Health and Human Services System
Coordinated Strategic Plan for Fiscal Years 2023-2027

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Health and Human Services Commission

Department of State Health Services

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Introduction

Overview

The Texas Health and Human Services (HHS) system comprises over 42,000 full-time equivalent (FTE) positions under two agencies:

- The Health and Human Services Commission (HHSC)
- The Department of State Health Services (DSHS)

These agencies serve millions of people each month and affect the lives of all Texans, both directly and indirectly.

HHSC and DSHS collaborated to develop shared strategic goals and objectives for the 2023-2027 strategic planning cycle. More information about the work of each of these agencies is available on their websites and in their 2023-2027 Agency Strategic Plans:

- HHSC Agency Strategic Plan 2023-2027
- DSHS Agency Strategic Plan 2023-2027: Part 1 and Part 2

HHSC

HHSC is client-focused and delivers hundreds of services and supports to millions of Texans. It supports those who need assistance to buy necessities, eat nutritious foods, pay for healthcare costs, and offers an array of needed support for Texans by administering programs such as: Temporary Assistance for Needy Families (TANF); the Supplemental Nutrition Assistance Program (SNAP); the Special Supplemental Program for Women, Infants, and Children (WIC); Medicaid; the Children's Health Insurance Program (CHIP); community behavioral health services; family violence support for survivors; and services for older adults and people with disabilities.

The agency operates and oversees 13 state supported living centers, which provide direct services and supports to people with intellectual and developmental disabilities. HHSC also operates ten inpatient facilities including nine state hospitals, which serve people who need inpatient psychiatric care, and a residential treatment facility for youth in Waco. In 2022, the Dunn Center – a new hospital in Houston operated by UTHealth Houston – became part of the HHSC state hospital system. These 24 facilities operate all hours of the day, all days of the year.
HHSC also regulates childcare, acute care, and long-term care providers, and provides a multitude of additional mental health and substance use services, help for people with special healthcare needs, community supports and services for older Texans, disaster relief assistance, and resources to fight human trafficking.

Appropriations to HHSC are approximately $78.8 billion in All Funds for the 2022-23 biennium, which accounts for about one-third of the state budget. Approximately 91 percent of appropriations are for grants and client services, while 3.0 percent is for state-operated, facility-based services, 3.7 percent is for administrative services, and 2.3 percent is for other programs.¹ Administrative services and other programs include eligibility determination services, legal services, contract management, financial services, information technology, regulatory services, and oversight.

**DSHS**

DSHS promotes and protects the health of people and the communities where they live, learn, work, worship, and play.

To meet this goal, DSHS:

- Helps prevent the spread of communicable diseases;
- Promotes healthy living through disease and injury prevention;
- Analyzes and publishes public health data to promote the use of science and data to inform decision-making and best practices;
- Protects consumers by regulating food establishments and manufacturers, drugs and medical devices, and other consumer health goods and services;
- Responds to disasters, disease threats, and outbreaks;
- Works to improve the health of women, children and families, including children with special healthcare needs
- Delivers public health services to Texas regions, and works with local health departments to improve health outcomes;
- Conducts public health campaigns to keep Texans informed; and
- Maintains one of the largest public health laboratories in the nation.

DSHS strives to be the public- and population-health leader in Texas, the source of the most accurate public health science and data, and the catalyst to partner and

¹ Amounts do not include funds outside the agency’s bill pattern.
convene with others. To improve the health of all Texans, DSHS works with partners in public health to create a system that includes prevention, intervention, and mitigation. DSHS will continue to work to achieve these strategic goals as a state leader in public health.

Appropriations to DSHS for FY 2020 totaled $843.8 million, allocated as follows: 49.5 percent for laboratory infectious disease services, 20 percent for consumer protection, 13.6 percent for community health improvement, 9.8 percent for regional and local health operations, and 7.1 percent for administrative services.
HHS Vision, Mission, and Goals

**Vision:** Making a positive difference in the lives of the people we serve.

**Mission:** We serve Texas.

- **Goal 1:** Improve and support health outcomes and well-being for individuals and families.
- **Goal 2:** Ensure effective access to appropriate services.
- **Goal 3:** Protect the health and safety of vulnerable Texans.
- **Goal 4:** Continuously enhance efficiency and accountability.

