernon, Wichita Falls	Forensic/Civil	641
Rio Grande State Center	Harlingen	Forensic/Civil	128
Rusk State Hospital	Rusk	Forensic/Civil	288
San Antonio State Hospital	San Antonio	Forensic/Civil	300
Terrell State Hospital	Terrell	Forensic/Civil	288
Total			**2,321**

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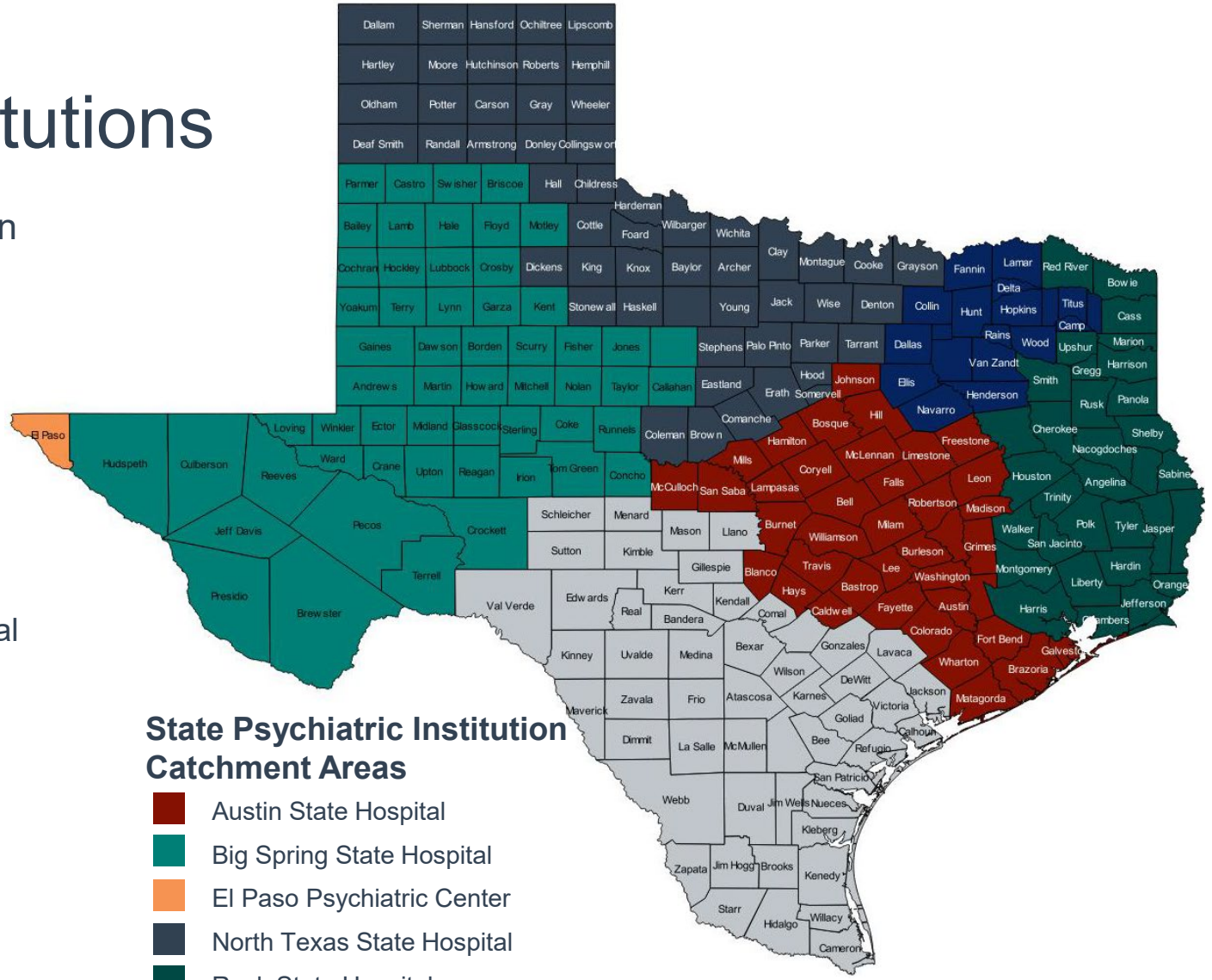
H.3. State Psychiatric Institutions

