





# Texas



## State and Local Health Equity Policy Checklist

MAY 2021


### KEY

-  = state requires/mandates
-  = some local and/or state policies, but there is room for improvement
-  = no state/local requirements
-  = n/a

### Legislative Reform

POLICY	SCORE	NOTES
Implement Racial Equity Impact Statements for legislation at the state or local levels, including environmental, health and criminal justice areas.		<p>Texas considered legislation (<b>SB 108</b>) in 2021 that would require state agencies to prepare a childhood racial disparity impact statement for any pending bill or joint resolution at the request of the Lieutenant Governor or Speaker of the House of Representatives. As of May 2021, the bill had not been passed.<sup>1</sup></p> <p>The <b>city of Austin</b> developed and implemented an Equity Assessment Tool that “identifies [city departments’] strengths, weaknesses, opportunities and threats with regards to having equitable policies, practices and procedures.”<sup>2</sup> In addition, the <b>city of San Antonio</b> developed and implemented a Budget Equity Tool that integrates consideration of racial and economic equity into decisions about policies, practices, programs and, ultimately, departmental budgets. In 2021, each department was required to use the tool and submit the results to San Antonio’s Office of Equity.<sup>3</sup></p>
Expand Health Impact Assessments attached to state and local legislation to include equity considerations.		The <b>Harris County Built Environment Unit</b> regularly conducts Health Impact Assessments to evaluate how changes in city ordinances and community design could unequally impact the health of different groups of community members. <sup>4</sup>

### State Health Planning & Programs

POLICY	SCORE	NOTES
Declare racism a public health crisis and implement steps to address it.	 <i>One or more cities/ counties within a state has declared racism a public health crisis and has implemented steps to address it, but this has not been done at the state level.</i>	The Austin City Council, Dallas County Commissioners, Harris County Commission and San Antonio City Council declared racism a <b>public health crisis</b> and are taking steps to address it. <sup>5</sup>


Summary and scoring methodology reports are available at [www.HealthValueHub.org/Health-Equity-Checklist](http://www.HealthValueHub.org/Health-Equity-Checklist).

If you know of a policy we overlooked, please contact [hubinfo@altarum.org](mailto:hubinfo@altarum.org).

State Health Planning & Programs <i>(continued)</i>		
POLICY	SCORE	NOTES
Develop a 'Health in All Policies' strategy at the state or local level.		
Establish Health Equity Zones to better address social determinants of health.		
Create an Equity Strategic Plan to lay out how the state (or local entity within the state) will reduce health disparities.		The Texas Health and Human Services System's <a href="#">2017-2021 Strategic Plan</a> described goals and strategies for eliminating disparities in chronic diseases and other risk factors and health conditions. <sup>6</sup> The Houston Health Department's <a href="#">2018-2022 strategic plan</a> also had a health equity focus. <sup>7</sup>
Fund community-driven health equity action plans.		The <a href="#">Texas Healthy Communities Program</a> gives participating communities an opportunity to conduct local health assessments at no cost. Program staff work with community members and other stakeholders to collect data on a variety of indicators and develop a strategic plan to create healthier communities. <sup>8</sup>
Implement participatory budgeting at the state and/or local level for initiatives that focus on health and social determinants of health.		<a href="#">San Antonio</a> implemented a participatory budgeting process, allowing residents to propose projects and vote on the final proposals. However, the projects were not required to relate to health. <sup>9</sup>
Emphasize health disparities and equity when developing State Health Assessments & State Health Improvement Plans.		Texas' <a href="#">2017-2022 State Health Plan</a> emphasized addressing health disparities and advancing health equity. <sup>10</sup> In addition, local jurisdictions such as <a href="#">Austin/Travis County</a> , <a href="#">Denton County</a> and <a href="#">San Antonio</a> created their own Community Health Improvement Plans that identify addressing disparities in health outcomes as a priority. <sup>11,12,13</sup>
Fund community-based organizations operating in the state to reduce disparities and/or provide culturally competent health-related supports.		
Implement strategies to address specific health outcomes related to inequality in social determinants of health, such as asthma, diabetes, heart disease and maternal mortality, among others.		The Texas Department of State Health Services' Community Health Improvement Division's <a href="#">2020 Advancing Health Equity Report</a> outlined what Texas has done and what it plans to do to address health disparities in asthma, diabetes, heart disease, stroke, smoking, infant mortality and other health outcomes. <sup>14</sup>


