Healthcare Cost, Coverage, and Access

- Reduce overall costs and increase value in the healthcare system through proven prevention, well-being, and chronic disease management initiatives.

- Hold commercial health insurers accountable for ensuring appropriate patient access to care, including reducing use of prior authorization, ensuring adequate provider networks, and limiting inappropriate denials.

- Support efforts to increase the number of Texans with affordable, comprehensive health insurance, including:

  » Offering tax credits to buy health insurance in the private market and allowing portability of coverage;

  » Expanding public and private market-based coverage and access to uninsured and low-wage working Texans; and,

  » Mitigating any coverage losses resulting from the Medicaid eligibility renewal process.

- Preserve waivers for the utilization of telehealth and virtual care that have expanded access to convenient, affordable, and patient-centered care.

Medicare, Medicaid and Uncompensated Care (UC)

- Support reimbursing hospital and physician services at rates that adequately ensure access to care—opposing harmful site-neutral and facility fee payment policies that unfairly penalize hospital outpatient departments (HOPDs) and put access to essential care and services in jeopardy.

- Support fair distribution of hospital supplemental funding to ensure Disproportionate Share Hospital (DSH) payments and other supplemental payment programs are commensurate with the level of services provided by public and private hospitals based on the unpaid costs of care for Medicaid and uninsured patients.

- Protect the flexibility needed to generate the non-federal share of Medicaid supplemental payments through locally generated solutions, such as Local Provider Participation Funds (LPPFs) to defray uncompensated care costs.

- Ensure Medicare payment rates reflect the acuity of patients served in long-term care, home health, and rehabilitation facilities.

- Protect the 340B Drug Pricing Program to ensure that hospitals can maintain vital patient services and expand access to care by holding drug manufacturers accountable.

Workforce

- Reduce physician, nursing, allied health, community health, and behavioral health workforce shortages through enhanced funding for faculty salaries, student scholarships, loan repayment, financial aid, and job training programs, including adequate funding for:

  » Graduate medical education (GME), medical residency, and post-graduate allied health training positions for community-based hospitals; and,

  » The Nursing Shortage Reduction Fund to increase nursing school graduates.

- Support efforts that bolster safety, strengthen security, and mitigate the risk of violence throughout all healthcare settings, while reducing administrative burdens that take clinicians away from the bedside and contribute to burnout.

- Support immigration, non-discrimination, and cultural competency policies to recruit and retain qualified physicians, nurses, and allied health professionals.

- Oppose efforts to impose mandatory, arbitrary nurse-staffing ratios, as well as proposals that allow for the establishment of a labor union without approval through a private ballot election.

Insurance Reform

- Strengthen prompt-pay requirements with appropriate denial standards to ensure timely and accurate payments to providers and impose them on all payer sources.

- Oppose government rate-setting proposals in the private health care market.

- Provide the Texas Department of Insurance (TDI) with greater authority to regulate health insurance plans and enable more employers and insurance carriers to provide affordable healthcare coverage in the health insurance marketplace.

- Support licensure of Preferred Provider Organizations (PPOs) and increased regulatory requirements and oversight of the business practices of health plans and their subcontractors, including third-party administrators.

- Support efforts to require PPOs and Health Maintenance Organizations (HMOs) to develop and maintain adequate networks of physicians and other providers to reduce the exposure of patients to additional out-of-pocket costs.

- Support consumer-minded use of the prior authorization process that minimizes untimely retrospective denials.

- Ensure consumers can rely on their coverage by disallowing health plans from making unilateral mid-year coverage changes that disrupt provider networks, which inappropriately delay and deny care.

- Strengthen the prudent layperson standard to ensure adequate reimbursement for consumers seeking emergency care.

Accountability and Transparency

- Oppose efforts that would increase charity care requirements and/or negatively impact the tax liabilities of non-profit hospitals.

- Support consumer access to meaningful price transparency and quality data for all healthcare providers and payers.

- Ensure fair and reasonable implementation of surprise medical billing rules that balance protecting patients and the burden on providers.