- The Texas state legislature authorized $300 million for state hospital expansion, renovation, and construction over three phases. The Health and Human Services Commission is working on the following phase I projects:
  - HHSC is planning to build a 75-bed non-maximum security hospital in Amarillo.
  - Add a 50-bed maximum-security unit in Lubbock, Texas.
  - Build a replacement hospital for Terrell State Hospital that will have 250 beds.
  - Build a replacement hospital for the North Texas State Hospital – Wichita Falls campus that will have 200 beds.
  - Expand the El Paso Psychiatric Center by 50 non-maximum-security beds.
  - Expand the Rio Grande State Center State Hospital by 50 maximum-security beds.
  - Renovate the existing building 521 at SASH campus to convert the recently 40- Bed forensic unit to 40-Bed MSU unit.



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H.4. Behavioral Health Safety-Net Delivery System

- The Health and Human Services Commission (HHSC) provides mental health services to the safety-net population through service area contracts with 39 community mental health centers called Local Mental Health Authorities (LMHAs). A listing of LMHAs and their service areas begins on the following slide.
- The LMHAs are formed and governed at the county or joint-county level, with oversight provided by HHSC and financial support from federal, state, and local sources.
- The LMHAs also serve the Medicaid population, and are authorized to provide the following services:
  - Community crisis, community outpatient services, children's services, diversion, inpatient/residential, disaster behavioral health teams
- HHSC provides addiction treatment services to the safety-net population by funding provider organizations throughout the state. The intake organizations for safety-net addiction treatment services are called Outreach, Screening, and Referral Centers (OSARs). A listing of OSARs and their service areas begins on slide 93.
  - All 14 OSARs are located within LMHAs
  - OSARs serve approximately 30,000 individuals annually

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H.4. Behavioral Health Safety-Net Delivery System: LMHA Service Areas

Map Code	Local Mental Health Authority	Counties Served
1	ACCESS	Anderson, Cherokee
2	Andrews Center Behavioral Healthcare System*	Henderson, Rains, Smith, Van Zandt, Wood
3	Integral Care	Travis
4	Betty Hartwick Center	Callahan, Jones, Shackelford, Stephens, Taylor
5	Bluebonnet Trails Community Services*	Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee, Williamson
6	Border Region Behavioral Health Center	Jim Hogg, Starr, Webb, Zapata
7	Burke Center*	Angelina, Houston, Nacogdoches, Newton, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler
8	Camino Real Community Services	Atascosa, Dimmit, Frio, Karnes, La Salle, Karnes, Maverick, McMullen, Wilson, Zavala
9	The Center for Health Care Services*	Bexar
10	Center for Life Resources	Brown, Coleman, Comanche, Eastland, McCulloch, Mills, San Saba
11	Central Counties Services	Bell, Coryell, Hamilton, Lampasas, Milam
12	Central Plains Center	Bailey, Briscoe, Castro, Floyd, Hale, Lamb, Motley, Parmer, Swisher
13	Coastal Plains Community Center	Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, San Patricio
14	Community Healthcore	Bowie, Cass, Gregg, Harrison, Marion, Panola, Red River, Rusk, Upshur

*Also operates as an OSAR

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H.4. Behavioral Health Safety-Net Delivery System: LMHA Service Areas

Map Code	Local Mental Health Authority	Counties Served
15	Denton County MHMR Center	Denton
16	Emergence Health Network*	El Paso
17	Gulf Bend Center	Calhoun, DeWitt, Goliad, Jackson, Lavaca, Refugio, Victoria
18	Gulf Coast Center*	Brazoria, Galveston
19	Heart of Texas Region MHMR Center	Bosque, Falls, Freestone, Hill, Limestone, McLennan
20	Helen Farabee Centers*	Archer, Baylor, Childress, Clay, Cottle, Dickens, Foard, Hardeman, Haskell, Jack, King, Knox, Montague, Stonewall, Throckmorton, Wichita, Wilbarger, Wise, Young
21	Hill Country Mental Health and Developmental Disabilities Centers	Bandera, Blanco, Comal, Edwards, Gillespie, Hays, Kendall, Kerr, Kimble, Kinney, Llano, Mason, Medina, Menard, Real, Schleicher, Sutton, Uvalde, Val Verde
22	Lakes Regional MHMR Center	Camp, Delta, Franklin, Hopkins, Lamar, Morris, Titus
23	StarCare Specialty Health System*	Cochran, Crosby, Hockley, Lubbock, Lynn
24	MHMR Authority of Brazos Valley	Brazos, Burleson, Grimes, Leon, Madison, Robertson, Washington
25	The Harris Center for Mental Health and IDD*	Harris
26	Neuces Center for Mental Health and Intellectual Disabilities	Nueces
27	MHMR of Tarrant County*	Tarrant
28	MHMR Services for the Concho Valley	Coke, Concho, Crockett, Irion, Reagan, Sterling, Tom Green

