

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<b>Committees Recommended to Consolidate</b>				
<b>Health Care Information Technology Advisory Committee</b>	Public Health	Discontinue	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 2</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, suggested that this committee be consolidated with the Health Information Exchange Advisory Committee.</li> <li>• Another commenter, representing <b>Valley Psychological Services</b>, made the same recommendation, stating that there needs to be a mechanism by which provider feedback can be obtained.</li> </ul>	<p>Discontinue as is, and reconstitute by merging with the <b>Health Information Exchange and Telemedicine/Telehealth Advisory Committees</b> with an updated charge and scope.</p> <p>This committee is inactive, as it has completed its charge to develop a long-range plan for health information technology.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<b>Health Information Exchange Advisory Committee</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Health Care Quality Initiatives	Discontinue	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 7</b>  <b>Number Excluded from Analysis: 4</b></p> <p><i>Summary of Comments in Support:</i>                      Two commenters stated that another stakeholder forum should be put in its place.</p> <ul style="list-style-type: none"> <li>• <b>Texas e-Health Alliance</b> recommended a reformed and broader stakeholder input process and accompanying dialogue. <b>Note:</b> <i>The Texas e-Health Alliance has representation as an Advisory Committee member.</i></li> <li>• <b>Texas Hospital Association</b> recommended something in its place to keep stakeholders abreast on state Health Information Exchange (HIE) activities; otherwise, continue.</li> </ul> <p><i>Summary of Comments in Opposition:</i>                      Six recommendations were received for the continuation of the committee. Three from San Antonio, one from Harlingen, one from Corpus Christi, and one from Temple.</p> <ul style="list-style-type: none"> <li>• <b>Baylor Scott and White Health</b> stated discussion has helped with success of its Medicaid Meaningful Use reporting, as well as keeping it informed about statewide HIE activities.</li> <li>• <b>CentroMed and H-E-B Pharmacy—Managed Care</b> commented the committee provides a key forum for stakeholders to exchange ideas, collaborate, and develop programs.</li> </ul>	<p>Discontinue as is, and reconstitute by merging with the <b>Health Care Information Technology and Telemedicine/Telehealth Advisory Committees</b> with an updated charge and scope.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>

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			<ul style="list-style-type: none"> <li>• <b>CHRISTUS Health</b> supports continuation.</li> <li>• <b>Southern Physician Alliance</b> noted that the advisory committee serves as a channel for Texas HIEs to communicate with Texas Medicaid.</li> <li>• <b>Private Citizen/San Antonio HIE Employee</b> stated that the advisory committee served a critical role in helping to align services and share information related to HIE in Texas and serves as a key forum for stakeholders. <b>Note: Healthcare Access San Antonio HIE has representation as an Advisory Committee Member.</b></li> <li>• One commenter, the <b>Texas Association for Home Care and Hospice</b>, suggests consolidating committee with Telemedicine/Telehealth Advisory Committee.</li> </ul> <p><b>Note:</b> Four responses were excluded from the analysis:</p> <ul style="list-style-type: none"> <li>• <b>KSNY AM &amp; FM/KLYD FM</b>—did not provide response related to the question about the Advisory Committee.</li> <li>• <b>Methodist Healthcare Ministries of South Texas</b>—asked question about the deadline for comments (HHSC responded to the question).</li> <li>• <b>Two HHSC Employees</b> — supported continuation but did not elaborate on its reason; excluded because it did not represent the external stakeholder community.</li> </ul>	
<p><b>Telemedicine/ Telehealth</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Medicaid and Other Social Services Programs</p> <p>Managed Care Under Medicaid and the Child Health Plan Program</p>	<p>Discontinue</p>	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• <b>Texas Association of Home Care &amp; Hospice</b> recommends consolidating with HIE Advisory Committee to create a new committee to consider access to care in relation to health information technology and other relevant topics.</li> </ul>	<p>Discontinue as is, and reconstitute by merging with the <b>Health Care Information Technology and Health Information Exchange Advisory Committees</b> with an updated charge and scope.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Council on Children and Families</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Children</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>The Arc of Texas and Texas Association of Home Care &amp; Hospice</b> support consolidation with the Children’s Policy Council.</li> </ul>	<p>Consolidate functions with the <b>Children’s Policy Council</b> along with those of the <b>Interagency Task Force for Children with Special Needs.</b></p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>

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<p><b>Interagency Task Force for Children with Special Needs</b> <i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Persons with Disabilities, Including Persons with Autism</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>Texas Medical Association/Texas Pediatric Society</b> supports consolidation.</li> </ul> <p><i>Summary of Comments in Opposition</i></p> <ul style="list-style-type: none"> <li>• <b>Easter Seals</b> recommends continuation without consolidation.</li> </ul> <p><u>General Comments:</u></p> <ul style="list-style-type: none"> <li>• <b>The Arc of Texas</b> – no comment because consolidation information not included.</li> <li>• <b>Texans Care for Children</b> – without consolidation information, it is unknown if new configuration will be more effective and streamlined.</li> </ul>	<p>Consolidate functions with the <b>Children’s Policy Council</b> along with those of the <b>Council on Children and Families</b>.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Medicaid/CHIP Quality Based Payment Advisory Committee</b> <i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Medicaid and Other Social Services</p> <p>Health Care Quality Initiatives</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 3</b></p> <p><i>Summary of Comments in Support</i></p> <ul style="list-style-type: none"> <li>• <b>Texas Association for Home Care &amp; Hospice</b> proposed consolidating with State Medicaid Managed Care Advisory Committee.</li> </ul> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• <b>Children’s Hospital Association of Texas</b> supports continuation with focus on acute care services in Medicaid to integrate managed care organizations, hospital potential preventable events, and 1115 Waiver quality initiatives.</li> <li>• <b>Texas Medical Association/Texas Pediatric Society</b> would like the committee to continue as standalone; establish Potential Preventable Events subcommittee.</li> <li>• <b>Teaching Hospitals of Texas</b> reconsider consolidation.</li> </ul> <p><u>General Comment:</u></p> <ul style="list-style-type: none"> <li>• <b>The Arc of Texas</b> – no comment because consolidation information not included.</li> </ul>	<p>Consolidate functions with the <b>Texas Institute of Healthcare Quality and Efficiency</b> with a new scope to address the work being done within Medicaid/CHIP regarding quality initiatives.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Texas Institute of Health Care Quality and Efficiency</b></p>	<p>Health Care Quality Initiatives</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 2</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p>	<p>Consolidate functions with the <b>Medicaid/CHIP Quality Based Payment Advisory Committee</b> with a new scope to address the work being done within</p>

