



TEXAS HEALTH AND HUMAN SERVICES

KYLE L. JANEK, M.D.
EXECUTIVE COMMISSIONER

Quarterly Legislative Staff Briefing

January 16, 2014

10am to 11:30am

Capitol Extension, Hearing Room E1.014

Department of State Health Services

- a) Infectious Diseases
- b) Expanded Primary Health Care
- c) Mental Health Update

Department of State Health Services



Pertussis 2013

- 3,482 cases reported to DSHS in 2013.
 - 5 Deaths, in children too young to be vaccinated.
 - 11.4% rate of hospitalization.
- 2012 pertussis totals included 2,218 cases and 6 deaths.
- Vaccination is key for all eligible age groups, and especially for pregnant women.
- DSHS outreach has included messages to providers and to the public.



Flu Season 2013

- As of January 4, 2014, influenza-like illness (ILI) activity continues to be at high intensity.
 - Widespread influenza activity.
 - 5 influenza-associated pediatric deaths.
- These recent increases are not unusual for peak flu season months.
 - On December 20, 2013, DSHS issued a health alert with prevention and treatment guidance to providers.
- The predominant virus type is influenza A, and most of the influenza subtypes are H1N1.
 - This strain is covered by this year's flu vaccine.



Flu Prevention

- Annual influenza vaccination in all those over 6 months is key to prevention.
- There is no current shortage of influenza vaccines or antiviral medications.
- The CDC estimates that during the 2012-2013 flu season, vaccination resulted in:
 - 79,260 fewer hospitalizations,
 - 6.6 million fewer cases of flu, and
 - 3.2 million fewer medically-attended cases.



Dengue Outbreak

- 32 Dengue cases in Cameron and Hidalgo Counties have been reported to CDC associated with an outbreak investigation. DSHS is continuing to monitor the situation in coordination with local authorities.
 - Thirteen cases reported no travel history.
- This is the first outbreak of dengue, a mosquito-borne viral illness, in Texas since 2005.
 - Outbreak coincides with the highest incidence of dengue on the Mexican side of the United States-Mexico border since 2005.
- Reports of suspect cases are being investigated, and surveillance and vector control measures are currently underway.
- DSHS requested and received a CDC Epi-Aid Team, which was deployed in Health Service Region 11 to support regional and local health department staff.



Cyclospora Outbreak

- Texas experienced an outbreak of Cyclosporiasis in Summer 2013, an intestinal illness caused by the microscopic parasite *Cyclospora cayatanensis*.
- Nationwide there were 631 confirmed cases, in Texas there were:
 - 270 cases confirmed by the CDC between June 1 and August 31.
 - An additional 27 cases did not meet CDC definition.
 - 22 hospitalizations; no deaths.
- DSHS worked with local health departments, the CDC and FDA to conduct trace-back investigations, and identified imported fresh cilantro from Mexico as the source of the outbreak.
- The outbreak appears to be over.



Expanded Primary Health Care (EPHC) Services

Description

- EPHC services will emphasize primary and preventive care to women

Eligibility

- Women age 18 and above who are at or below 200 percent of the federal poverty level, reside in Texas, and are not eligible for/do not receive other benefits (i.e., Medicaid, Medicare, insurance, veteran's benefits)

Funding

- \$100 million appropriated for FY14-FY15

Services Provided

- Pelvic examination
- STD Screening and Treatment
- HIV Screening
- Diabetes Screening
- High Blood Pressure Screenings
- Cholesterol Screenings
- Clinical Breast Exam
- Mammograms
- Pap tests
- Diagnostic services for women with abnormal breast or cervical cancer test results.
- Cervical dysplasia treatment
- Individualized case management
- Prenatal Services
- Dental Services for Prenatal Clients
- Birth Control
- Immunizations