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H.4. Behavioral Health Safety-Net Delivery System: LMHA Service Areas

Map Code	Local Mental Health Authority	Counties Served
29	North Texas Behavioral Health Authority (Formerly NorthSTAR program)*	Dallas, Ellis, Hunt, Kaufman, Navarro, Rockwall
30	Pecan Valley Centers for Behavioral and Developmental HealthCare	Erath, Hood, Johnson, Palo Pinto, Parker, Somervell
31	PermiaCare (formerly Permian Basin Community Centers for MHMR)*	Brewster, Culberson, Ector, Hudspeth, Jeff Davis, Midland, Pecos, Presidio
32	Spindletop Center	Chambers, Hardin, Jefferson, Orange
33	Texana Center	Austin, Colorado, Fort Bend, Matagorda, Waller, Wharton
34	Texas Panhandle Centers	Armstrong, Carson, Collingsworth, Dallam, Deaf Smith, Donley, Gray, Hall, Hansford, Hartley, Hemphill, Hutchinson, Lipscomb, Moore, Ochiltree, Oldham, Potter, Randall, Roberts, Sherman, Wheeler
35	Texoma Community Center	Cooke, Fannin, Grayson
36	Tri-County Services	Liberty, Montgomery, Walker
37	Tropical Texas Behavioral Health*	Cameron, Hidalgo, Willacy
38	West Texas Centers	Andrews, Borden, Crane, Dawson, Fisher, Gaines, Garza, Glasscock, Howard, Kent, Loving, Martin, Mitchell, Nolan, Reeves, Runnels, Scurry, Terrell, Terry, Upton, Ward, Winkler, Yoakum
39	Life Path Systems*	Collin

