

House Bills of Interest – Travis County Health and Human Services and Veterans Services

Bill No	Sponsor	Description	Local Impact	Status Update
CS HB 19	King	This bill directs the Department of Family & Protective Services (DFPS) to create and implement preventative services for veterans and military families who have committed, experienced or are at risk of family violence, abuse or neglect. The program must be designed to coordinate with community based organizations to provide services and must include prevention, early intervention for children and other child and family services. The bill requires Texas Veterans Commission and DSHS to coordinate and run a mental health program for veterans.	Fiscal note indicates that the program will be implemented in El Paso, Killeen and San Antonio but the model could eventually be implemented in Travis County presumably. There is no local impact anticipated. If the program were expanded to include Travis, burden on local services utilized by military families will be reduced. The model of service delivery includes peer advocates, volunteer capacity building and coordination with community based organizations, which all work to reduce reliance on local tax dollars and increase service capacity in communities by leveraging and maximizing state funds.	<i>05/27/2015 E Sent to the Governor</i>
HB 418	Wu	This bill adds child victims of trafficking to existing law describing conditions under which governmental entities may take possession of a child without a court order. It would <i>allow</i> commissioner's courts or municipal governing bodies to either establish or contract with another entity to create licensed secure foster homes or group foster homes that are tailored to serve child victims of trafficking that are in the managing conservatorship of DFPS. Appropriate mental health and other services must be provided according to section 5 (d) (1) of the bill by foster homes and foster group homes.	<p>This bill would allow for local control and better oversight of DFPS contracts with foster care providers than currently exists (Foster Care Redesign which is a move toward privatization) but it could also pave the way for a transfer of DFPS foster care costs for housing child victims of trafficking to localities – perhaps a response to the Summer 2014 surge in unaccompanied alien children (UAC).</p> <p>There is no reliable local data on how many UAC trafficking victims will require foster care in Travis County.</p> <ul style="list-style-type: none"> • As of August 31, 2014, 76% of UACs were arriving from Honduras, El Salvador and Guatemala. • The ORR – which processes all unaccompanied minors originating from countries not contiguous to Texas - reports that 477 unaccompanied children were released to sponsors (usually family members) in Travis County in FY 14. • Ninety percent (90%) of UACs are released by ORR into the care of a parent, relative or friend to await adjudication of their case. The remaining 10% are released to foster care. It is unknown how many UACs are victims of trafficking. • Anecdotal evidence suggests that many UACs who are victims 	<i>05/26/2015 E Sent to the Governor</i>

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			<p>of trafficking will not report their victimization to authorities because they know it will delay their processing and release.</p> <ul style="list-style-type: none"> The number of UACs arriving in Travis County has declined dramatically in the last 6 months. <p>There has been a concern that UACs have further stretched the already limited resources of foster care capacity in the state. If counties were able to create new capacity by directly building it out or contracting for it, that would be a positive impact for local vulnerable populations. It is unclear if local entities will pay for this increased capacity, as DFPS is currently funding the foster care system in Texas – increasingly through contracting arrangements as part of the recent foster care redesign.</p> <p>Costs to expanding the County role in providing foster care services for child victims of trafficking could include staffing and training costs to implement contract monitoring and performance oversight. If direct service was the preferred mechanism, costs could include infrastructure, training, staffing, etc. If we use the ORR number released in FY 14 (477) as a total of those UACs released to sponsors, we can reason that this number represents the 90% who do not go into foster care and estimate that about 53 did. (Note that this figure does not include UACs from Mexico unless sent to ORR after being screened for trafficking. Note also that we don't know how many of these 53 children are victims of trafficking and would require the specialized foster care services described in the bill. The daily cost of foster care in a home setting in 2012 ranged from \$23 to \$175 per day depending on the needs of the child.</p>	
HB 839	Naishtat	The bill allows for the HHSC Commissioner to adopt rules necessary to implement presumptive CHIP and Medicaid eligibility for children under 19 released from detention or other correctional facility. The bill exempts a child who is certified as presumptively eligible under the bill's	Bill will provide continuous healthcare coverage for vulnerable youth populations. This will likely result in less non-emergent ER care and better health - including behavioral health - outcomes for this	<i>06/01/2015 S Signed in the Senate</i>

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		provisions for CHIP from the 90-day waiting period for CHIP coverage.	population. No direct fiscal impact though better access to preventive care-particularly behavioral healthcare for children who have been in correctional facilities will mean lower burden on the local mental health authority and other safety net partners in Travis County.	
HB 867	Hernandez	The bill establishes The Texas Women Veterans Program which aims to connect women to benefits and services.	The bill may improve outcomes for women veterans in Travis County. The bill does not have a direct impact on Travis County but may bring additional services and other resources to Travis County women veterans. Companion is SB 2001.	05/27/2015 <i>E Sent to the Governor</i>
HB 1305	Bonnen	The bill gives school districts and charter school boards the option to either participate in the national school breakfast program OR to develop and implement a locally funded program with the same eligibility as the national program. Districts may have campuses participating in the national program and others participating in the local option. Current law states that the number of educationally disadvantaged students is determined by averaging the best six months' enrollment in the national school lunch program from the preceding school year OR by the commissioner rule in the case of a district with no campuses participating in the program. The bill changes how the number of educationally disadvantaged students to include all students eligible to be enrolled (rather than enrolled) and allows districts to opt instead for commissioner rule on how to determine this number regardless of campus participation in the program.	Supporters say locally funded breakfast programs can allow for superior nutritional quality of meals served. Per the fiscal note: "School districts who chose not to offer the National School Breakfast Program, and instead choose to develop and implement a locally funded program, could incur some administrative costs and experience a loss of federal revenue, but such action would be voluntary and amounts would vary by district. Some districts would receive additional funding under the modified calculation of the compensatory education allotment under the provisions of this bill." Companion is SB 981. Amendments add that the price of locally provided meals may not exceed the maximum allowable rate under the national program and give some flexibility of funding to pay for life skills and child care expenses for those at-risk of dropping out.	06/01/2015 <i>S Signed in the Senate</i>
HB 1329	Naishtat	H.B. 1329 amends the Health and Safety Code to prohibit the county responsible for paying the costs of a hearing or proceeding under the	From TLO Bill Analysis: Generally speaking, a county that initiates mental health proceedings, whether by emergency detention or by filing an	05/29/2015 <i>E Sent to the Governor</i>