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<i>(Senate Bill 200 removes this committee from statute)</i>			<ul style="list-style-type: none"> <li>• <b>Baylor Scott &amp; White Health</b> suggests the Institute’s role in facilitating key policy discussions around improving healthcare quality and efficiency should be taken on by the Statewide Health Coordinating Council (SHCC).</li> <li>• <b>Texas Association of Health Plans</b> supports consolidation but is unclear on committee absorbing the Institute.</li> </ul>	<p>Medicaid/CHIP regarding quality initiatives.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>STAR+PLUS Nursing Facility</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Aging</p> <p>Managed Care Under Medicaid and the Child Health Plan Program</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 5</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>Patty Ducayet (State Long-Term Care Ombudsman), The Arc of Texas, Providers Alliance for Community Services, Texas Medical Association, and Texas Association of Health Plans</b> support consolidation proposal.</li> </ul>	<p>Consolidate functions into the <b>State Medicaid Managed Care Advisory Committee.</b></p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>STAR+PLUS Quality Council</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Medicaid and Other Social Services</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 6</b>  <b>Number in Opposition to Initial Analysis: 3</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>Patty Ducayet (State Long-Term Care Ombudsman), The Arc of Texas, Providers Alliance for Community Services, Texas Medical Association, Texas Association of Health Plans, and Texas Association of Home Care &amp; Hospice</b> supports consolidation proposal.</li> </ul> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• <b>Bob Kafka, ADAPT of Texas</b>, recommends that the committee continue and also recommends a standing subcommittee for Recruitment &amp; Retention of Community Attendants “under the STAR+PLUS rubric.”</li> <li>• <b>Debbie Wiederhold, committee member</b>, recommends continuing the council or establishing as a formal subcommittee.</li> <li>• <b>Jon Scepanski, committee member</b>, recommends continuing the council.</li> </ul>	<p>Reconstitute as a subcommittee of the <b>State Medicaid Managed Care Advisory Committee</b> until 9/1/16.</p> <p>At that time, the State Medicaid Managed Care Advisory Committee will make a recommendation to the Executive Commissioner on the effectiveness of this structure.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Council for Advising and Planning (CAP) for the Prevention and Treatment of Mental Health and Substance Use Disorders</b></p>	<p>Behavioral Health</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 3</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing <b>Texas Association for Home Care &amp; Hospice</b>, suggested consolidating the functions of this committee with the new Behavioral Health Advisory Committee and then create a subcommittee to focus on the vision of CAP.</li> </ul>	<p>Reconstitute as a subcommittee of the <b>Behavioral Health Advisory Committee</b>, with a focus on the block grant requirements.</p> <p>Both the new Behavioral Health Advisory Committee and the reconstituted subcommittee will have</p>

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(DSHS Sunset Recommendation 2.6)			<p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter, <b>a consultant for higher education</b>, suggests keeping CAP but revising its functions and membership and establishing subcommittees as appropriate.</li> <li>Another commenter, representing <b>Mental Health America of Texas</b>, supports keeping CAP as it is mandated by the federal block grant and provides an avenue for consumer/advocate advice.</li> <li>Another commenter (<b>Rose McCorkle</b>) questioned whether it is prudent to discontinue or combine committees focused on mental health and substance use disorders as it may diminish focus.</li> </ul>	<p>consumer/advocate representation.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Drug Demand Reduction Advisory Committee</b></p> <p><i>(Senate Bill 277 removes this committee from statute)</i></p>	Behavioral Health	Consolidate Functions with Another Committee	<p><b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 2</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Aliviane, Inc.</b>, indicated that this committee provides a venue for the El Paso or other border communities to have a voice regarding drug demand reduction strategies.</li> <li>Another commenter, representing <b>Mental Health America of Texas</b>, also supports keeping this committee as no other committee specifically addresses drug demand reduction.</li> </ul>	<p>Consolidate functions into the <b>Behavioral Health Advisory Committee</b>.</p> <p>The new committee will determine the need for a subcommittee to specifically address drug demand reduction issues by 9/1/16.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Local Authority Network Advisory Committee</b></p> <p><i>(Senate Bill 277 removes this committee from statute)</i></p>	Behavioral Health	Consolidate Functions with Another Committee	<p><b>Number in Support of Initial Analysis: 2</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing <b>Texas Association for Home Care &amp; Hospice</b>, suggested consolidating the functions of this committee with the new Behavioral Health Advisory Committee and then create a subcommittee to discuss issues of the local community mental health centers.</li> <li>Another commenter, representing <b>Mental Health America of Texas</b>, also supports consolidating the functions and suggested the duties being transferred promote real competition and choice at the local level.</li> </ul>	<p>Consolidate functions into the <b>Behavioral Health Advisory Committee</b>.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Texas Children Recovering from Trauma Steering Committee</b></p>	Behavioral Health	Consolidate Functions with Another Committee	<p><b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 3</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter, <b>a committee member</b>, pointed out that this committee is required by the Substance Abuse and Mental Health</li> </ul>	<p>Reconstitute as a subcommittee of the <b>Behavioral Health Advisory Committee</b> with a focus on the grant requirements.</p> <p>Recommend consolidating subcommittee functions with the functions of the <b>Texas</b></p>