## State Health Planning & Programs *(continued)*

POLICY	SCORE	NOTES
<p><b>Implement strategies to address specific health outcomes related to inequality in social determinants of health, such as asthma, diabetes, heart disease and maternal mortality, among others. <i>(continued)</i></b></p>	<p></p>	<p>In 2015, the state received a <b>five-year grant</b> from the U.S. Department of Health and Human Services to reduce obesity rates and increase screenings and referral services for obesity, diabetes and hypertension specifically for African American and Hispanic adults. The state worked with local community partners to implement initiatives to achieve these goals.<sup>15</sup></p> <p>From 2011 to 2017, Texas had an <b>Office of Minority Health Statistics and Engagement</b> that reported on health disparities and recommended policies and programs that were community-driven and prioritized health equity. However, the office was defunded in 2018.<sup>16</sup> In May 2021, the Texas House of Representatives approved a bill to <b>create an Office for Health Equity</b> that would research and report on existing health disparities and implement programs to reduce disparities.<sup>17</sup></p>




<p><b>Participate in the Government Alliance on Race &amp; Equity (GARE), a national network of local and regional governments to address racial equity.</b></p>	<p></p>	<p>San Antonio, Dallas, Waco, Fort Worth and Austin <b>participate in GARE</b>.<sup>18</sup></p>
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## Data & Reporting





POLICY	SCORE	NOTES
<p><b>Create equity reporting requirements for state and local government agencies.</b></p>	<p></p> <p><i>At least one city/county government has created equity measures for itself, although it is not required to report this information to the state.</i></p>	<p>Each year, eight departments within the San Antonio city government complete comprehensive, department-wide <b>Equity Assessments</b> of existing functions, policies, programs and processes. Departments must report on equity in five key areas, including:</p> <ul style="list-style-type: none"> <li>• organizational, management and leadership commitment;</li> <li>• workplace and workforce;</li> <li>• community access and partnership;</li> <li>• programs, plans, policies and budgets; and</li> <li>• service delivery, facility and system improvements.</li> </ul> <p>Equity Assessments serve as the foundation for the creation of two-year Department Equity Action Plans, which include specific strategies and metrics by department to address assessment findings to improve outcomes for low-income communities and communities of color.<sup>19</sup></p>

<p><b>Use the state's Office of Health Equity/Disparities/Minority Health to analyze and report on existing health disparities and/or equity concerns within the state.</b></p>	<p></p>	<p>The Texas Department of State Health Services' Community Health Improvement Division's <b>2020 Advancing Health Equity Report</b> analyzed and publicly reported disparities for health indicators related to health promotion, chronic disease prevention and maternal and child health.<sup>20</sup></p> <p>Local jurisdictions, such as <b>Houston/Harris County</b> and <b>San Antonio</b>, created their own reports examining health disparities and racial inequity.<sup>21,22</sup></p>
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### Data & Reporting *(continued)*

POLICY	SCORE	NOTES
Require nonprofit hospitals to incorporate an equity component into their community health needs assessments and community health improvement plans and/or establish a minimum percentage of non-profit hospitals' Community Benefit that must be invested in programs targeted at reducing health disparities by addressing root causes.		
Increase the validity, use and standardization of data on race, ethnicity and/or languages spoken for state reporting requirements.		
Include socioeconomic status, race, ethnicity and/or languages spoken in All-Payer Claims Database data.		Texas has a voluntary <a href="#">all-payer claims database</a> , created by the University of Texas Health Science Center at Houston. The database includes data on race and ethnicity. <sup>23</sup>