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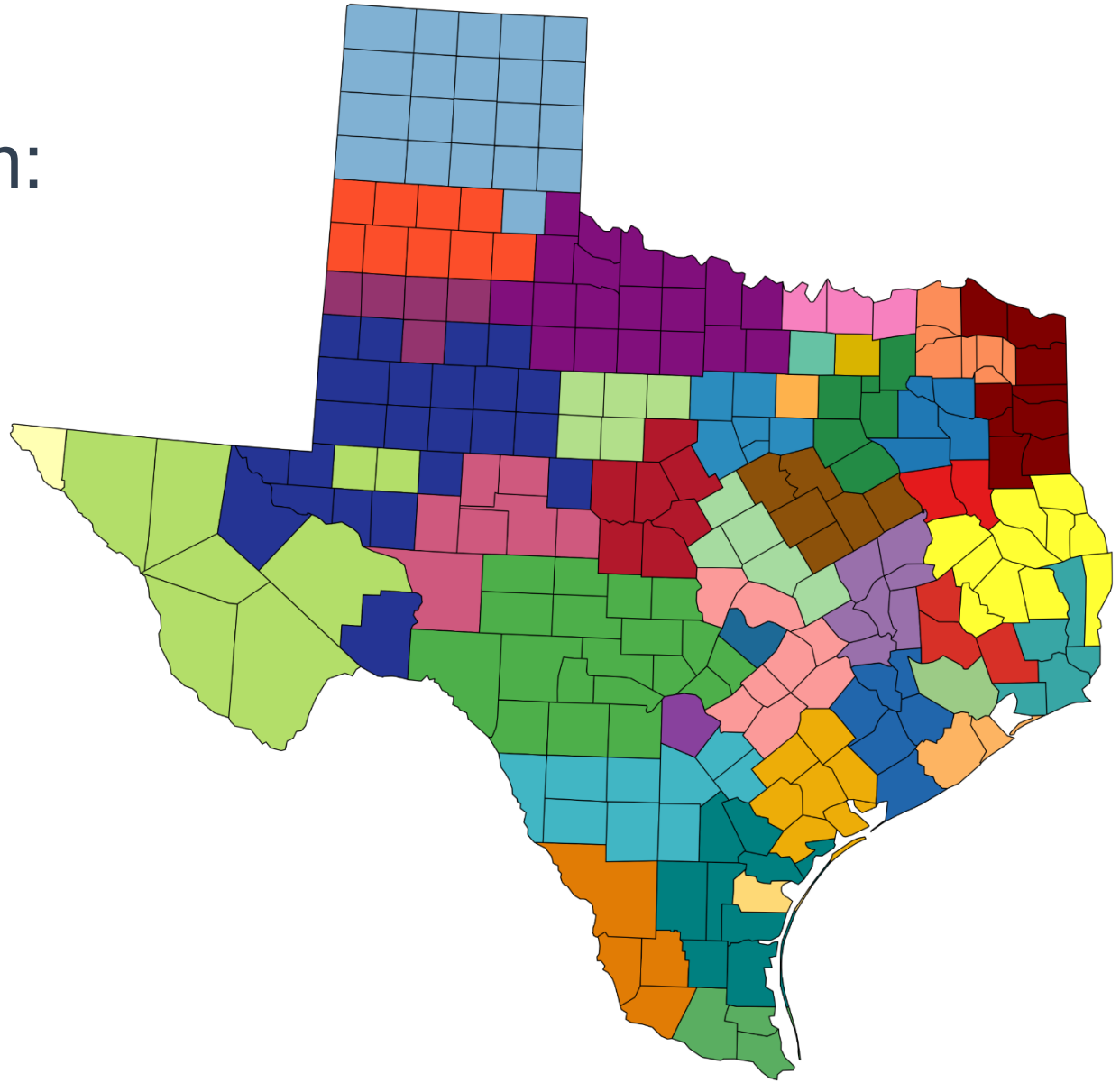
H.4. Behavioral Health Safety-Net Delivery System: LMHA Catchment Areas



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H.4. Behavioral Health Safety-Net Delivery System: OSAR Service Areas

Region	OSAR	Counties Served
1	StarCare Specialty Health System	Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum
2	Helen Farabee Centers	Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackelford, Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young
3	Life Path Systems	Collin
3	MHMR of Tarrant County	Cooke, Denton, Erath, Fannin, Grayson, Hood, Johnson, Palo Pinto, Parker, Somervell, Tarrant, Wise
3	North Texas Behavioral Health Authority	Dallas, Ellis, Hunt, Kaufman, Navarro, Rockwall
4	Andrews Center Behavioral Healthcare System	Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood
5	Burke Center	Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler
6	Gulf Coast Center	Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Matagorda, Waller, Wharton

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H.4. Behavioral Health Safety-Net Delivery System: OSAR Service Areas

Region	OSAR	Counties Served
6	The Harris Center for Mental Health and IDD	Harris, Liberty, Montgomery, Walker, Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Matagorda, Waller, Wharton
7	Bluebonnet Trails Community Services	Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson
8	The Center for Health Care Services	Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala
9	PermiaCare	Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, Martin, Mason, McCulloch, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler
10	Emergence Health Network	Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio Counties
11	Tropical Texas Behavioral Health	Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata

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H.5. Behavioral Health System: New Initiatives - Texas Statewide Behavioral Health Strategic Plan

- The Statewide Behavioral Health Coordinating Council developed a new five-year behavioral health strategic plan for fiscal years 2022 - 2026. This plan includes a statewide, strategic approach to prevent and reduce justice involvement for those with behavioral health needs.
- The strategic plan includes strategies to address the needs of individuals who use substances as well as strategies targeting diversion and community integration of individuals involved in the juvenile and criminal justice systems.
- The SBHCC developed the first Texas Statewide Behavioral Health Strategic Plan for fiscal years 2017-2021. With the creation of the strategic plan, state agencies that receive general revenue funding for behavioral health services work together to fulfill their legislative charge to:
  - Coordinate programs and services to eliminate redundancy;
  - Utilize best practices in contracting standards;
  - Perpetuate identified, successful models for mental health and substance use disorder treatment
  - Ensure optimal service delivery
  - Identify and collect comparable data on results and effectiveness.
- The Council created a sub-plan related to substance use services, as well as a sub-plan related to diversion and forensic services.