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			<p>Services Administration grant and that active participation of family and youth stakeholders is important to the success of the adopting trauma informed care into the operations of local mental health authorities.</p> <ul style="list-style-type: none"> <li>Another commenter, representing the <b>Department of Veterans Affairs</b>, stated that the committee should not be consolidated as the content reviewed is grant funded and is complex to review. The commenter said that mixing this information with other committee workgroups would make it overly cumbersome for non-DSHS staff to participate in this initiative.</li> <li>One commenter noted that this committee should stand alone. However, if the decision is made to have them as subcommittees, a written report to the legislature should reflect that they would be a required subcommittee that exists in statute until their goals/outcomes have been met.</li> </ul>	<p><b>System of Care Consortium</b>, since both have similar membership and complimentary functions.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Texas System of Care Consortium</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Behavioral Health</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 4</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>Three commenters opposed to the initial analysis, who identified as <b>family members</b> (two urban and one rural) <b>of children or youth with mental health conditions</b> stated that the Consortium is needed to continue to provide a forum that includes family and youth partners to implement system of care statewide, under Senate Bill 200. The commenters suggest that the Consortium is focused on the unique challenges of children/youth behavioral health and that the advisory group should remain in place to provide input on policies and practices.</li> <li>One commenter noted that this committee should stand alone. However, if the decision is made to have it as a subcommittee, a written report to the legislature should reflect that it should be a required subcommittee that exists in statute until its goals/outcomes have been met.</li> </ul>	<p>Reconstitute as a subcommittee of the <b>Behavioral Health Advisory Committee</b>.</p> <p>Recommend that the Texas System of Care Consortium serve as an on-going standing subcommittee on children/youth behavioral health issues for the next three years. Also recommend consolidating functions of the <b>Texas Children Recovering from Trauma Steering Committee</b> into this subcommittee.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Pharmaceutical &amp; Therapeutics Committee</b></p>	<p>Medicaid and Other Social Services Programs</p>	<p>Consolidate Functions with Another Committee</p>	<p><b>No Comments Received.</b></p>	<p>Consolidate functions with another committee, per legislative direction (Senate Bill 200).</p> <p>(Pharmaceutical &amp; Therapeutics Committee will merge into the <b>Drug Utilization Review Board</b>).</p>

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<b><i>Committees Recommended to Discontinue</i></b>				
<b>Advisory Committee for the Office of Adult Protective Services</b>	Protective Services	Discontinue	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter (<b><i>representing a local Council on Alcohol and Drug Abuse</i></b>) was concerned about the lack of justifications included in the recommendations for discontinuations of all committees, and specifically mentioned this one. Requested information regarding all discontinued advisory committees.</li> </ul>	Discontinue.  The committee is inactive and functions are currently being carried out by the DFPS Council.  However, DFPS will seek stakeholder input on the creation of a new Protective Services Advisory Committee by 9/1/16.
<b>Advisory Committee for the Office of Protective Services for Families and Children</b>	Protective Services	Discontinue	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 2</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter (<b><i>representing a local Council on Alcohol and Drug Abuse</i></b>) was concerned about the lack of justifications included in the recommendations for discontinuations of all committees, and specifically mentioned this one. Requested information regarding all discontinued advisory committees.</li> <li>One commenter (<b><i>a social work professional</i></b>) expressed general concern about the proposed discontinuation of five committees that addressed child abuse, including this one. The commenter felt that a venue for interested parties to give input in improving the child welfare system is needed.</li> </ul>	Discontinue.  The committee is inactive and functions are currently being carried out by the DFPS Council.  However, DFPS will seek stakeholder input on the creation of a new <b>Protective Services Advisory Committee</b> by 9/1/16.
<b>Child Abuse Program Evaluation Committee</b>	Protective Services  Children	Discontinue	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter (<b><i>a social work professional</i></b>) expressed general concern about the proposed discontinuation of five committees that addressed child abuse, including this one. The commenter felt that a venue for interested parties to give input in improving the child welfare system is needed.</li> </ul>	Discontinue.  The committee is inactive and functions are currently being carried out by the DFPS Council.  However, DFPS will seek stakeholder input on the creation of a new <b>Protective Services Advisory Committee</b> by 9/1/16.
<b>Inpatient Mental Health Services Advisory Committee</b>  <i>(Senate Bill 277 removes this committee from</i>	Behavioral Health	Discontinue	<p><b>Number in Support of Initial Analysis: 0</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter (<b><i>Rose McCorkle</i></b>) questioned if it is prudent to discontinue or combine committees focused on mental health and substance use disorders as it may diminish focus.</li> </ul>	Discontinue.  This committee is inactive. Functions will be addressed by the new committee established by Senate Bill 1507 (84R) to address coordination of forensic services and inpatient bed day allocation

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<i>statute)</i>				methodology.
<b>Interagency Coordinating Council for HIV and Hepatitis</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Public Health	Discontinue	<b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 1</b>  <i>Summary of Comments in Opposition:</i> <ul style="list-style-type: none"> <li>One commenter, representing <b>Teaching Hospitals of Texas</b>, stated that is important to have a stable resource for enhancing coordination in the midst of agency changes and consolidation.</li> </ul>	Discontinue.  Formal and informal relationships and planning occurs between DSHS and the other agencies represented outside of the committee. These established mechanisms to collaborate and coordinate will not be affected by agency changes and consolidation.
<b>Medicaid/CHIP Regional Advisory Committees (RAC)</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Managed Care Under Medicaid and the Child Health Plan Program	Discontinue	<b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 14</b>  <i>Summary of Comments in Opposition:</i> <ul style="list-style-type: none"> <li>Those stakeholders who responded found the RACs to be important for the opportunity to receive updates and information, provide regional community input, and communicate with providers, especially managed care organizations.</li> <li>Stakeholders would like these committees to continue and, if not in the current form, then through some alternative means that includes the use of technology allowing for virtual participation.</li> </ul>	Discontinue, as RACs currently exists.  Reconstitute in a structure that more effectively provides a forum for regional input and feedback to leadership through the new Executive Council. HHSC will seek stakeholder input on this new structure by 9/1/16.  Any changes will be addressed through the rule/bylaw process.
<b>Task Force on Domestic Violence</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Prevention Efforts	Discontinue	<b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 1</b>  <i>Summary of Comments in Opposition:</i> <ul style="list-style-type: none"> <li>One commenter (<b>a counselling professional</b>) expressed general concern about discontinuation of committees that address domestic violence. No specific recommendation, but feels domestic violence continues to be an issue that would benefit from a committee’s oversight.</li> </ul> <i>General Comment:</i> <ul style="list-style-type: none"> <li>Commenter hoped the rationale for discontinuing the committee was valid.</li> </ul>	Discontinue.  [Note: Although not included on this chart because the convener of the committee is not a state agency, the Texas Council on Family Violence created the Project SAFE Expert Panel to support the implementation of the recommendations of other task forces, and will be the venue for discussion of these issues by interested stakeholders and agencies. HHSC and DFPS both have representation on this committee.]
<b>Task Force to Address the Relationship between Domestic Violence and Child Abuse and Neglect</b>	Protective Services  Children	Discontinue	<b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 2</b>  <i>Summary of Comments in Opposition:</i> <ul style="list-style-type: none"> <li>One commenter (<b>a counselling professional</b>) expressed general concern about discontinuation of committees that address domestic violence. No specific recommendation, but feels</li> </ul>	Discontinue.  [Note: Although not included on this chart because the convener of the committee is not a state agency, the Project SAFE Expert Panel was created by the Texas Council on Family Violence to