2025-2026 Federal/State Public Policy Priorities

Texas Health Resources®

Behavioral Health

- Support full Medicaid coverage for partial and intensive outpatient therapy of behavioral health services to provide consumers access to the full continuum of care and reduce hospital readmissions.
- Support increased funding to ensure timely and appropriate access to inpatient, outpatient, and community-based behavioral health services.
- Support enforcement of federal and state behavioral health parity laws.
- Support clarifying orders of protective custody (OPCs) and emergency detention orders (EDOs) to streamline patient access to psychiatric treatment that mitigates administrative burden and costs.
- Support efforts to address the substance use disorder crisis, including expanding Medicare coverage for residential treatment, allowing appropriate sharing of patient information, and increasing access to evidence-based treatment.
- Enhance the oversight of the adequacy of commercial plan networks for behavioral health benefits as well as their use of administrative barriers to care.

Trauma and Public Health Preparedness

- Ensure reliable funding for the state's trauma care network that fairly compensates hospitals for providing life-saving care, including Medicaid reimbursement add-on payments.
- Provide additional funding to address the social determinants of health by reducing healthcare disparities, delivering population health interventions, and promoting health equity, prevention, wellness, and chronic disease management programs.
- Support expanded resources for public health data collection to assist in community protection and emergency response while modernizing current reporting regulations for public health data.
- Support regulatory relief and increased funding for public health, emergency preparedness, and response efforts.
- Support efforts to improve vaccination rates for vaccine preventable diseases.
- Provide funding to public health agencies to update technology and staffing to support interoperability and efficiency with healthcare partners.

Enhanced Continuum of Care

- Support legislative and regulatory changes that enhance value-based care and quality across the continuum, including:
  » Expanding exceptions and safe harbors for Accountable Care Organizations (ACOs) and modifying standards and CMS conditions of participation to facilitate integrated care;
  » Providing incentives to physicians to participate in continuing medical education (CME) and patient safety programs that support team training and effective communication skills to improve patient care coordination and reduce preventable errors;
  » Extending flexibilities that permanently allow acute-level, high-quality hospital-at-home care; and,
  » Extending the three-midnight rule for skilled nursing facility admissions, which contributes to excessive costs, lengths of stay, and hinders hospitals' ability to preserve capacity for patients needing higher levels of care.

Quality and Patient Safety

- Support legislative and regulatory efforts that focus on enhancing quality and patient safety through:
  » Sharing valid, reliable clinical quality, and patient safety data with appropriate confidentiality and liability protections;
  » Implementing streamlined pay-for-performance methodologies to improve quality and avoid unnecessary costs and administrative burden;
  » Aligning federal and state quality metrics in order to reduce duplication, costs, and administrative burden for providers;
  » Utilizing high reliability principles to reduce medical errors and adverse events; and,
  » Addressing the total cost of care through the value of early clinical intervention.

Health Information Technology (HIT)

- Enhance appropriate use of health information technology systems that save lives, improve health outcomes and reduce costs by:
  » Advancing value-based care and population health management models;
  » Advocating for greater protections against cybersecurity threats that can compromise protected health information and patient safety;
  » Promoting standards, functionality and workflows that improve efficiencies related to HIT connectivity and interoperability;
  » Supporting the appropriate use of telehealth services through payment and service delivery models that improve access to care, preserve the physician/patient relationship, deliver high-quality care, and promote patient safety;
  » Reducing manual, outdated, and duplicative mandatory reporting requirements and administrative burden; and,
  » Promoting reasonable exceptions to information blocking that balance patient access and safety with provider need.
- Support investments in artificial intelligence that foster delivery system innovations and improved outcomes while providing reasonable guardrails for patient safety and privacy.

Medical Liability and Tort Reform

- Protect state tort/compensation laws that provide fairness, predictability and efficiency in the civil justice system.
- Protect existing peer review and credentialing confidentiality provisions while safeguarding the ability to address clinical concerns and complaints.

*For additional information, please contact Joel Ballew, Vice President, Government and Community Affairs, at **joelballew@texashealth.org**.*