The following section outlines these goals with their associated objectives and action items to achieve these objectives.
HHS System Goals and Action Plan

Below are HHS system’s four strategic goals, their objectives, and their action items, which are shared responsibilities between HHSC and DSHS. Dates are subject to change due to contingencies such as required federal approvals, procurement timelines, operational readiness, and other factors.

Goal 1. Improve and support health outcomes and well-being for individuals and families.

Objective 1.1. Enhance quality of direct care and value of services.

**Action Item 1.1.1. Managed Care Organization (MCO) Benchmarks.** Implement quality of care and cost efficiency benchmarks for MCOs participating in Medicaid and CHIP. (September 2022)

**Action Item 1.1.2. STAR+PLUS Pilot Program.** Implement a STAR+PLUS pilot program to test the delivery of fee-for-service long-term services and supports through the managed care model. (September 2023)

**Action Item 1.1.3. Medicaid for Breast and Cervical Cancer Treatment.** Improve survival rates for women diagnosed with breast or cervical cancer by reducing application processing times by approximately three days by digitizing the Medicaid for Breast and Cervical Cancer application form to start Medicaid treatment earlier. (January 2024)

**Action Item 1.1.4. Community Attendants.** Promote the community attendant role by expanding workforce development opportunities for attendant-like positions, including at the regional and local level. (December 2024)
Objective 1.2. Prevent illness and promote wellness through public- and population-health strategies.

**Action Item 1.2.1. Engaging Older Adults.** Assess and grow social engagement opportunities for older adults by expanding program options, such as the Know Your Neighbor campaign, by 10 percent. (January 2025)

**Action Item 1.2.2. Addressing Opioid Harm.** Reduce negative health outcomes for opioid use by increasing the number of successful opioid overdose reversals by 20 percent. (August 2025)

**Action Item 1.2.3. Mental Health First Aid Training.** Increase Mental Health First Aid training by 20 percent. (August 2025)

**Action Item 1.2.4. Child Immunization.** Increase the statewide child immunization coverage rate from 66 percent to 72 percent for the 4:3:1:3:1:4 vaccine series, which ensures coverage for seven key vaccines: diphtheria; tetanus; acellular pertussis; polio; measles, mumps, and rubella; Haemophilus influenzae type b; and pneumococcal conjugate. (August 2025)

**Action Item 1.2.5. Maternal Mortality and Morbidity Prevention.** Provide a biennial summary of maternal mortality and morbidity prevention resources, and track utilization of resources for the DSHS Hear Her Texas Campaign. (August 2027)

**Action Item 1.2.6. HIV Care.** Increase the percentage of persons diagnosed with HIV who received medical care within one month of diagnosis by 3 percent from a baseline of 76 percent within the Ryan White program. (August 2025)

Objective 1.3. Encourage self-sufficiency and long-term independence.

**Action Item 1.3.1. Family Violence Survivor Support.** Increase the number of family violence survivors served from 15,398 to 17,500. (August 2023)
Goal 2. Ensure efficient access to appropriate services.

Objective 2.1. Empower Texans to identify and apply for services.

**Action Item 2.1.1. Community Partner Program.** Expand the current Community Partner Program from 187 counties to all 254 counties to ensure the program benefits Texans statewide. (September 2022)

**Action Item 2.1.2. Women, Infants, and Children (WIC) Program.** Increase the participation in the WIC program by 5 percent, or 34,000 clients, to improve health outcomes for both mothers and young children. (August 2027)

Objective 2.2. Provide seamless access to services for which clients are eligible.

