**Sec. 12. Professional Trainees and Interns.** The Department of State Health Services and the Health and Human Services Commission may compensate professional trainees or interns in recognized educational programs related to the provision of mental health or intellectual disability services, radiation control, or any critical health care profession as determined by the Health and Human Services Executive Commissioner at any salary rate not to exceed the following amounts:

- Psychiatrist Interns: $3,548 per month
- Physician Interns: $3,042 per month
- Psychologist Trainees: $2,859 per month
- Registered Nurse Trainees: $2,387 per month
- Chaplain Interns: $2,247 per month
- Physical, Occupational, or Registered Therapist Trainees: $2,117 per month
- Social Worker Trainees: $1,998 per month
- Medical Technologist Trainees: $1,998 per month
- Licensed Vocational Nurse Trainees: $1,785 per month
- Health Physicist Interns: $2,247 per month
- Health Physicist Trainees: $1,686 per month

*Delete the Medical Technologist profession, transferred Texas Medical Board on 9/1/2015.*

**Sec. 21. Limitation: Expenditure and Transfer of Public Health Medicaid Reimbursements.**

a. **Appropriations.** Included in the amounts appropriated above for the Department of State Health Services (DSHS) and the Health and Human Services Commission (HHSC) are the following amounts of Public Health Medicaid Reimbursements (Account No. 709):

1. **Strategy A.2.1, Immunize Children and Adults in Texas:** $341,686 in each fiscal year;
2. **Strategy A.4.1, Laboratory Services:** $20,617,719 in each fiscal year;
3. **Strategy D.1.1, Agency Wide IT Projects:** $46,612 in fiscal year 2018 and $46,612 in fiscal year 2019.
### Proposed Special Provisions Language

2021: and

IV. Strategy E.1.1, Central Administration: $366,935 in each fiscal year.

(2) Health and Human Services Commission:

I. Strategy A.4.1, Non-Full Benefit Payments: $39,443,879 in fiscal year 2018 and $39,541,331 in fiscal year 2019;

II. Strategy G.2.1, Mental Health State Hospitals: $50,243,886 in each fiscal year; and

III. Strategy G.2.2, Mental Health Community Hospitals: $9,624,695 \( \rightarrow \) $10,120,700 in each fiscal year.

b. **Limitation on Use of Public Health Medicaid Reimbursements (Account 709).**

(1) In the event that Public Health Medicaid Reimbursement revenues exceed the amounts noted above, the DSHS or HHSC may expend the Public Health Medicaid Reimbursement funds thereby made available only upon prior written approval from the Legislative Budget Board and the Governor. Notwithstanding Article IX, Section 14.01, Appropriation Transfers, and Special Provisions Relating to All Health and Human Services Agencies, Section 6, Limitations on Transfer Authority, transfers of Public Health Medicaid Reimbursement revenues may be made only upon prior written approval from the Legislative Budget Board and the Governor. A request to expend additional Public Health Medicaid Reimbursement funds or transfer Public Health Medicaid Reimbursement funds shall include the following information:

- I. the reason for and the amount of Public Health Medicaid Reimbursement revenue that exceeds the amounts in section (a) above, and whether this additional revenue will continue in future years;

- II. the reason for and the amount of any transfer of Public Health Medicaid Reimbursement revenue;

- III. a detailed explanation of the purpose(s) of the expenditure and whether the expenditure will be one-time or ongoing;

- IV. the name of the strategy or strategies affected by the expenditure and the FTEs for each strategy by fiscal year;

- V. the impact of the expenditure on performance levels, and, where relevant, a comparison to targets included in this Act for the affected strategy or strategies; and
VI. the impact of the expenditure on the capital budget.

The request shall be considered to be approved unless the Legislative Budget Board or the Governor issues a written disapproval within 30 business days after the date the Legislative Budget Board staff concludes its review of the proposal to expend the funds and forwards the review to the Chair of the House Appropriations Committee, Chair of the Senate Finance Committee, Speaker of the House, and Lieutenant Governor. Any requests for additional information made by the Legislative Budget Board shall interrupt the counting of the 30 business days.

(2) In the event that Public Health Medicaid Reimbursement revenues and balances are insufficient to support the appropriations amounts identified in subsection (a), a reduction shall be made in HHSC Strategy G.2.2, Mental Health Community Hospitals and then in HHSC Strategy G.2.1 Mental Health State Hospitals. A.4.1, Non-Full Benefit Payments. (Former DSHS Rider 43).

Updated the total dollar amount based on revenue projects. Section a. (2) I, Strategy A.4.1, Non Full Benefit Payments, is requested for deletion due to the decreasing revenue and the prioritization in section b.

Request deletion of the section referencing the Immunization Branch and move those funds to the Laboratory strategy. Previously the Immunization Branch was using the funds for a specific purpose. Given the laboratory’s funding needs, the request is to move the agency’s base funds to the laboratory strategy.

Changed roman numerals under a (1) due to deletion of roman numeral I.
### Proposed Special Provisions Language

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| 22                | II-127                      | **Sec. 22. Use of Trauma Fund Receipts.** In an effort to maximize the availability of Federal Funds under Medicaid for the purposes of providing reimbursement for uncompensated trauma care at designated facilities and providing increases in Medicaid inpatient provider rates, the Department of State Health Services (DSHS) and the Health and Human Services Commission (HHSC) shall enter into an interagency contract to allow for the transfer of funds from General Revenue-Dedicated Designated Trauma Facility and EMS Account No. 5111, from DSHS to HHSC for this purpose. This interagency contract would allow for the transfer of the Account No. 5111 funds to the extent that the use of these funds in this manner would not reduce reimbursements that otherwise would have been provided for uncompensated trauma care to designated facilities.

Appropriations include $116,212,000 in fiscal year 2018 2020 and $116,212,001 in fiscal year 2019 2021 out of the General Revenue-Dedicated Designated Trauma Facility and EMS Account No. 5111 to the Department of State Health Services, Strategy B.2.1, EMS & Trauma Care Systems. Of that amount, $101,660,775 $99,881,693 in fiscal year 2018 2020 and $101,660,775 $99,881,692 in fiscal year 2019 2021 is to be transferred through the interagency contract to HHSC to provide add-on payments for trauma care and safety-net hospitals in Medicaid.

If funds are not available in the amount appropriated from General Revenue-Dedicated Designated Trauma Facility and EMS Account No. 5111 in this Act, the amounts identified for transfer through interagency contract to HHSC shall be reduced by the amount that funds are less than appropriations and an equal amount of General Revenue Funds is appropriated to HHSC.

*Update fiscal years and total dollar amount based on revenue projections.*

| NEW               |                           | **New. Appropriation of Local Funds.** All funds received by the Health and Human Services Commission and the Department of State Health Services from counties, cities, and any other local governmental entities and all balances from such sources as of August 31, 2019, are appropriated for the biennium ending August 31, 2020, for the purpose of carrying out the provisions of this Act.

*DSHS Rider 21 and HHSC Rider 177 are identical. Request to move that rider to Special Provisions.*

| NEW               |                           | **New. Reporting of Child Abuse.** The Health and Human Services Commission and the Department of State Health Services may distribute or provide appropriated funds only to recipients who show good faith efforts to comply with all child abuse reporting guidelines and requirements set forth in Chapter 261 of the Texas Family Code.

*DSHS Rider 24 and HHSC Rider 215 are identical. Request to move the rider to Special Provisions.*