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I. Appendices

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I.1. *OPEN MINDS* Estimates For Share Of SMI Consumers Per Payer/Plan

Enrollment Category	Serious Mental Illness (SMI) Prevalence Estimate	Source
Commercial	4.9% of the commercially insured population over age 18	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a
Medicaid	8.8% of persons enrolled in traditional Medicaid	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a
Medicare	22.7% of persons in the Medicare population, not dually eligible for Medicaid	Figueroa, J. F., Phelan, J., Orav, E. J., Patel, V., & Jha, A. K. (2020). Association of mental health disorders with health care spending in the Medicare population. Retrieved July 2023 from https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2762948#:~:text=Results%20Of%204%20358%20975,had%20no%20known%20mental%20illness

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I.1. *OPEN MINDS* Estimates For Share Of SMI Consumers Per Payer/Plan

Enrollment Category	Serious Mental Illness (SMI) Prevalence Estimate	Source
Medicare-Medicaid Dual Eligibility	21% of persons in the Medicare population dually eligible for partial Medicaid benefits	ATI Advisory. (2022). A Profile of Medicare-Medicaid Dual Beneficiaries. Retrieved March 2023 from https://atiadvisory.com/wp-content/uploads/2022/06/A-Profile-of-Medicare-Medicaid-Dual-Beneficiaries.pdf
	16% of persons in the Medicare population dually eligible for full Medicaid benefits	
Other Public	4.5% of persons served by the Veterans Administration health care system or the TRICARE military health system	U.S. Census Bureau (2023). Table HHI-01. Health Insurance Coverage Status and Type of Coverage--All Persons by Sex, Race and Hispanic Origin: 2017 to 2023. Retrieved March 2023 from https://www.census.gov/data/tables/time-series/demo/health-insurance/historical-series/hic.html
No Health Care Insurance	6.7% of uninsured persons over age 18	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Alternative Benefit Plan	ABP	State designed benefit package for the Medicaid expansion population (childless adults with income below 138% of the FPL). The benefit package must include the ten essential benefits as laid out in the PPACA. The Medicaid expansion population deemed medically frail (including those with SMI) are exempt from receiving benefits through the ABP.
Accountable Care Organizations	ACO	ACOs are groups of provider organizations—such as physicians and hospital systems—that form an agreement to coordinate care for a set group of individuals. If the ACO delivers high quality care—measured through performance metrics—and lowers the cost of providing care against a baseline, then the organization receives a portion of the savings generated. ACOs can exist alongside all payment structures (fee-for-service and managed care delivery systems) and payers (Medicare, Medicaid, commercial).
Administrative Services Organization	ASO	An arrangement in which an organization hires a third party to deliver administrative services to the organization, such as claims processing and billing. The ASO is not at-risk.
Capitation		A set amount of money paid per enrollee per month to a health care entity to cover the cost of health care services. Capitation can cover the cost of all health care services or subset of services, such as care coordination or home- and community-based services.
Carve-out		A carve-out is a Medicaid managed care financing model where some portion of Medicaid benefits—dental services, pharmacy services, behavioral health services, etc.—are separately managed and/or financed. Carve-out services can be financed on an at-risk basis by another organization or retained by the state Medicaid agency on a fee-for-service basis.
Certified Community Behavioral Health Clinic	CCBHC	Behavioral health clinics specially certified in a demonstration established by section 223 of the Protecting Access to Medicare Act of 2014. The clinics are designed to provide community-based mental health and addiction treatment services, to advance the integration of behavioral health with physical health care, and to provide care coordination across the full spectrum of health services.