**Action Item 2.2.1. Extended Postpartum Coverage.** Extend postpartum coverage period to six months for Medicaid for Pregnant Women to further reduce adverse postpartum health outcomes. (November 2022)

**Action Item 2.2.2. Healthy Texas Women.** Transition Healthy Texas Women from fee-for-service to managed care to enhance continuity of care and increase access to preventive health care and breast and cervical cancer services. (November 2024)

**Action Item 2.2.3. State Hospital System Capacity.** Increase the number of available beds by 40 percent in the state hospital system through construction and staffing of additional capacity. (August 2027)
Objective 2.3. Ensure people receive services and supports in the most appropriate, least restrictive settings, considering individual needs and preferences.

Action Item 2.3.1. State Supported Living Center Quality. Demonstrate improved quality of care provided to the approximately 2,600 residents of the state supported living centers. (August 2027)

Action Item 2.3.2. Individualized Skills and Socialization. Launch a new Individualized Skills and Socialization service to replace day habilitation to increase community access, increase supports to achieve competitive, integrated employment, and provide greater choice and control over service delivery and personal resources. (March 2023)

Action Item 2.3.3. Child Advocacy Centers of Texas. Increase access to behavioral health services for children served by Child Advocacy Centers of Texas by 10 percent, or an additional 2,360, for a total of 25,969 children served. (August 2023)

Action Item 2.3.4. Early Intervention Services. Improve the quality of care for children with disabilities and developmental delays by increasing the retention rate of personnel who deliver early intervention services by five percent. (August 2027)

Objective 2.4. Strengthen consumers’ access to information, education, and support.

Action Item 2.4.1. 2-1-1 Texas. Redesign the 2-1-1 Texas interactive voice response to enrich customer service and increase by 10 percent the number of customers who receive the information they want without being transferred to a customer call center agent. (January 2023)

Action Item 2.4.2. Servicemember Support. Implement universal screening for servicemember status to allow for aggregate reporting and planning to improve person-centered referrals and servicemember outcomes. (August 2025)
Action Item 2.4.3. Standardized Data Release Process. Improve data access for Local Health Entities (LHE) and Authorities by implementing a standardized data release process through the State Health Analytics and Reporting Platform. (September 2025)

Action Item 2.4.4. Public Health Data Visualization. Strengthen the public’s access to data by expanding DSHS data visualization capabilities and leveraging the Texas Health Data website. (September 2025)

Goal 3. Protect the health and safety of vulnerable Texans.

Objective 3.1. Optimize preparation for and response to disasters, disease threats, and outbreaks.

Action Item 3.1.1. Emergency Broadcasting to Regulated Entities. Implement an emergency broadcast system across the Regulatory Services Division (RSD) to allow program areas to send emergency notifications, request feedback from providers, and provide reporting capability. (August 2027)

Objective 3.2. Prevent and reduce harm through improved education, monitoring, inspection, and investigation.

Action Item 3.2.1. Focus on High-Risk Facilities. Enhance the focus on high-risk facilities when planning and conducting on-site audits, inspections, investigations, and reviews. (January 2024)

Action Item 3.2.2. Harm Reduction in Regulated Facilities. Reduce the number of recurring serious violations in nursing facilities, acute care facilities, and childcare operations by 5 percent through consistent and efficient processes for licensing, surveying, and enforcement. (August 2026)
Action Item 3.2.3. Safe Child Day Care Capacity. Increase capacity in child day care operations by 5 percent through community engagement activities aimed at identifying individuals who need to be regulated as well as individuals who want to provide childcare, which will strengthen health and safety protections for children in out-of-home care. (August 2026)


Objective 4.1. Promote and protect the financial and programmatic integrity of HHS.

Action Item 4.1.1. Focus on High-Risk Contracts. Establish a complex-contracts audit team to identify and audit vendors of high-risk contracts to determine whether vendors complied with key financial and programmatic contract provisions. (March 2024)

Action Item 4.1.2. Cybersecurity. Defend against cybersecurity threats to protect agency assets and citizens’ confidential data. (August 2027)

Action Item 4.1.3. SNAP Fraud Framework Grant. Increase detection of potentially fraudulent SNAP claims by 10 percent. (December 2024)

Action Item 4.1.4. Group Purchasing Organizations. Adopt administrative rules to expand the agency's use of group purchasing organizations to realize improved efficiencies in procurement operations, faster lead times, and overall cost savings to the agency and the State. (September 2023)

Objective 4.2. Strengthen, sustain, and support a high-functioning, efficient workforce.