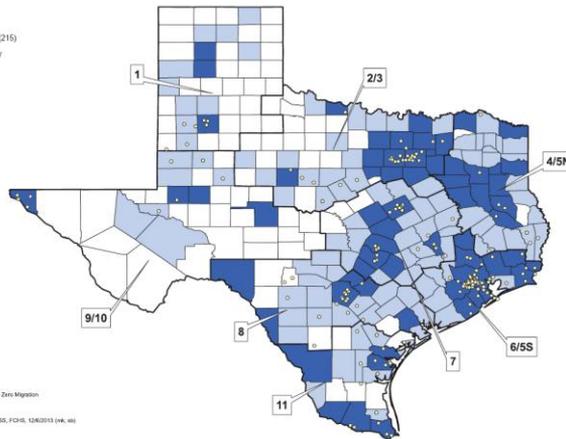
EPHC Services (cont.)

- Five large public entity providers began providing EPHC services on September 1, 2013, through intergovernmental agreements of a total of \$5 million.
 - University Health Systems, Parkland Health and Hospital System, Tarrant County Hospital District, Harris County Hospital District, and University of Texas Medical Branch
- Effective December 1, 2013:
 - \$43.7 million awarded to 51 contractors with 215 clinic sites.
 - A statewide average of 64 percent of all clients will be contraceptive clients.
 - DSHS has identified gaps in service areas for Regions 1, 4/5N, 9/10 and 11. Approximately \$2.3 million has been allocated within the existing budget for distribution to providers within the gap areas. DSHS has identified a tentative list of providers within these areas to begin negotiations.
- DSHS is exploring with HHSC opportunities to expand services through the Texas 1115 Transformation Waiver.



EPHC Services (cont.)

SFY 2014 EPHC Clinic Sites



Notes:
Data Sources:
• CHS Contract Database: SFY 2014, Provisional
• Texas State Data Center, 2014 Population Projection: Zero Migration
Prepared by: Office of Program Division Support, CHS, FCHS, 12/6/2013 (146, 46)



Current Mental Health Procurements

- Community Collaboratives Grant Program - \$25 million was allocated to serve persons experiencing homelessness and mental health issues in the five most populous counties:
 - RFP was released November 27, 2013. Responses were due January 10, 2014. Contracts are expected to begin May 1, 2014.
- NorthSTAR – Provides behavioral health services to both Medicaid and non-Medicaid indigent clients using a managed care approach in the seven county Dallas service area. The program began in 1999, with a re-procurement occurring in FY 2006, and is being re-procured in FY 2016.
 - RFI was released on December 9, 2013 ahead of an RFP for NorthSTAR services to begin FY 2016. Responses to the RFI were received on December 20, 2013. The release of the RFP is tentatively scheduled for late January 2014.
- Jail-Based Competency Restoration Pilot Program - \$3.05 million was provided to contract with a provider in one or two counties:
 - An RFI was release on December 31, 2013. Responses are due January 17, 2014. Target date for services to begin is April 2014.
- State Hospital System Long-Term Plan – DSHS Rider 83 requires the development of a ten-year plan for the provision of psychiatric inpatient hospitalization.
 - An RFP for technical assistance in the development of the plan was released on January 6, 2014, in coordination with HHSC. Responses are due February 7, 2014.



Terrell State Hospital (TSH)

- The Center for Medicare and Medicaid Services (CMS) identified several deficiencies at TSH following a survey of the facility in April, 2013.
 - Unit overcrowding and lack of adequate staff were identified as factors contributing to the deficiencies.
- A plan of correction was developed, submitted to CMS, and immediately implemented to ensure: safer staff to patient ratio, reduce overcrowding, and improve patient safety monitoring.
- As a result of implementing the plan of correction:
 - Bed capacity was reduced by 28 beds
 - Reviewed the staffing plan for all positions
 - Developed a new nursing staffing plan
 - Instituted management changes
- DSHS has funded additional FTEs and is purchasing 14 beds from an outside vendor.
- CMS notified DSHS on October 28, 2013 that:
 - TSH was in substantial compliance with the Medicare Conditions of Participation
 - TSH "deemed" status was restored, and survey jurisdiction was transferred back to The Joint Commission.