



Administrator Program
Monday, November 17, 2025
9:00am-10:00am

A. General Session: Industry Update

Presented by:

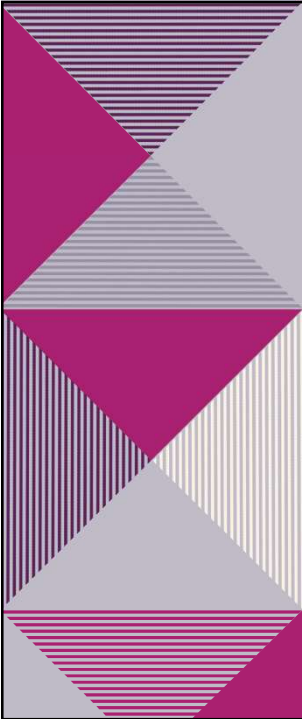
Rachel Hammon, BSN, RN, Executive Director, TAHC&H
and
Jennifer Elder, Director of Regulatory Affairs, TAHC&H



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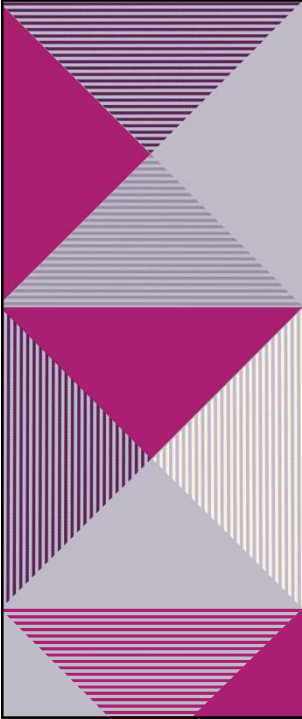
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REGULATORY UPDATE

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TMHP REVALIDATION

TMHP / HHSC MITIGATION STRATEGIES:

- ❖ Revalidation dues dates and enrollment period gap closure - Flexibilities extended through Nov. 30th
- ❖ Personalized Walkthroughs for significant systemic or process issues
- ❖ Designation of a dedicated provider enrollment representative

PROVIDER WORKGROUP

- ✓ Providers, Associations, HHSC Provider Enrollment Team, THMP Business Operations Team & TMHP Application Maintenance and Development Team.
- ✓ Based on the issues identified through this workgroup, HHSC has developed a working Plan document to correct the PEMS and revalidation process issues

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HHSC MEDICAID HOSPICE CONTRACTING

KNOWN ISSUES

- ❖ Untimely application processing
- ❖ Issues with CAMP system
- ❖ HHSC departmental staffing shortage

TAHC&H REGULATORY INTERVENTION

- ✓ Stalled provider applications Shepherded by TAHC&H Regulatory Director
- ✓ Provider identified CAMP issues reported back for a workaround or correction
- ✓ Frequent TAHC&H follow up for HHSC accountability and application processing.

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TULIP SYSTEM DOWNTIME

HHSC ANNOUNCEMENT:

- ❖ Prior to public notice, HHSC announced downtime to start in November.
- ❖ Did not include any alternate way for providers to run **EMR/NAR** checks

TAHC&H REGULATORY INTERVENTION

- ✓ Met with HHSC to advocate for alternate ways to conduct EMR/NAR checks along with clear instructions on self reports during the downtime
- ✓ HHSC agreed to open the original EMR / NAR registries for the duration of the downtime
- ✓ Date of downtime pushed back to December.

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COMMUNITY CARE RATE IMPLEMENTATION

- TAHC&H Community Care Rate Implementation Resources
 - <https://tahch.org/tahchorg/regulatory/crates>
- Webinar: Texas Community Care Rate Restructure - Tools and Strategies for Fiscal and Compliance Success
 - Register [here](#)
- Monitoring Implementation- Current issues
- TAHC&H Community Care Services Committee created subcommittee to track issues

 The graphic on the right has a light gray background. At the top left is the Texas Association for Home Care & Hospice logo. The title 'Community Care Rate Implementation Resources' is in red. Below it, a group of colorful human figures (yellow, green, red, blue, orange, purple) are holding hands. Overlaid on the figures are the words 'Understanding Rates', 'Training', 'Support', and 'Implementation' in blue. At the bottom, a red banner reads 'Old Rates → New Rates'.

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COMMUNITY CARE RATE IMPLEMENTATION - ADVOCACY

- Meetings with Governor's office Staff on Community Care related Sunset Recommendations
- Meetings with HHSC and the OIG related to application of 1099 status to attendants
- Reporting to HHSC ongoing Misinformation and strong-arm tactics used by HHSC case workers
- PFD released additional [IL 2025-25](#)
- Medicaid CHIP area working on IL for Caseworkers and Contract Monitors

What can you do?