Action Item 4.2.1. State Facilities Staffing. Improve services to clients of state facilities by strengthening staffing through improved recruitment, hiring processes, and training. (August 2025)
Action Item 4.2.2. Critical Position Staffing. Conduct an agency-wide market salary data analysis and increase salaries of certain HHS employees in critical, hard-to-fill positions with high turnover and vacancy rates. (December 2022)

Objective 4.3. Continuously improve business strategies with optimized technology and a culture of data-driven decision-making.

Action Item 4.3.1. Identifying Trends and Outliers. Apply advanced data analysis techniques to quickly identify trends and outliers for audits, inspections, investigations, and reviews. (September 2023)

Action Item 4.3.2. Improved Contract Management. Implement or enhance the functionality of information technology systems to improve efficiencies in processing requisitions and managing, monitoring, and reporting contracts for the agency. (August 2025)

Action Item 4.3.3. Medicaid Enterprise System. Modernize the Texas Medicaid Enterprise System, a highly complex network of interconnected systems that support Texas’ Medicaid delivery system, to increase efficiencies and better support the managed care model. (September 2023)

Action Item 4.3.4. Data Quality and Maturity. Enhance the value of data by establishing policies to document data management/data stewardship roles and responsibilities required to enable clean, consistent data across HHSC sources and systems. (September 2023)

Action Item 4.3.5. Self-Service Data Quality. Provide technology, tools, and automation for curated or self-service data analytics and reporting, in coordination with the Data Governance & Performance Management council. (December 2024)
Coordinated Strategic Plan for Health and Human Services

HHS developed this Coordinated Strategic Plan in compliance with Section 531.022 of the Texas Government Code. On January 31, 2022, HHS held a meeting and received public comment on its strategic planning goals and objectives. HHSC and DSHS identified specific actions for achieving these goals and objectives in their individual Agency Strategic Plans.

This Coordinated Strategic Plan outlines HHS’ efforts to address the nine specific goals included in statute. Listed below each statutory goal are the specific strategic goals, objectives, and action items HHS is focusing on for the next five years. A comprehensive table is included in Appendix 1: Alignment between HHSC Action Items and Statutory Goals. Additional initiatives and activities that support each goal are also included in the section below.

**Goal 1. The development of a comprehensive statewide approach to the planning of health and human services.**

**HHS Action Items:**

The action items below support the development of a comprehensive statewide approach to the planning of health and human services and are included in either the HHSC or DSHS Strategic Plans.

1.1.4. Community Attendants.
1.2.1. Engaging Older Adults.
1.2.2. Addressing Opioid Harm.
1.2.3. Mental Health First Aid Training.
1.2.4. Child Immunizations.
1.2.6. HIV Care.

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2 Tex. Gov’t Code § 531.022(d)(4).
3 Tex. Gov’t Code § 531.022(c)(1-9).
2.1.1. Community Partner Program.
2.2.3. State Hospital System Capacity.
2.3.4. Early Intervention Services.
2.4.2. Servicemember Support.
2.4.3. Standardized Data Release Process.
3.2.3. Safe Child Day Care Capacity.
4.3.4. Data Quality and Maturity.

**Additional Initiatives:**

The initiatives below also support the development of a comprehensive statewide approach to the planning of health and human services.

**Aging Texas Well Plan**

The Aging Texas Well Plan is the state's Master Plan for Aging. It provides strategic guidance on issues impacting older adults, informal and family caregivers, and the aging services provider networks. HHS submits this plan biennially to the Governor and Legislature. It includes assessment and stakeholder feedback on aging-related needs and services and provides HHSC with a lens to view the continuum of needs for older Texans and their caregivers.