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Community Mental Health Center	CMHC	An organization that can demonstrate that it is actively providing all services in section 1913(c)(I) of the Public Health Services Act, including a.) Outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically mentally ill, and residents of the CMHC's mental health service area who have been discharged from inpatient treatment at a mental health facility; b.) 24 hour-a-day emergency care services; c.) Day treatment, or other partial hospitalization services, or psychosocial rehabilitation services; and d.) Screening for patients being considered for admission to state mental health facilities to determine the appropriateness of such admission. Additionally, the organization must meet the specifications for the state where it provides services.
Dual Eligible		An individual who is eligible for Medicare (Part A and B) and Medicaid. Medicare serves as the individual's primary insurance, and Medicaid acts as a supplement. Dual eligibles are sometimes referred to as Medicare-Medicaid enrollees (MMEs).
Federal Poverty Level	FPL	The U.S. Department of Health and Human Services sets a standard level of income that is used to determine eligibility for services and benefits, including Medicaid. In 2025, the FPL is $15,060 for an individual and $31,200 for a family of four.
Fee-For-Service	FFS	A system where the payer, in this case Medicaid, contracts directly with provider organizations and pays for providing care on a unit-by-unit basis. Health plans may also reimburse provider organizations on a FFS basis meaning they pay for each unit of care or test.
Health Home		A "whole person" care coordination model that specifically targets populations with chronic conditions including those with SMI. Health homes provide six essential functions: 1.) Comprehensive care management; 2.) Care coordination and health promotion; 3.) Comprehensive transitional care from inpatient to other settings, including appropriate follow-up; 4.) Individual and family support; 5.) Referral to community and social support services; 6.) Use of health information technology to link services. Health homes were originally developed as a Medicaid program; but have been adopted by other payers. For a state to have an official health home program they must have an approved state plan amendment.

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Health Insurance Marketplace	HIM	Created by the PPACA, the health insurance marketplace is an online platform where individuals and small businesses can purchase health insurance. The federal government subsidizes coverage purchased on the marketplace through premium tax credits for individuals with income up to 400% of the FPL.
Home- & Community-Based Services	HCBS	Long-term services and supports provided in the home or community in order to avoid institutionalization. Traditionally provided through 1915(c) waivers, HCBS services are usually limited to specific populations and a specific number of people. HCBS services include skilled nursing care, personnel care services, assistance with activities of daily living, and custodial care.
Institutions For Mental Disease	IMD	A hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases, including addiction. Federal financial participation is available for Medicaid IMD services for individuals under the age of 21 and age 65 and over. In recent years, CMS has relaxed the rules prohibiting payments in IMDs for individuals age 21-64. Medicaid health plans may provide up to 15 days of IMD services per month in lieu of state plan services if medically appropriate, cost effective, and consented to by the individual. Additionally, states may be granted a 1115 waiver authority to allow individuals to receive addiction and mental health treatment in IMDs.
Long-Term Services & Supports	LTSS	Services provided in the home, community, or institutional setting to those who experience difficulty living independently and completing activities of daily living as a result of cognitive disabilities, physical impairments, disabling chronic conditions, and/or age.
Managed Care		A health care delivery and financing system designed to manage cost, utilization, and quality. In Medicaid, states generally implement managed care through contracts with health plans, which provide a limited set of benefits to enrollees through a capitated or per person per month (PMPM) rate. The health plans generally assumes full-risk for the cost of treatment, and therefore contracts with a network of provider organizations to provide care at the most efficient rate possible while still maintaining member health.

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Medicaid		Medicaid is a joint federal-state program that provides health coverage to economically disadvantaged populations, such as low-income adults, children, and aged, blind, and disabled (ABD) individuals. States establish their own eligibility standards, benefit packages, provider payment policies, and administrative structures under broad federal guidelines. Financing is a shared responsibility of the federal government and the states.
Medicaid Waiver		Granted by CMS, waivers allow states to make temporary changes to their Medicaid program in order to test out new ways to deliver health coverage.
Medicaid Waiver Section 1115	1115 waiver	Known as research and demonstration waivers, states can apply for program flexibility to test new or existing approaches to financing and delivering Medicaid and CHIP.
Medicaid Waiver Section 1915(b)	1915(b) waiver	States can apply for waivers to provide services through managed care delivery systems, or otherwise limit an individual's choice of health plan or provider organization.
Medicaid Waiver Section 1915(c)	1915(c) waiver	States can apply for waivers to provide long-term care services in home- and community-based settings, rather than institutional settings.
Medical Home		A medical home is not a physical place, but a model for care coordination. Medical homes provide primary care services, care coordination, enhanced access to care, and care that is culturally and linguistically appropriate. Medical homes exist across multiple payers.
Medicare		Federal health insurance for individuals over the age of 65, individuals with certain disabilities, and individuals with end stage renal disease. Medicare covers most acute care services (which may include psychiatric care), but does not cover LTSS or non-physician behavioral health services.
Medicare Advantage	MA	Medicare Part C - also known as Medicare Advantage - is a program which allows individuals who are eligible for Medicare Parts A and B to elect a private health plan to provide their Medicare coverage. The federal government pays the plan's premiums up to a set level, and individuals are responsible for the difference.