- Report to TAHC&H regulatory@tahch.org:
 - specific information about case worker misinformation



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PEDIATRIC SERVICES



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PDN - UA MODIFIER

- Clarification to the PDN UA modifier policy: [Private Duty Nursing Services – Texas Health Steps - CCP Policy stakeholder comments and HHSC responses \(PDF\)](#)
- [Clarifications for PDN Effective November 1, 2025, for Texas Medicaid](#)
- Questions can be sent to MedicaidBenefitRequest@hhsc.state.tx.us
- Clinical policies are outlined in the Texas Medicaid Provider Procedures Manual: [TMHP Provider Manual](#)

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PDN - UA MODIFIER

ADVOCACY:

- Successfully ensured TD and TE modifier changes attempted by Superior and BCBS were not implemented.
- Survey on UA Modifier Policy Change Impact
- Example for Sunset – Policy changes that have a fiscal impact

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PEDIATRIC THERAPY AND PDN

- PAC Strategy
 - Build relationships
 - Reward allies
- Notebook Profiling Districts
- Member Engagement Strategy
- Preparing for Legislative Appropriations Request (November)



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RURAL HEALTH TRANSFORMATION (RHT) PROGRAM

TAHC&H Comments

- **Expand Broadband Access & Support EVV Compliance** - Advocate for reliable connectivity in rural areas to ensure caregivers can meet Electronic Visit Verification (EVV) requirements without undue burden.
- **Invest in Workforce Sustainability** - Address reimbursement rates and workforce incentives to attract and retain younger caregivers and support aging attendants in rural communities.
- **Strengthen Rural Health Infrastructure** - Promote strategic investments in Health Information Exchange (HIE), telehealth, and data-sharing to improve care coordination and access in underserved regions.

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RURAL HEALTH TRANSFORMATION (RHT) PROGRAM

State Application

- 202 of the 254 counties identified in TX as rural
- Investments in HIE - \$150M (15%) Focus: Patient portals, HIE and Remote Patient Monitoring
- Investments in Workforce: \$200M (20%) Focus: Recruitment and Retention
- Partnerships: Expanding use of CINs

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SUNSET ADVISORY COMMISSION

- TAHC&H Task Force Completed Recommendations
- Initial Stakeholder Survey submitted Nov. 5th
- Meeting with HHSC
- Meeting with Sunset Advisory Commission
- Sunset Commission Members

Issue Areas:

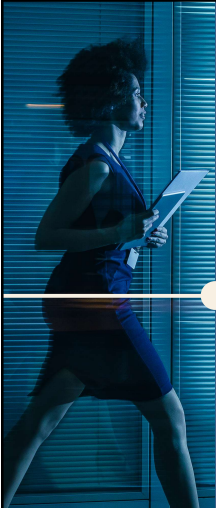
- **Organizational Structure** (Provider Ombudsman, Aligning Rate Setting with Policy Objectives, Transparency and Communication, Enhanced Contract Monitoring)
- **Managed Care Model and MCO Oversight** (LTSS oversight and accountability, continuity of care during transitions, Medical Review Reforms)
- **Data and Transparency** (Data access and availability, Open Model EVV, Therapy Reporting, PDN billed vs. Authorized hours, Medicaid Hospice Contracting)
- **Other Key Issues** (Provider Survey Process)

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CY 2026 HOME HEALTH RULE UPDATE

At the OMB as of 11/12/25

TAHC&H ADVOCACY

- ✓ September DC fly in
- ✓ Advocacy Alerts to all TX delegation members to weigh in with CMS, OMB and Administration with over 1470 sent.
- ✓ Multiple TX offices has weighed in with CMS and signed on to HR 5142
- ✓ Chairman letter sent a letter directly to CMS, OMB and Administration, calling for them to address fraud and abuse and reset our payments
- ✓ Multiple Hill meetings
- ✓ Op Ed. Houston Chronical

OTHER ADVOCACY

- ✓ Chairman Rick Scott letter

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TELEHEALTH FLEXIBILITIES

- Telehealth flexibilities for Home Health face-to-face encounters and Hospice eligibility for recertification extended through January 30th, 2026 (CR passed Sen. 11/10 – House 11/--).
- Filed Legislation in support of Telehealth include:
 - [H.R.1650 - Telehealth Expansion Act of 2025](#)
 - [H.R.5081 - Telehealth Modernization Act](#)
 - [H.R. 4206 - CONNECT for Health Act](#)

Additional Resources:

[CMS Telehealth FAQ's – Updated 10/15/25](#)

[CMS MLN Telehealth and Remote Patient Monitoring](#)

Stay Up to Date on CMS Updates Related to Telehealth [HERE](#) and [HERE](#)

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HOSPICE



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HOSPICE - OIG AND SFP

OIG Report - Texas Hospice Cap Overpayments

- **What the OIG Found:** Texas overpaid \$10.5 million to 174 hospices for services provided during Federal fiscal years 2020 through 2022 because it did not have any policies and procedures related to calculating and collecting the hospice cap overpayments. Texas did not calculate these cap overpayments; therefore, it did not collect them or return the related Federal share.

OIG Recommendations for Texas:

- collect the hospice cap overpayments totaling \$10.5 million and refund the Federal share of \$6.9 million to the Federal Government and
- develop and implement policies and procedures related to calculating and collecting hospice cap overpayments.

[See the OIG report here](#)

TAHCH Advocacy: Meeting with HHSC & OIG

SFP - We have filed for another stay through the end of the year. In the report to the judge, CMS offered no indication they were working on the rule.

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THANK YOU!

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