**Promoting Independence Plan (PIP)**

PIP is Texas’ statutory response to the landmark supreme court decision known as Olmstead (1999). Over two decades later, Texas has made significant strides to integrate initial response activities into agency-wide policies and programs that sustain this work. The 2022 PIP evolves these concepts even further by developing a more comprehensive, cross-disability approach that continues to demonstrate HHS’ innovation and commitment for community living and community inclusion to ensure people with disabilities can live their fullest lives. This statewide approach to maintaining and improving upon HHS’ ability to deliver cross-disability tools and strategies that address the complex needs of citizens with disabilities continues to evolve as needs evolve.

**Identifying Servicemember Population Services**

HHS continues to identify programs and systems providing services to servicemembers. By tracking service provision to servicemembers, HHS can better
connect them to HHS programs, promote teamwork amongst agencies serving the servicemember population, and assist programs in tailoring services to support this population. By understanding how statewide programs intersect with servicemembers, HHS can better meet complex servicemember needs into the future.

**Consumer Education and Information**

DSHS is strengthening consumers’ access to education and information by equipping Public Health Regions (PHR) with communication resources, training, and support to expand the region’s health communication capabilities. DSHS Communications is continuously improving the health communications of DSHS staff, PHR, and local health departments by providing a multi-faceted communication strategy with resources, training, and support.

**Communications Improvements**

DSHS is improving health information initiatives and consumer-centered content by developing communications, trainings, guidance, and materials for DSHS staff and LHE. DSHS Communications ensures effective and informative health communications to the public by developing targeted consumer-centered communications that are evidence-based.

**Data Governance and Performance Measurement (DGPM)**

HHSC’s Data, Analytics, and Performance division’s (DAP) DGPM process engages executive leadership from HHSC and DSHS in guiding, aligning, and prioritizing HHS strategy related to data analytics and performance to enhance HHS’ capacity for data-driven decision-making. DAP is leading a DGPM workgroup comprised of cross-agency staff charged with promoting collaboration and process improvement in the ways that DSHS and HHSC share data.

**Process Modernization**

HHSC’s RSD is modernizing processes using technology and data across regulatory programs to improve statewide quality, consistency, efficiency, and accountability.
Goal 2. The creation of a continuum of care for families and individuals in need of health and human services.

HHS Action Items:

The action items below support the creation of a continuum of care for families and individuals in need of health and human services and are included in either the HHSC or DSHS Strategic Plans.

1.1.3. Medicaid for Breast and Cervical Cancer Treatment.
1.1.4. Community Attendants.
1.2.1. Engaging Older Adults.
1.2.2. Addressing Opioid Harm.
1.2.3. Mental Health First Aid Training.
1.2.5. Maternal Mortality and Morbidity.
1.3.1. Family Violence Survivor Support.
2.1.1. Community Partner Program.
2.1.2. WIC Program.
2.2.1. Extended Postpartum Coverage.
2.2.3. State Hospital System Capacity.
2.3.1. State Supported Living Center Quality.
2.3.2. Individualized Skills and Socialization.
2.3.3. Child Advocacy Centers of Texas.
2.3.4. Early Intervention Services.
2.4.1. 2-1-1 Texas.
2.4.2. Servicemember Support.
4.1.3. SNAP Fraud Framework Grant.
4.2.1. State Facilities Staffing.
4.3.4. Data Quality and Maturity.
Additional Initiatives:
The initiatives below also support the creation of a continuum of care for families and individuals in need of health and human services.

**Comprehensive Health Homes for Integrated Care (CHIC) Kids Pilot Program Evaluation**

HHSC’s DAP Program Evaluation Team is evaluating the CHIC Kids Pilot Program, as required by Senate Bill (SB) 1648 (87R). The CHIC Kids Pilot Program is testing enhanced care coordination provided through health homes designed specifically to support children with medically complex conditions and their families.

**Family Violence Program Behavioral Health Services**

Feedback from HHSC’s Family Violence Program providers and stakeholders illustrates that increasing access to behavioral health services for survivors is a priority post-pandemic. Survivors and their children have experienced increased complex trauma which requires more intensive counseling and therapy services. Tracking this subset of services helps the Family Violence Program identify service gaps and ensure survivors have adequate access to behavioral health services through an improved continuum of care to address needs that can change over time due to evolving life circumstances.