### Health Reform – Coverage

POLICY	SCORE	NOTES
Expand Medicaid eligibility requirements to include all adults with incomes at or below 138 percent of the federal poverty level.		
Provide high-quality, affordable coverage options for people whose incomes are too high to qualify for Medicaid, e.g., Basic Health Plan, reinsurance or augmented premium subsidies.		
Provide one-year continuous eligibility for Medicaid and CHIP.		Texas provides <a href="#">one-year continuous eligibility</a> for CHIP only. <sup>24</sup>
Provide coverage options to undocumented and recent immigrants.		Medicaid <a href="#">covers emergency services</a> for individuals who meet all eligibility criteria for Medicaid except that they are undocumented or do not meet qualifying immigration criteria; however, this option provides coverage only in extreme situations. <sup>25</sup>  Lawfully-residing immigrant children can receive coverage under the Children's Health Insurance Program (CHIP) <a href="#">without a 5-year wait</a> . <sup>26</sup> Additionally, some level of prenatal care is available, regardless of immigration status, through the <a href="#">Healthy Texas Women 1115 Demonstration</a> program. <sup>27</sup>


## Health Reform – Delivery

POLICY	SCORE	NOTES
<p><b>Develop Medicaid Managed Care Organization (MCO) contract options for advancing health equity and recommend or require MCOs to complete specific health equity responsibilities.</b></p>		<p>Texas Health and Human Services requires Medicaid MCOs to develop and implement <b>cultural competency plans</b> to ensure that MCOs provide culturally competent services to their members, including those with disabilities and diverse cultural, ethnic and religious backgrounds. The cultural competency plans must describe how MCOs will work with providers to develop interventions to prevent disparities in healthcare delivery. The plans must follow National Standards for Culturally and Linguistically Appropriate Services (CLAS).<sup>28</sup></p> <p>Texas also requires Medicaid MCOs to coordinate health and housing services by working with staff from the federal <b>Section 811 Project Rental Assistance program</b>, which provides subsidized rental housing to eligible individuals.<sup>29</sup></p>
<p><b>Encourage or require Accountable Care Organizations (ACOs) and/or Coordinated Care Organizations (CCOs) to collect equity-focused data, adopt culturally appropriate programs, implement partnerships with community-based organizations in areas with larger minority populations and/or focus on addressing social determinants of health.</b></p>		<p>Texas <b>does not have ACOs or CCOs</b> in the Medicaid program.<sup>30</sup></p>
<p><b>Employ Medicaid 1115 and/or 1915 waivers to better address the social determinants of health.</b></p>		<p>Texas has used <b>1915(c) waivers</b> to address social determinants of health for children with severe emotional disturbance and individuals who have physical disabilities, intellectual disabilities, developmental disabilities or autism. These waivers provide services such as home delivered meals, employment assistance, case management and transportation.<sup>31</sup></p> <p>The <b>Healthy Texas Women 1115 Demonstration waiver</b> program provides family planning benefits and other pre-conception care services to women ages 18-44 who have incomes at or below 200% of the federal poverty level and are not eligible for Medicaid, CHIP or Medicare Part A.<sup>32</sup></p>
<p><b>Require or incentivize providers participating in Medicaid value-based programs to report on measures related to health equity/disparities.</b></p>		<p>Texas' <b>2021 Managed Care Quality Strategy</b> notes that key quality measures are stratified by sex, race/ethnicity and health status. The results are used by MCOs to target quality improvement initiatives to populations with disproportionately negative health outcomes.<sup>33</sup></p>
<p><b>Hold providers participating in Medicaid value-based programs responsible for reducing health disparities by evaluating/scoring performance in this area.</b></p>		






