

Appendix to Texans Care for Children's Memo to State Leaders on February 21, 2022, Regarding Implementation of the M.D. v Abbott's Expert Panel's Foster Care Recommendations

On January 11, 2022, an independent panel of experts selected by the state and the plaintiffs in the *M.D. v Abbott* foster care lawsuit released "Recommendations for Improving Texas' Safe Placement and Services for Children, Youth, and Families." On February 14, 2022, DFPS and HHSC filed their response to the Panel's recommendations, outlining steps they will commit to taking and a timeline.

Of the 23 Expert Panel recommendations, the state agencies — DFPS and HHSC — committed to 11, partially committed to 9, and disagreed with or did not commit to 3 recommendations.

Texans Care for Children agrees with DFPS and HHSC's responses and comments with respect to 13 of the Panel recommendations. Additionally, we believe the state agencies have made significant progress on two recommendations, which was not recognized or accounted for in the agencies' response to the Panel recommendations. Finally, we urge the agencies to take further steps or make modifications to their intended action with respect to 8 recommendations.

KEY:	
✓ = Agree	
= Partially agree	
= Disagree or cannot commit	

Expert Panel Recommendation	DFPS/HHSC Response to Recommendations	TCFC Response to Agencies
Develop Guiding Principles	V	See p. 2 of memo
Build State Interagency Team	V	V
Establish Clinical Coordinators	V	V
Establish Lead and Lag Measures	1	V

¹ The agencies are assigning this recommendation to the interagency team to establish the timeline.

Expert Panel Recommendation	DFPS/HHSC Response to Recommendations	TCFC Response to Agencies
Analyze Data on Children in Out of State Placements	2	V
Assign DFPS Community Liaison	V	V
Obtain DFPS Technical Assistance	V	V
Expand Turning Point Program	3	V
Design Flexible Funding Pool	4	See p. 3 of memo
Develop Plan To Increase Treatment Foster Care	V	See p. 2 of memo
Expand Partial Hospitalization	5	See p. 5 of memo
Increase Access to YES Waiver	6	See p. 4 of memo
Establish Provider Workgroup	V	V
Increase Access to Residential Treatment Center Project	7	See p. 4 of memo
Explore Medicaid Mobile Crisis Option	8	V
Accelerate Implementation of FFPSA & QRTPs	9	See p. 6 of memo
Increase Targeted Placement Options	10	See p. 2 of memo

 $^{^{2}}$ The agencies are assigning this recommendation to the interagency team to establish the timeline.

³ The plan to expand the Turning Point Program will be finalized on time; execution is dependent on funding and STAR Health procurement.

⁴ The agencies stated that creating the recommended funding pool requires a "legislative initiative," such as a bill or budget rider.

⁵ HHSC will assess provider capacity for partial hospitalization but needs additional resources and is actively seeking resources through SB 1177 Implementation.

⁶ HHSC agreed to develop a plan to increase access to the YES Waiver program, but noted that it will release its plan in 90 days rather than the 60 days recommended by the Expert Panelists.

 $^{^{7}}$ HHSC identified several short- and long-term challenges to implementing this recommendation.

 $^{^8}$ HHSC is exploring this option, but implementation will take 14-20 months for a state plan amendment.

⁹ DFPS is working on this recommendation based on legislative direction.

 $^{^{\}rm 10}$ The agencies are assigning this recommendation to the provider workgroup.

Expert Panel Recommendation	DFPS/HHSC Response to Recommendations	TCFC Response to Agencies
Expand Mental Health Services in Medicaid ¹¹	12	See p. 5 of memo
Accelerate Foster Care Rate Modernization	13	V
Build Mental Health System of Care	V	See p. 2 & 6 of memo
Strengthen Practice related to Kinship Care	V	See p. 3 of memo
Improve Family Group Conferencing	V	V
Engage People with Lived Experience	V	See p. 6 of memo

¹¹ This Panel recommendation refers to implementation of SB 1177 from the 86th Regular Session, which would allow Medicaid health plans to offer evidence-based, medically appropriate mental health services "in lieu of" — or as a cost-effective substitute to — inpatient hospitalization.

12 HHSC stated they are waiting on CMS approval to implement this recommendation, so they cannot commit to a specific timeline.

¹³ HHSC and DFPS are already operating on an accelerated timeline; the rate setting process usually takes 24-36 months, and they are currently following a 12-month timeline for Foster Care Rate Modernization.