**Adult Safety Net (ASN) Program Immunizations**

DSHS is improving adult immunizations by increasing total doses ordered and administered in the [ASN](http://www.dshs.texas.gov) program which supplies publicly purchased vaccine at no cost to enrolled providers. Infected adults risk spreading vaccine preventable diseases to infants and can also become severely ill themselves. The solution is to increase vaccination uptake of the Texas adult population to prevent infection. The ASN program continuously strives to improve the effectiveness of the program through supporting providers to increase doses administered to their eligible patients.

**Smiles for Moms and Babies**

The Smiles for Moms and Babies initiative in the DSHS Maternal and Child Health (MCH) section promotes maternal and child health by providing information on the
importance of oral care before, during, and after pregnancy. This information is on the DSHS Smiles for Moms and Babies webpages.

The goal is to reduce the prevalence of oral disease in pregnant women and infants. This can in turn reduce the prevalence of early childhood caries. There is webpage content aimed at many levels of the health care spectrum. These include pregnant women, frontline health workers, and dental and prenatal providers. MCH Smiles for Moms and Babies expects to provide oral health information to at least 500 visitors annually by promoting its website.

**Elevated Blood Lead Level Referrals and Care**

DSHS provides guidance regarding referral and follow-up care to over 95 percent of all eligible children annually who show elevated blood lead levels. The Texas Childhood Lead Poisoning Prevention Program (CLPPP) in the DSHS Environmental Epidemiology and Disease Registry section (EEDRS) maintains a surveillance system of blood lead results on children younger than 15 years of age. Elevated blood lead levels in children can damage the brain and nervous system resulting in serious health effects and slow growth. In 2019, testing occurred in 336,395 children ages 0 through 14 in Texas. Of the children tested, 4,761 children (1.38 percent) had an elevated blood lead level greater than or equal to 5µg/dL. CLPPP provides essential referral and guidance for follow up services for children with elevated blood lead levels.

**Performance Management and Analytics System (PMAS)**

Through the PMAS program, HHSC’s DAP and Information Technology (IT) are exploring the ability to link client data across programs as a foundation for an integrated analytics system. Building this system with quality, permission-controlled, data will provide HHS a fuller picture of clients’ health needs and experience.

**Non-Traditional Day Care**

HHSC’s RSD is participating in a workgroup with Texas Workforce Commission and Early Childhood Education RISE Consultancy to assess the Conceptualizing and Measuring Access to Early Care and Education research project focusing on implementing non-traditional operation hours for day care facilities.
Public Health Wellness Evaluation

DSHS provides clinical and social services in the Texas PHRs to families and individuals. DSHS serves over 31,000 patients in the 86 DSHS public health regional clinics annually. DSHS is developing a public health wellness evaluation tool for use by DSHS staff and community partners for individuals receiving clinical or social services to obtain a comprehensive evaluation ensuring that their health needs are met appropriately. DSHS will train all DSHS regional clinical and social service staff on the use of the tool and offer all active DSHS regional clinical and social service clients the voluntary public health wellness evaluation at intake, as appropriate.

Multi-Goal Initiatives

The activities listed below are described in more detail earlier in this document. Click on the heading to be directed to where this information resides in the plan.

Aging Texas Well Plan

Goal 3. The integration of health and human services to provide for the efficient and timely delivery of those services.

HHS Action Items:

The action items below support the integration of health and human services to provide for the efficient and timely delivery of those services and are included in either the HHSC or DSHS Strategic Plans.

1.1.1. MCO Benchmarks.
1.1.2. STAR+PLUS Pilot Program.
1.1.3. Medicaid for Breast and Cervical Cancer Treatment.
1.2.2. Addressing Opioid Harm.
1.2.3. Mental Health First Aid Training.
1.2.6. HIV Care.
2.2.1. Extended Postpartum Coverage.
2.2.2. Healthy Texas Women.
Additional Initiatives:

The initiatives below also support the integration of health and human services to provide for the efficient and timely delivery of those services.