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			<p>domestic violence continues to be an issue that would benefit from a committee’s oversight.</p> <ul style="list-style-type: none"> <li>One commenter (<i>a social work professional</i>) expressed general concern about the proposed discontinuation of five committees that addressed child abuse, including this one. The commenter felt that a venue for interested parties to give input in improving the child welfare system is needed.</li> </ul>	<p>support the implementation of the recommendations of other task forces and will be the venue for discussion of these issues by interested stakeholders and agencies. HHSC and DFPS both have representation on this committee.]</p>
<p><b>Task Force to Reduce Child Abuse and Neglect and Improve Child Welfare</b></p>	<p>Protective Services  Children</p>	<p>Discontinue</p>	<p><b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter (<i>a social work professional</i>) expressed general concern about the proposed discontinuation of five committees that addressed child abuse, including this one. Felt that a venue for interested parties to give input in improving the child welfare system is needed.</li> </ul>	<p>Discontinue.</p> <p>However, DFPS will seek stakeholder input on the creation of a new <b>Protective Services Advisory Committee</b> by 9/1/16.</p>
<p><b>Advisory Committee on Medicaid/CHIP Program Rate &amp; Expenditure Disparities between the TX-Mexico Border Region and Other Areas of the State</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Medicaid and Other Social Services Programs</p>	<p>Discontinue</p>	<p><b>No Comments Received.</b></p>	<p>Discontinue.</p>
<p><b>State Advisory Committee on Childcare Administrators and Facilities</b></p>	<p>Protective Services  Children</p>	<p>Discontinue</p>	<p><b>No Comments Received.</b></p>	<p>Discontinue.</p>
<p><b>Advisory Committee for Local Governmental Entities</b></p>	<p>Other</p>	<p>Discontinue</p>	<p><b>No Comments Received.</b></p>	<p>Discontinue.</p>
<p><b>Arthritis Advisory Committee</b></p>	<p>Public Health</p>	<p>Discontinue</p>	<p><b>No Comments Received.</b></p>	<p>Discontinue.</p>

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<b>Caseload Standards Advisory Committee</b>	Protective Services	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Disproportionate Share Hospital Payment – Uncompensated Care Payment Workgroup</b>	Regulatory	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Guardianship Advisory Board</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Other	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Information Resources Advisory Committee</b>	Other	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Interagency Council for Genetic Services</b>  <i>(Senate Bill 219 removes this committee from statute)</i>	Persons with Disabilities, Including Persons with Autism	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>LVN On-call Pilot Advisory Committee</b>	Persons with Disabilities, Including Persons with Autism	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Neonatal Intensive Care Unit Council</b>	Public Health	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Physician Payment Advisory Committee</b>	Medicaid and Other Social Services Programs	Discontinue	<b>No Comments Received.</b>	Discontinue.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<b>Public Assistance Health Benefit Review &amp; Design</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Medicaid and Other Social Services Programs	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Quality-based Payment Workgroup</b>	Health Care Quality Initiatives	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Raising Texas Steering Committee</b>	Children	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Renewing Our Communities Account Advisory Committee</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Other	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Texas Bleeding Disorders Advisory Council</b>	Public Health	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Texas Medical Child Abuse Resources Education System Advisory Committee</b>  <i>(Senate Bill 277 removes this committee from statute)</i>	Prevention Efforts	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Texas Oyster Council</b>	Public Health	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Workgroup on Uncompensated Care</b>	Regulatory	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Worksite Wellness Advisory Board</b> <i>(Senate Bill 277</i>	Public Health	Discontinue	<b>No Comments Received.</b>	Discontinue.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<i>removes this committee from statute)</i>				
<b>Youth Camp Training Advisory Committee</b>  <i>(Senate Bill 277 removes this committee from statute)</i>	Public Health	Discontinue	<b>No Comments Received.</b>	Discontinue.
<b>Interagency Inspection Task Force</b>  <i>(Senate Bill 277 removes this committee from statute)</i>	Protective Services	Discontinue	<b>No Comments Received.</b>	Discontinue.  The overlap between agencies with inspection duties has diminished over time and DFPS currently conducts all inspections; therefore, no interagency entity is needed.
<b>Parental Advisory Committee</b>  <i>(Senate Bill 277 removes this committee from statute)</i>	Protective Services  Children	Discontinue	<b>No Comments Received.</b>	Discontinue.  Committee has never met. Duplicative of Parent Collaboration Group, which is active and recommended to continue.
<b>Strategic Directions Advisory Committee</b>	Protective Services  Children	Discontinue	<b>No Comments Received.</b>	Discontinue.  No record of committee ever having met.  DFPS will seek stakeholder input on the creation of a new <b>Protective Services Advisory Committee</b> by 9/1/16.
<b>Committees Recommended to Continue with Modifications</b>				
<b>Consumer Direction Workgroup</b>  <i>(Senate Bill 200 removes this committee from statute)</i>	Persons with Disabilities, Including Persons with Autism	Consolidate Functions with Another Committee	<b>Number in Support of Initial Analysis: 2</b> <b>Number in Opposition to Initial Analysis: 7</b>  <i>Summary of Comments in Support:</i> <ul style="list-style-type: none"> <li>• <b>Bob Kafka, ADAPT of Texas</b>, recommends keeping the Consumer Direction Workgroup (CDW) in place, but if the decision is made to combine, it should be a standing committee of Promoting</li> </ul>	Continue committee with reconstituted membership and specific goals.  Changes in scope and membership will be addressed through the rule/bylaw process.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
			<p>Independence Advisory Committee (PIAC).</p> <ul style="list-style-type: none"> <li>• <b>Texas Association of Home Care &amp; Hospice</b> recommends that CDW be established as a subcommittee of PIAC.</li> </ul> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• <b>Linda Levine, CDW member</b>, recommends keeping the CDW in place as it is the only advisory committee that focuses solely on consumer direction of services (CDS) for individuals with disabilities.</li> <li>• <b>Ricky Broussard, CDW member</b>, recommends keeping the CDW in place because the workgroup still has a lot of work to do, and has concerns that their voices will be lost if combined with another committee.</li> <li>• <b>Linda Litzinger, Texas Parent to Parent</b>, recommends keeping the CDW in place because no other committees can provide such focus on CDS.</li> <li>• <b>Gene Whitten-Legé, consumer directed service provider</b>, recommends keeping the CDW in place.</li> <li>• <b>Susan Murphree, Disability Rights Texas</b>, recommends keeping the CDW in place so that issues and expertise are not diluted.</li> <li>• <b>Helen Baker, CDW member and CDS provider</b>, asks that any consolidation with another committee accommodate the focus and interests of the current group.</li> <li>• <b>The Arc of Texas</b> recommends keeping the CDW in place out of “fear that it will remove consumer direction as a guiding principle through the reorganization process,” that there will be a loss of the workgroup’s momentum, and it will unintentionally weaken the scope. If CDW is merged with another committee, consumer directed services should have a standing spot on the new committee’s agenda.</li> </ul>	
<p><b>Drug Utilization Review Board</b></p>	<p>Medicaid and Other Social Services Programs</p>	<p>Continue Operations with Expanded Scope</p>	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>The Texas Medical Association</b> supports continued operations with inclusion of Pharmaceutical &amp; Therapeutics committee.</li> </ul>	<p>Continue Operations with expanded scope per legislative direction.</p> <p>(Pharmaceutical &amp; Therapeutics Committee merged into <b>Drug Utilization Review Board</b>).</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>State Medicaid</b></p>	<p>Managed Care</p>	<p>Continue</p>	<p><b>Number in Support of Initial Analysis: 7</b></p>	<p>Continue Operations with expanded</p>