**Health Reform – Delivery** *(continued)*

POLICY	SCORE	NOTES
<p><b>Create or expand Accountable Communities for Health with a focus on increasing health equity.</b></p>		<p>Christus Santa Rosa Health System in San Antonio, the University of Texas Health Sciences Center in Houston and Parkland Center for Clinical Innovation in Dallas are participating in the Centers for Medicare and Medicaid’s <b>Accountable Health Communities Model</b>. Over a five-year period (2017-2022), participants will receive federal funding to link high-risk individuals with community-based resources.<sup>34</sup></p>
<p><b>Prioritize funding for communication infrastructure development, including broadband and cellular access, in underserved rural and urban areas.</b></p>		<p>As of May 2021, legislation (<b>SB 5</b>) to give telecommunications providers grants and other incentives to expand broadband access to rural and urban areas of the state was moving through the legislature.<sup>35</sup></p>
<p><b>Subsidize internet access to expand opportunities for telehealth.</b></p>		<p>The <b>Texas Universal Service Fund</b> provides subsidies to telecommunications providers to allow them to offer telephone/internet services to residents of rural areas at reasonable rates.<sup>36</sup></p>
<p><b>Expand coverage for telehealth services.</b></p>		<p>Texas has a <b>coverage parity requirement</b>, which requires health insurers to provide the same coverage for healthcare services or procedures delivered via telehealth as in-person equivalents.<sup>37</sup></p>
<p><b>Establish or strengthen telehealth reimbursement parity laws to incentivize providers to deliver these services.</b></p>	 <p><i>The state has temporary telehealth payment parity laws that expire after the current public health emergency.</i></p>	<p>Texas has a <b>temporary reimbursement parity requirement</b> during the COVID-19 pandemic, which requires health insurers to reimburse providers for telehealth services at the same rate as in-person services.<sup>38</sup></p>
<p><b>Establish cost-sharing parity for telehealth services.</b></p>		<p>Texas has a <b>cost-sharing parity requirement</b>, which prohibits health insurers from charging a deductible, copayments or coinsurance for telehealth services that exceed the deductible, copayment or coinsurance for the comparable in-person service.<sup>39</sup></p>
<p><b>Adopt a global budget system for paying hospitals to better enable them to focus on prevention, care coordination, community-based integration and social determinants of health.</b></p>		

## Health Reform – Delivery *(continued)*

POLICY	SCORE	NOTES
Require workplace-based cultural competency and implicit-bias training for clinicians and other providers.		In 2019, Texas legislators introduced relevant three bills that did not pass. <a href="#">HB 2307</a> would have required entities that provide mental health services to veterans to provide cultural competency trainings to their personnel in order to accept a state grant. <sup>40</sup> <a href="#">HB 719</a> would have required all medical students to successfully complete cultural competency and implicit bias coursework prior to receiving their medical degree. <sup>41</sup> <a href="#">HB 607</a> would have required certain physicians to complete continuing medical education in cultural competency and implicit bias. <sup>42</sup>

## COVID-Specific Reforms

POLICY	SCORE	NOTES
Collect racial equity data to better understand the disparate impact of COVID-19.		Texas collects and reports COVID-19 <a href="#">case data</a> and <a href="#">vaccine administration data</a> by age, gender, race and ethnicity. <sup>43,44</sup>
Implement changes to Medicaid or Marketplace enrollment, including but not limited to presumptive eligibility, cost-sharing provisions, Marketplace special enrollment periods, increased enrollment assistance and improvements to application processing in response to COVID-19.		Texas <a href="#">eliminated co-payments</a> for all Children's Health Insurance Program (CHIP) members during the COVID-19 pandemic. <sup>45</sup>
Leverage the Emergency Medicaid program to extend COVID-19 testing, evaluation and treatment coverage to undocumented immigrants.		
Waive or limit cost-sharing for COVID-19 testing and treatment by private insurers.		
Provide COVID-19 testing to residents free of charge.		<a href="#">Williamson County</a> , <a href="#">Harris County</a> , <a href="#">Tarrant County</a> , <a href="#">Galveston County</a> and <a href="#">Houston</a> , among other local jurisdictions provide COVID-19 testing to residents free of charge. <sup>46,47,48,49,50</sup>

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### ABOUT ALTARUM'S HEALTHCARE VALUE HUB

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