No Wrong Door (NWD) Networks

Responding to stakeholders’ feedback on challenges accessing services, HHS is evaluating NWD networks to increase staff awareness, navigation, and referral competency. The NWD networks help Texans seeking services get to the right place quickly and easily. HHS is using listening sessions to engage the community and provide opportunities to identify system needs, trends, and gaps for the efficient and effective delivery of those services.

Public Health Service Inventory

DSHS is embarking on a multi-year project developing and maintaining a web-based inventory of public health service providers to ensure that all DSHS staff and partners can provide referrals to available public health services. DSHS will develop and deploy training modules and presentations on the use of the public health services inventory.

Public Health Emergency (PHE) Unwind Measures

Medicaid, SNAP, and TANF recipient benefits were extended due to the COVID-19 PHE. When the continuous Medicaid coverage ends, HHSC will need to redetermine Medicaid eligibility for more than 5 million members. In coordination with IT, PMAS
teams are working with Access and Eligibility Services to connect multiple data sources and develop dashboards to visualize performance measures around timeliness, workload, and staffing. These measures will enable HHSC to proactively address trends and anomalies.

**Inspector Advisory Workgroup**

HHSC’s RSD is forming a statewide inspector advisory workgroup to identify strategies to ensure quality and sufficiency in documenting investigations.

**Multi-Goal Initiatives**

The activities listed below are described in more detail earlier in this document. Click on the heading to be directed to where this information resides in the plan.

**Performance Management and Analytics System**

**Goal 4. The maximization of existing resources through effective funds management and the sharing of administrative functions.**

**HHS Action Items:**

The action items below support the maximization of existing resources through effective funds management and the sharing of administrative functions and are included in either the HHSC or DSHS Strategic Plans.

1.2.1. Engaging Older Adults.
1.2.3. Mental Health First Aid Training.
1.3.1. Family Violence Survivor Support.
2.1.1. Community Partner Program.
2.1.2. WIC Program.
2.2.3. State Hospital System Capacity.
2.3.1. State Supported Living Center Quality.
2.3.3. Child Advocacy Centers of Texas.
2.3.4. Early Intervention Services.
2.4.1. 2-1-1 Texas.
2.4.2. Servicemember Support.
2.4.4. Public Health Data Visualizations.
4.1.3. SNAP Fraud Framework Grant.
4.1.4. Group Purchasing Organizations.
4.2.1. State Facilities Staffing.
4.3.2. Improved Contract Management.
4.3.4. Data Quality and Maturity.

**Additional Initiatives:**

The initiatives below also support the maximization of existing resources through effective funds management and the sharing of administrative functions.

**Prevention of Fraud, Waste, and Abuse**

The HHSC Office of Inspector General (OIG) is focusing on the identification and prevention of fraud, waste and abuse through fair, timely and quality audits, investigations, inspections, and reviews. OIG continually seeks opportunities to amplify program integrity activities and incorporate best practices while reducing duplication, boosting effectiveness, and increasing efficiency.

**Continuous Improvement**

The HHSC’s Office of Transformation and Innovation (OTI) serves as a hub for continuous improvement and focuses on increasing efficiency, optimizing processes, and supporting sustainable improvements through its process improvement and change management initiatives, trainings, and ongoing transformation efforts. Through new and ongoing process improvement efforts, HHSC is continuing to improve and reform its procurement and contracting processes, improve and streamline administrative service delivery, identify opportunities to better manage state resources, and maximize resources across HHS.

**Data Management and Transparency**

HHSC’s RSD is using existing technological resources, such as Microsoft software products, for better data management and analysis. This allows staff to create, access, edit, and share data, which creates efficiency and transparency, as well as ensures the continuity of business activities.
Service Coordination

HHSC’s Office of Aging Services Coordination, Office of Veteran Services Coordination, and Office of Disability Services Coordination share limited resources and funds. Through data collection efforts and stakeholder feedback, these offices collaborate to improve service delivery to populations with co-occurring mental, developmental, and physical health needs.