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<p><b>Managed Care Advisory Committee</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Under Medicaid and the Child Health Plan Program</p>	<p>Functions with Expanded Scope</p>	<p><b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>The Arc of Texas</b> supports continued operations, urges HHSC to be thoughtful in how the scope is expanded, and that the committee continues to have representation from the IDD community.</li> <li>• <b>Texas Medical Association, the Center for Public Policy Priorities, and Helen Baker (committee member and CDS provider)</b>, support continued operations.</li> <li>• <b>Providers Alliance for Community Services</b> supports continued operations and having sufficient IDD providers on the committee.</li> <li>• <b>Texas Association of Health Plans</b> supports continued operations and having sufficient MCO representation on the committee.</li> <li>• <b>Jay Bueche, H-E-B Director of Pharmacy and committee member</b>, supports continued operations and recommends dividing the committee into two groups rather than reducing the current number of members.</li> </ul>	<p>scope to include the functions of the <b>STAR+PLUS Nursing Facility Committee</b>.</p> <p>In addition, the <b>STAR+PLUS Quality Council</b> will be reconstituted as a subcommittee of the State Medicaid Managed Care Advisory Committee. By 9/1/16, the committee will report to the Executive Commissioner regarding the effectiveness of this structure.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Traumatic Brain Injury Advisory Council</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	<p>Rehabilitation, Including for Persons with Brain Injuries</p>	<p>Continue Operations with Expanded Scope</p>	<p><b>Number in Support of Initial Analysis: 54</b></p> <p>Five out of 54 commenters identified as a brain injury survivor (consumer) or family member.</p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• 39 commenters wrote specifically: “I am supportive for the TBIAC continuing with expanded scope. This council has been a strong voice for policy change that has helped many people in the state of Texas with brain injuries.”</li> <li>• 11 additional commenters included: “Keep the TBIAC going with expanded scope” in their comments.</li> <li>• One person shared her experience living with TBI, emphasizing the need for significant improvement in services, but without specifically mentioning the TBIAC or any stakeholder group.</li> <li>• One person discussed the diverse membership that a brain injury advisory council should have.</li> <li>• Two commenters (<b>The Arc of Texas; Texas Medical Association/ Texas Pediatric Society</b>) support continuation.</li> </ul>	<p>Continue committee with reconstituted membership, specific goals, and scope to include acquired brain injury.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Children’s Policy Council</b></p> <p><i>(Senate Bill 200 abolishes this committee on</i></p>	<p>Persons with Disabilities, Including Persons with Autism</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 5</b></p> <p><b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• Five commenters support continuation and are pleased with continuation recommendation (<b>ARC, Disability Rights; Children’s</b></li> </ul>	<p>Continue operations with expanded scope.</p> <p>Committee would absorb the functions of both the <b>Council on Children and Families</b> and the <b>Task Force for Children</b></p>

