

Prioritizing Quality Care for Texas Children: Leveraging Data for Optimal Health Outcomes

Testimony to the House Human Services Committee

HHSC and Medicaid health plans already track numerous metrics, ranging from quality medical care to quality of dental care and results from member and caregiver experience surveys. Yet, none of these quality measures — or how a health plan performs on key healthcare quality measures for children — are considered during the contract procurement process. In order to ensure kids are receiving high-quality care, HHSC should utilize these data they are already collecting as a consideration when awarding Medicaid contracts to plans in the state of Texas.

Medicaid Plays an Important Role for Texas Children

Health coverage is a piece of the health puzzle that is necessary to live a long, healthy life. According to research by The Commonwealth Fund, health insurance is critical for reliable, consistent, and timely health care for Texas children. It helps children attend regular checkups, identify disabilities or developmental delays, receive early intervention, address mental health challenges, and get healthy and back to school when they are out sick.¹ Kids make up 77% of Texas Medicaid enrollment, highlighting the program's importance for the children in Texas.²

Quality Care Metrics are Not Utilized In Contracting Decisions

Ensuring children have access to high-quality care is paramount to their well-being and development. **Currently, how the Medicaid Managed Care Organizations perform on quality metrics is not taken into account during the contracting process.** The Texas Health and Human Services Commission (HHSC) has developed a portal called the Texas Healthcare Learning Collaborative that collects healthcare quality measure data.³ This portal is intended to increase transparency and promote accountability in the delivery of services in the Medicaid program. It aims to encourage discussion on the aspects of health care being tracked by these quality measures and spur collaboration among internal and external stakeholders to improve the quality of care and cost-effectiveness of Texas Medicaid.⁴

As the portal shows, HHSC and Medicaid health plans already track numerous metrics, ranging from quality medical care to quality of dental care and results from member and caregiver experience surveys. For instance, Medicaid Managed Care Organizations vary in the rate of infants receiving well-child visits in the first 15 months of life and the rate of toddlers receiving recommended well-child visits — critical visits for preventive care, early detection of health issues, and for doctors to offer guidance for parents on child development and wellness. Further, Medicaid health plans vary in the rate of enrolled children who receive counseling for nutrition and physical activity, a critical component of pediatric health care. Medicaid health plans track and report the rate of enrolled children who

receive regular dental care, which is an essential aspect of pediatric health care and significantly prevents systemic health problems.

HHSC diligently collects and analyzes this data to monitor and evaluate various aspects of healthcare delivery in the Medicaid system. State leaders have also recognized the importance of healthcare quality measures by linking health plans' performance on several measures to Pay for Quality initiatives in Medicaid across the state. **Yet, none of these quality measures — or how a health plan performs on key healthcare quality measures for children — are considered during the contract procurement process.**

Medicaid Health Plans Already Report Core Set Measures

One option is for the state to take into account how a health plan is performing on measures included in the “Child Core Set” as it assesses plans for a contract renewal. Texas Medicaid health plans already track and report Child Core Set quality measures to HHSC – which are a range of children’s quality measures reflecting physical and mental health care access, care delivery, and health outcomes for children enrolled in Medicaid.⁵ Child Core Set measures include:

Quality Measures for Children

- Well-Child Visits in the First 30 Months of Life (W30-CH)
- Developmental Screening in the First Three Years of Life (DEV-CH)
- Lead Screening in Children (LSC-CH)
- Child and Adolescent Well-Care Visits (WCV-CH)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH)
- Screening for Depression and Follow-Up Plan: Ages 12 to 17 (CDF-CH)
- Follow-Up After Emergency Department Visit for Mental Illness: Ages 6 to 17 (FUM-CH)
- Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Ages 3 Months to 17 Years (AAB-CH)
- Asthma Medication Ratio: Ages 5 to 18 (AMR-CH)
- Oral Evaluation, Dental Services (OEV-CH)
- Topical Fluoride for Children (TFL-CH)
- Experience of care: Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey 5.1H – Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items (CPC-CH)

Quality Measures for Maternal Health

- Live Births Weighing Less Than 2,500 Grams (LBW-CH)
- Prenatal and Postpartum Care: Under Age 21 (PPC2-CH)

It is critical that HHSC focus on the quality of care that health plans are providing to children as part of evaluating candidates for contract renewals. In order to ensure kids are receiving high-quality care, HHSC should utilize these data they are already collecting as a consideration when awarding Medicaid contracts to plans in the state of Texas.

Endnotes

1. Jeopardizing a Sound Investment: Why Short-Term Cuts to Medicaid Coverage During Pregnancy and Childhood Could Result in Long-Term Harm (2020). The Commonwealth Fund. Retrieved at: <https://www.commonwealthfund.org/publications/issue-briefs/2020/dec/short-term-cuts-medicaid-long-term-harm>
2. Empowering Texas Parents: Ensuring Eligible Children Can Enroll in Health Insurance and SNAP, Slide 4 (2024). Texans Care for Children Briefing with Texas 2036, Feeding Texas, and People’s Community Clinic. Retrieved at: <https://bit.ly/44HR6Ng>
3. Texas Healthy Learning Collaborative (2024). Texas Health and Human Services Commission. Retrieved at: <https://thlcportal.com/home>
4. Ibid.
5. Children’s Healthcare Quality Measures (2024). Medicaid.gov. Retrieved at: <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/childrens-health-care-quality-measures/index.html>