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Medicare Advantage Special Needs Plan	SNP	A special type of Medicare Advantage plan that is designed to provide targeted coordinated care to individuals who are a) institutionalized; b) dual eligible; and/or c) meet the severe chronic disabled conditions set forth by CMS. Plans emphasize improved care primarily through continuity of care and care coordination.
Medicare Part A		Hospital Insurance: Covers hospital, skilled nursing care, hospice, and home health care for most eligible individuals at no cost. Financed through payroll tax and deductibles, copayments are only charged if a stay becomes long-term.
Medicare Part B		Supplementary Medical Insurance: Covers most outpatient services, and consumers pay a premium based on income level.
Medicare Part C		Medicare Part C - also known as Medicare Advantage - is a program which allows individuals who are eligible for Medicare Parts A and B to elect a private health plan to provide their Medicare coverage. The federal government pays the plan's premiums up to a set level, and individuals are responsible for the difference.
Medicare Part D		Outpatient Prescription Drug Benefit: Private plans contract with Medicare to provide coverage for prescription drugs. Most consumers pay premiums based on their income.
Metropolitan Statistical Area	MSA	An urbanized area with a population of at least 50,000 plus adjacent territory that has a high degree of social and economic integration as measured by commuting ties.
Patient-Centered Medical Home	PCMH	See Medical Home.
Patient Protection & Affordable Care Act	PPACA or ACA	U.S. health care reform signed into law in 2010. The legislation regulates certain aspects of private and public health insurance programs and authorizes an individual mandate to secure essential health coverage, premium tax credits for the purchase of private health insurance, and increased insurance coverage of preexisting conditions. In 2012 the Supreme Court ruled that state participation is optional for provisions of the law expanding Medicaid coverage to adults ages 18 to 64 with incomes under 138% of the FPL. In 2017, Congress repealed the tax penalties associated with the individual mandate essentially ending the mandate.

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I.2. Glossary Of Terms

Word	Abbreviation	Definition
Primary Care Case Management	PCCM	A health care delivery system model with limited utilization and cost control. Under the PCCM model, Medicaid enrollees choose a primary care physician who acts as a gatekeeper for more intensive services. The primary care physician generally receives a per person per month (PMPM) fee for care coordination, and is reimbursed fee-for-service for all medical services provided.
Program Of All Inclusive Care For The Elderly	PACE	PACE serves populations over the age of 55 who are eligible for skilled nursing home care by utilizing a comprehensive delivery system of social, medical, and long-term care services to keep enrollees in the community for as long as possible. PACE is an optional state Medicaid program, and may only be available in certain states, or regions within states.
Serious Mental Illness	SMI	A mental, behavioral, or emotional disorder that lasts for a sufficient duration of time and causes impairment of major life activities. Serious mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder (OCD), panic disorder, post traumatic stress disorder (PTSD), and borderline personality disorder.
Supported Employment		Provides services and supports to help individuals with disabilities become employed in an integrated or competitive work environment, and retain that employment.
Supported Housing		Housing provided for as long as needed at little or no cost to individuals with mental illness, or other vulnerable populations who are homeless or at-risk for homelessness. Mental health and social services are offered to participants; but are not a condition for participation in the program. The goal is to allow individuals to live as self-sufficient, independent lives as possible.
Value-Based Reimbursement	VBR	Reimbursement model in which payers financially reward or penalize health care provider organizations for performance on quality and cost of care. VBR payment mechanisms include P4P; capitation; shared savings models; shared risk models; and payments based on clinically-defined episodes, called episodes of care or bundled payments.

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