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
9/1/17)	Children		<b>Hospital Association of Texas; Texas Medical Association/Texas Pediatric Society; Texas Association of Home Care &amp; Hospice)</b>	<b>with Special Needs.</b> Changes in scope and membership will be addressed through the rule/bylaw process.
<b>Allocation Advisory Committee</b> (HB 3793 Panel – 83R)	Behavioral Health	Continue Operations with Expanded Scope	<b>No Comments Received.</b>	Continue operations with expanded scope.  The legislature created this committee in Senate Bill 1507 (84R) by taking an older committee (House Bill 3793 Panel) that had completed its duties and gave it a new charge. In addition, DSHS recommends combining this committee’s new functions with those of the Forensic Workgroup, also created by S.B. 1507. *  Changes in scope and membership will be addressed through the rule/bylaw process.
<b>Sickle Cell Advisory Committee</b>  (Senate Bill 277 removes this committee from statute)	Public Health	Discontinue	<b>No Comments Received.</b>	Re-establish committee with a modified scope.  Charge the committee to focus on improving awareness efforts for sickle cell anemia.  Any changes will go through the rule/bylaw process.
<b>Committees Recommended to Continue</b>				
<b>Interagency Task Force on Ensuring Appropriate Care Settings for Persons with Disabilities / Promoting Independence Advisory Committee</b>  (Senate Bill 200	Many	Continue Operations	<b>Number in Support of Initial Analysis: 2</b> <b>Number in Opposition to Initial Analysis: 1</b>  <i>Summary of Comments in Support:</i> <ul style="list-style-type: none"> <li>• <b>Bob Kafka and ADAPT of Texas</b> recommends maintaining the CDW, but if the decision is made to combine, it should be a standing committee of the Promoting Independence Advisory Committee (PIAC).</li> <li>• <b>PACSTX</b> supports continuation of PIAC as is.</li> </ul>	Continue operations.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<i>abolishes this committee on 9/1/17)</i>			<p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>• <b>Texas Association for Home Care &amp; Hospice</b> suggests that the CDW become a subcommittee of PIAC. Both groups focus on community-based alternatives for people with disabilities, ensuring that the individual is involved with the direction of his or her services that will promote living in the most integrated setting as required by the Americans with Disabilities Act and upheld by Olmstead.</li> </ul>	
<p><b>Advisory Committee on Promoting Adoption of Minority Children</b></p> <p><i>(Senate Bill 206 removes this committee from statute)</i></p>	<p>Protective Services</p> <p>Children</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition of Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• Two commenters (<b>current members of the committee, including a retired Asst. Commissioner for CPS</b>) expressed strong support for the work of the committee.</li> </ul>	<p>Continue operations.</p> <p>Any changes will go through the rule/bylaw process.</p>
<p><b>Advisory Panel on Health Care-Associated Infections (HAI) and Preventable Adverse Events (PAE)</b></p> <p><i>(Senate Bill 277 removes this committee from statute)</i></p>	<p>Public Health</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 3</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• Three commenters, representing the <b>Children’s Hospital Association of Texas, Texas Medical Association/Texas Pediatric Society, and DSHS Emerging and Acute Infectious Disease Branch</b>, indicated support for continuation of the panel activities.</li> </ul>	<p>Continue operations.</p>
<p><b>Board for Evaluation of Interpreters</b></p>	<p>Regulatory</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition of Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter (<b>Sharon Hill</b>) expressed support for the continuation of the committee and acknowledged the value of the work the committee has done.</li> </ul>	<p>Continue operations.</p>
<p><b>Early Childhood Intervention Advisory Committee</b></p>	<p>Children</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>Children’s Hospital Association of Texas, Texas Medical Association/Texas Pediatric Society</b> in a joint statement, listed this</li> </ul>	<p>Continue operations.</p>



Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
			committee as one of several they support continuing.	
<b>Executive Waiver Committee</b>	Health Care Quality Initiatives	Continue Operations	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li><b>The Texas Medical Association and the Teaching Hospitals of Texas</b> support continued operations.</li> </ul>	<p>Continue operations.</p> <p>Any changes will go through the rule/bylaw process.</p>
<b>Governor's Emergency Medical Services (EMS) and Trauma Advisory Council</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>Two commenters, representing the <b>Children's Hospital Association of Texas and the Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</li> </ul>	Continue operations.
<b>Hospital Payment Advisory Committee</b>  (Senate Bill 200 removes this committee from statute)	Medicaid and Other Social Services Programs	Continue Operations	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li><b>Children's Hospital Association of Texas and Teaching Hospitals of Texas</b> support continued operations.</li> </ul>	<p>Continue operations.</p> <p>Any changes will be addressed through the rule/bylaw process.</p>
<b>IDD System Redesign Advisory Committee</b>  (Senate Bill 200 removes this committee from statute on the first anniversary of the date HHSC completes implementation)	Medicaid and Other Social Services Programs	Continue Operations	<p><b>Number in Support of Initial Analysis: 4</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li><b>The Arc of Texas, Providers Alliance for Community Services, and Debbie Gill, a committee member</b>, support continued operations.</li> <li><b>Texas Association of Health Plans</b> supports continued operations until after program implementation.</li> </ul> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li><b>Bob Kafka, ADAPT of Texas</b>, recommends that this committee be re-established as a subcommittee of the STAR+PLUS Quality Council.</li> </ul>	<p>Continue operations.</p> <p>Any changes will be addressed through the rule/bylaw process.</p>
<b>Interagency Obesity Council</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 1</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for</li> </ul>	<p>Continue operations.</p> <p>This council has a unique membership (Commissioners of the Texas Department of Agriculture, Texas Education Agency, and DSHS or their designees). There is</p>

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
			<p>continuation of the council activities.</p> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li>One commenter, <b>Shirley Bell</b>, suggested consolidating the functions of this committee with another advisory committee, but did not specify which one.</li> </ul>	<p>not another advisory committee that captures the input and guidance of executive leadership of these three agencies.</p> <p>Any changes will go through the rule/bylaw process.</p>
<b>Maternal Mortality and Morbidity Task Force</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</li> </ul>	<p>Continue operations.</p> <p>Any changes will go through the rule/bylaw process.</p>
<b>Medical Care Advisory Committee</b>	Medicaid and Other Social Services Programs	Continue Operations	<p><b>Number in Support of Initial Analysis: 4</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li><b>Dr. Gilbert Handal (current MCAC chair), Providers Alliance for Community Services, The Arc of Texas, and Texas Medical Association/Texas Pediatric Society</b> support continued operations.</li> </ul>	<p>Continue operations.</p> <p>Any changes will be addressed through the rule/bylaw process.</p>
<b>Newborn Screening Advisory Committee</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the committee activities.</li> </ul>	<p>Continue operations.</p>
<b>Public Health Funding and Policy Committee</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, the <b>chair of the committee who is the Director of Houston Health Department</b>, supports the recommendation to continue this committee, saying that it has made great progress, but requires additional effort to develop a statewide public health infrastructure in collaboration with DSHS and local public health officials.</li> </ul>	<p>Continue operations.</p>
<b>STAR Kids Advisory Committee</b>	Managed Care Under Medicaid	Continue Operations	<p><b>Number in Support of Initial Analysis: 5</b> <b>Number in Opposition to Initial Analysis: 0</b></p>	<p>Continue operations.</p>