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		Texas Mental Health Code from paying the costs from the additional filing fee collected in a statutory probate court to be used for court-related purposes for the support of the judiciary.	application for inpatient commitment, is responsible for any court costs. Interested parties are concerned that state law is ambiguous regarding who is responsible for costs when an entity other than the county initiates such a proceeding. H.B. 1329 seeks to clarify this matter. This bill was filed last session but failed to pass. There will be a fiscal impact to local courts.	
HB 1740	Thompson	Allows vet techs working under the supervision of Veterinarians employed by municipalities or counties to administer the rabies vaccine.	May increase the number of animals in the county who receive the rabies vaccine. May decrease local costs for animal services provided to treat or prevent rabies. Companion is SB 1780.	<i>05/21/2015 E Effective immediately</i>
HB 1762	Otto	Establishes a health care advocacy program for veterans that will work to resolve issues of access to benefits and services at the systems level, coordinate with healthcare providers to bolster veteran healthcare, review and research best practices in veteran’s healthcare, recommend improvements to the executive director of the commission, incorporate veteran healthcare needs into the commission’s strategic plan, assist veterans in accessing benefits and services, recommend legislative initiatives to address veteran health needs, and evaluate the efficacy of the program.	This program seeks to remove barriers to access to healthcare for veterans. Ease of use and access are frequently cited as being the most crucial barrier to veteran health. If this bill provides Travis County veterans greater access to USVA care, some burden on local service providers may be relieved to the extent that this population is seeking locally funded care and services because they cannot access federal benefits to which they and their families are entitled.	<i>05/25/2015 E Sent to the Governor.</i>
CSHB 1908	Naishtat	Bill mandates that certain offenders with mental impairments be identified and qualified for the continuity of care system, regardless of diagnosis (I don't see a list of diagnoses in the existing law). The bill effectively broadens eligibility for MH services beyond persons suffering from clinically severe depression, schizophrenia, or bipolar disorders.	ATCIC and LMHAs in the state may bear a fiscal burden to comply, as they may have to expand their diagnostic eligibility criteria (depending on the existing criteria and operations regarding offender access to services). Offenders released to Travis County may have access to more robust mental health services. This will increase their ability to successfully reintegrate to the local economy and community and likely decrease recidivism in the affected population and future use of costly	<i>05/29/2015 E Sent to the Governor</i>

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			locally funded behavioral health and social services. Companion is SB 1477. CS lists disorders and inserts a clause softening the language of the bill to allow for consideration of available resources.	
CSHB 2084	Munoz, Jr.	The bill attempts to make STAR Medicaid managed care rate setting more transparent by publishing actuarial reports and clearly identifying methodology and data sources.	No direct local fiscal impact but important to watch. Apparently, greater transparency for rate setting was a recommendation in a recent State Audit. Companion is HB 1093.	<i>05/27/2015 E Sent to the Governor</i>
HB 2718	Parker	The bill directs HHSC to create a program connecting persons eligible for TANF, SNAP and Medicaid with faith and community based organizations who may offer "supplemental assistance" to these persons. Bill states that all persons applying for these public benefits MUST be informed of the program prior to applying for benefits.	Note that statewide there are 71,308 TANF recipients. 61,574 of these - or 86% are children. The Travis County population makes up 4% of the total Texas population. So this bill is attempting to transfer state basic needs assistance for 2,852 individuals (again, 86% of whom are children) to local basic needs providers. TANF reporting is not available by county and clear payment information is not posted by HHSC. There were 114,313 Travis County SNAP recipients as of February 2015 - 67,185 of whom are children (59%). The average payment - I am assuming this is a monthly benefit - is \$238. As for Medicaid, it is questionable if there is local capacity among community and/or faith-based organizations to "supplement" this program. 114,708 individuals of all ages were enrolled as of October 2013. 73% of these are children (84,186).	<i>05/30/2015 E Sent to the Governor</i>
HB 3404	Thompson	Directs HHS commission to conduct a study on the benefits of providing integrated care to veterans with post-traumatic stress disorder.	Findings may improve service delivery and methods to Travis County veterans.	<i>05/29/2015 E Sent to the Governor</i>
HB 3547	Larson	Allows private employers to voluntarily give preference to veterans when hiring.	Increased employment opportunities for veterans. Companion is SB 1713.	<i>05/29/2015 E Sent to the Governor</i>