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<i>(Senate Bill 200 removes this committee from statute on the first anniversary of the date HHSC completes implementation)</i>	and the Child Health Plan Program		<p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• <b>The Arc of Texas, Children’s Hospital Association of Texas, Texas Medical Association, and Helen Baker (CDS provider)</b> support continued operations.</li> <li>• <b>Texas Association of Health Plans</b> supports continued operations until after program implementation.</li> </ul>	Any changes will be addressed through the rule/bylaw process.
<b>State Child Fatality Review Committee</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing the <b>Children’s Hospital Association of Texas</b>, indicated support for continuation of the committee activities.</li> </ul>	Continue operations.  Any changes will go through the rule/bylaw process.
<b>State Independent Living Council</b>	Persons with Disabilities, Including Persons with Autism	Continue Operations	<p><b>Number in Support of Initial Analysis: 0</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>General Comment:</i></p> <ul style="list-style-type: none"> <li>• Only comment received from the <b>State Independent Living Council (SILC)</b> clarifying the role of the SILC in developing the Independent Living State Plan and disputing the definition of an advisory council. No comment was made in support or opposition of the analysis.</li> </ul>	Continue operations.
<b>Statewide Parent Collaboration Group</b>	Protective Services	Continue Operations	<p><b>No comments received specifically mentioning this committee.</b></p> <p><i>General Comment:</i></p> <ul style="list-style-type: none"> <li>• One commenter (<b>a social work professional</b>) expressed general concern about the proposed discontinuation of any committee that addressed child abuse, and felt that a venue for interested parties to give input in improving the child welfare system is needed.</li> </ul>	Continue operations.  Any changes will go through the rule/bylaw process.
<b>Stroke Committee (Subcommittee of the Governor’s EMS and Trauma Advisory Council)</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the committee activities.</li> </ul>	Continue operations.  Any changes will go through the rule/bylaw process.
<b>Texas Council on Alzheimer’s Disease</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p>	Continue operations.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<b>and Related Disorders</b>			<p><i>Summary of Comments in Support:</i> One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</p>	
<p><b>Texas Council on Autism and Pervasive Developmental Disorders</b></p> <p><i>(Senate Bill 200 removes this committee from statute on a date to be specified in the transition plan)</i></p>	<p>Persons with Disabilities, Including Persons with Autism</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 3</b> The Arc of Texas, Texas Medical Association/Texas Pediatric Society – joint statement, and Autism Society of Central Texas. <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter noted that there are not any dedicated spots for people with autism spectrum disorder and pervasive developmental disorders on this committee. Self-advocates need to be at the table to educate the committee, and they should have the right amount of supports available to them to meaningfully participate.</li> <li>• One commenter suggested that the unique needs of individuals with autism continue to receive attention and current best practices be promoted regardless of how we’ve done things in the past.</li> </ul>	<p>Continue operations.</p> <p>Any changes will go through the rule/bylaw process.</p>
<p><b>Texas Council on Cardiovascular Disease and Stroke</b></p>	<p>Public Health</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</li> </ul>	<p>Continue operations.</p>
<p><b>Texas Diabetes Council</b></p>	<p>Public Health</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</li> </ul>	<p>Continue operations.</p>
<p><b>Texas Family Violence Interagency Collaborative</b></p>	<p>Protective Services</p>	<p>Continue Operations</p>	<p><b>Number in Support of Initial Analysis: 1</b> <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>• One commenter (<b>a counselling professional</b>) expressed general concern about discontinuation of committees that address</li> </ul>	<p>Continue operations.</p> <p>This is an informal group that meets monthly to discuss family violence issues. Determined that this was not an advisory committee and should be removed from</p>

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
			domestic violence. No specific recommendation, but feels domestic violence continues to be an issue that would benefit from a committee's oversight.	the list.
<b>Texas HIV Medication Advisory Council</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the council activities.</li> </ul>	Continue operations.
<b>Texas School Health Advisory Committee</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing the <b>Texas Medical Association/Texas Pediatric Society</b>, indicated support for continuation of the committee activities.</li> <li>Another commenter, <b>a committee member</b>, commented that the committee is needed because it brings stakeholders together with knowledge and interest in children in the school system and produces white papers that are disseminated to School Health Committees in different school districts.</li> </ul>	Continue operations.
<b>Youth Camp Advisory Committee</b>	Public Health	Continue Operations	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>One commenter, representing <b>Highland Lakes Camp and Conference Center</b>, said the committee is working well except for members who do not have an understanding of Youth Camp defined by the Youth Camp Act.</li> </ul>	Continue operations.
<b>Aging &amp; Disability Resource Center State Advisory Committee</b>	Persons with Disabilities, Including Persons with Autism	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Aging Texas Well Advisory Committee</b>  <i>(Senate Bill 219 removes this committee from</i>	Aging	Continue Operations	<b>No Comments Received.</b>	Continue operations.  Any changes will go through the rule/bylaw process.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<i>statute)</i>				
<b>Committee for Advancing Residential Practices (CARP)</b>	Protective Services Children	Continue Operations	<b>No Comments Received.</b>	Continue operations. Any changes will go through the rule/bylaw process.
<b>Foster Grandparent Program Advisory Committee</b>	Children	Continue Operations	<b>No Comments Received.</b>	Continue operations. Any changes will go through the rule/bylaw process.
<b>Medical Advisory Board</b>	Other	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Nursing Facility Administrators Advisory Committee</b>	Regulatory	Continue Operations	<b>No Comments Received.</b>	Continue operations. Any changes will be addressed the through the rule/bylaw process.
<b>PARIS Workgroup</b>	Medicaid and Other Social Services Programs	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Preparedness Coordinating Council</b>	Public Health	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Promotor(a) or Community Health Worker Training and Certification Advisory Committee</b>	Public Health	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Public Private Partnership</b>	Protective Services Children	Continue Operations	<b>No Comments Received.</b>	Continue operations. Any changes will go through the rule/bylaw process.
<b>Residency Advisory Council</b>	Public Health	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>State Preventive Health Advisory Committee</b>	Public Health	Continue Operations	<b>No Comments Received.</b>	Continue operations.
<b>Statewide Advisory Coalition for Addressing Disproportionality and Disparities</b>	All Topics	Continue Operations	<b>No Comments Received.</b>	Continue operations.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
Statewide Health Coordinating Council	Public Health	Continue Operations	No Comments Received.	Continue operations.
Texas Center for Nursing Workforce Studies Advisory Committee	Public Health	Continue Operations	No Comments Received.	Continue operations.
Texas Radiation Advisory Board	Public Health	Continue Operations	No Comments Received.	Continue operations.
Texas Respite Council	Persons with Disabilities, Including Persons with Autism	Continue Operations	No Comments Received.	Continue operations.  Any changes will go through the rule/bylaw process.
Tobacco Settlement Permanent Trust Account Administration Advisory Committee	Other	Continue Operations	No Comments Received.	Continue operations.
Toxic Substances Coordinating Committee	Public Health	Continue Operations	No Comments Received.	Continue operations.
Youth Leadership Council	Protective Services  Children	Continue Operations	No Comments Received.	Continue operations.  Any changes will go through the rule/bylaw process.
<b>Committees Recommended to Continue for a Specified Time</b>				
Advisory Committee on Qualifications for Health Care Translators and Interpreters  (Senate Bill 200 removes this committee from statute)	Health Care Quality Initiatives	Continue Operations for One Year	<p><b>Number in Support of Initial Analysis: 56</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments In Support:</i></p> <ul style="list-style-type: none"> <li>• 48 respondents believe the Committee should continue and complete its work, especially related to the registry of qualified healthcare interpreters, in order to improve health outcomes.</li> <li>• Three respondents want the Committee to continue to improve access to healthcare for the hearing impaired, the large Spanish speaking population, and the large refugee population.</li> <li>• Two respondents stated a lack of interpreter qualifications in the healthcare system causes a financial impact. Competent language assistance improves patient outcomes.</li> <li>• One respondent stated the Committee is crucial for encouraging</li> </ul>	Continue operations for one year.  Committee feels they could accomplish their goals in the next year.

Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
			<p>interpreters to feel supported while working to raise standards of the field.</p> <ul style="list-style-type: none"> <li>Two respondents stated the deaf and hard of hearing community has access to state certified American Sign Language (ASL) interpreters. The spoken language interpreters need this in their field because there should be standards and requirements for medical interpreters.</li> </ul>	
<p><b>Behavioral Health Integration</b></p> <p><i>(Senate Bill 200 removes this committee from statute)</i></p>	Behavioral Health	Continue Operations for One Year	<p><b>Number in Support of Initial Analysis: 1</b>  <b>Number in Opposition to Initial Analysis: 2</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li><b>TMA</b> supports continued operations.</li> </ul> <p><i>Summary of Comments in Opposition:</i></p> <ul style="list-style-type: none"> <li><b>Texas Council of Community Centers</b> supports continued operations without the one year limitation stating that there is continued work to ensure that policies and practices align with the goal of integrated, quality, and cost efficient care.</li> <li>Another commenter (<b>Rose McCorkle</b>) questioned if it is prudent to discontinue or combine committees focused on mental health and substance use disorders as it may diminish focus.</li> </ul>	<p>Continue operations for one year.</p> <p>Reassessment at a later date could be considered if determined necessary.</p> <p>Any changes will be addressed through the rule/bylaw process.</p>
<p><b>Perinatal Advisory Council</b></p>	Public Health Prevention Efforts	Continue Operations until Date in Statute	<p><b>Number in Support of Initial Analysis: 2</b>  <b>Number in Opposition to Initial Analysis: 0</b></p> <p><i>Summary of Comments in Support:</i></p> <ul style="list-style-type: none"> <li>Two commenters support continuation (<b>Children's Hospital Association of Texas; and the Texas Medical Association/Texas Pediatric Society</b>)</li> </ul>	<p>Continue operations.</p> <p>Subject to Sunset Review 2025.</p> <p>Changes in scope and membership will be addressed through the rule/bylaw process.</p>
<p><b>Employment First Task Force</b></p>	Persons with Disabilities, Including Persons with Autism	Continue Operations until Date in Statute	<p><b>No Comments Received.</b></p>	<p>Continue operations until date in statute.</p> <p>Committee will expire on September 1, 2017.</p>
<b>Committees That Will Transfer out of HHS System</b>				
<p><b>Elected Committee of Managers – Business Enterprises of Texas (BET)</b></p>	Persons with Disabilities, Including Persons with Autism	Will transfer to Texas Workforce Commission on September 1, 2016.	<p><b>No Comments Received.</b></p>	<p>Continue operations until transfer.</p> <p>Committee will transfer to the Texas Workforce Commission on September 1, 2016.</p>



Committee	Area of Focus	Initial Analysis	Summary of Public Comments	Final Recommendation
<b>Rehabilitation Council of Texas</b>	Rehabilitation, Including for Persons with Brain Injuries	Will transfer to Texas Workforce Commission on September 1, 2016.	<b>No Comments Received.</b>	Continue operations until transfer.  Committee will transfer to the Texas Workforce Commission on September 1, 2016.
<b>Interagency Coordinating Group for Faith- and Community-based Initiatives</b>	Other	Transferring to a non-HHS agency	<b>No Comments Received.</b>	HHSC will no longer provide administrative support. Member agencies will assume this responsibility.
<b>Texas Nonprofit Council</b>	Other	Transfers to a non-HHS agency	<b>No Comments Received.</b>	HHSC will no longer provide administrative support. Member agencies will assume this responsibility. The Governor will make appointments instead of the Executive Commissioner.
<b>Dyslexia Licensing Advisory Committee</b>	Regulatory	Will be re-established at TDLR during the 2016-2017 biennium	<b>No Comments Received.</b>	Will be re-established at the Texas Department of Licensing and Regulation during fiscal year 2016.
<b>Registered Sanitarians Advisory Committee</b>	Regulatory	Will be re-established at TDLR during the 2018-2019 biennium	<b>No Comments Received.</b>	Will be re-established at the Texas Department of Licensing and Regulation during the 2018-2019 biennium.
<b>Texas State Perfusionists Advisory Committee</b>	Public Health	Will be re-established at TMB during FY 2016	<b>No Comments Received.</b>	Will be re-established at the Texas Medical Board during fiscal year 2016.

\*The Forensic Workgroup, created by the 84<sup>th</sup> Legislature, Regular Session, and recommended to be consolidated with the Allocation Advisory Committee, is not listed in this chart. The workgroup excluded all committees created last legislative session, as not enough time has passed to provide feedback on committee functions.