Goal 5. The effective use of management information systems to continually improve service delivery.

HHS Action Items:

The action items below support the effective use of management information systems to continually improve service delivery and are included in either the HHSC or DSHS Strategic Plans.

1.1.1. MCO Benchmarks.
1.1.3. Medicaid for Breast and Cervical Cancer Treatment.
2.4.1. 2-1-1 Texas.
2.4.3. Standardized Data Release Process.
2.4.4. Public Health Data Visualizations.
3.1.1. Emergency Broadcasting to Regulated Entities.
4.1.3. SNAP Fraud Framework Grant.
4.3.1. Identifying Trends and Outliers.
4.3.3. Medicaid Enterprise System.
4.3.4. Data Quality and Maturity.
4.3.5. Self-Service Data Quality.

Additional Initiatives:

The initiatives below also support the effective use of management information systems to continually improve service delivery.
Improving Medicaid Network Adequacy Measures

The goal of the Medicaid Provider Network Adequacy PMAS Project is to integrate multiple siloed data sources used to calculate provider network adequacy measures to monitor MCO contract compliance. Better integrating data allows for insights into network adequacy and provides a holistic picture of client access to care. Combining these internal data sources with public data helps inform leadership decisions to improve access to care.

Medicaid and CHIP Data Analytics (MCDA) Service Utilization Dashboards

HHS maintains a comprehensive service utilization dashboard to display data broken out by programs, MCOs, service delivery areas, and client demographics to monitor trends and anomalies in the Medicaid program. Key measures, including amounts paid and utilization rates, are allowing staff to parse out potential drivers of changes in the data, and address them.

Legal Case Management and Electronic Discovery Software

HHSC’s Office of Chief Counsel (OCC) and IT are collaborating on an in-house case management software (Gavel) to track legal matters and case updates, share information across OCC, and provide the HHS system better insight into OCC’s work. This is the first software being developed as part of IT’s business enablement platform (BEP) project. Additionally, OCC is working with IT to procure a modern electronic discovery software platform used in litigation and open records matters. These software solutions enable OCC to improve its delivery of services to its HHS clients and stakeholders.

Product Lifecycle Plan

DSHS is developing a product lifecycle plan for each information technology system to determine needs for updates, replacements, or integration of existing systems. The DSHS Program Operations (PO) Division in collaboration with HHS IT will utilize a product lifecycle plan for each DSHS IT system that will assist in determining the technological needs for the agency and partners. Identification of needs for system upgrades, replacements, or integrations will allow the continuous enhancement of agency systems used by partners and customers to meet stakeholder needs.
**Business Capabilities Model Evaluation**

DSHS continuously improves business strategies by developing and evaluating a Business Capabilities Model that identifies opportunities to achieve business outcomes using modern technology for division and programmatic functions. The DSHS PO Division supports the agency’s programmatic areas with business planning, fiscal monitoring, facility assistance, contract management, and information technology capabilities. PO Division is responsible for coordinating with HHSC IT to identify business capabilities and optimize DSHS technology to achieve improved business outcomes for each agency division. The business capabilities model will enable the agency to evaluate and identify opportunities of business improvement using modern technology.

**Goal 6. The provision of systemwide accountability through effective monitoring mechanisms.**

**HHS Action Items:**

The action items below support the provision of systemwide accountability through effective monitoring mechanisms and are included in either the HHSC or DSHS Strategic Plans.

- 3.2.1. Focus on High-Risk Facilities.
- 3.2.2. Harm Reduction in Regulated Facilities.
- 3.2.3. Safe Child Day Care Capacity.
- 4.1.1. Focus on High-Risk Contracts.
- 4.1.2. Cybersecurity.
- 4.1.3. SNAP Fraud Framework Grant.
- 4.3.1. Identifying Trends and Outliers.
- 4.3.2. Improved Contract Management.
- 4.3.4. Data Quality and Maturity.
Additional Initiatives:

The initiatives below also support the provision of systemwide accountability through effective monitoring mechanisms.

Monitoring Activities

HHSC’s Compliance and Quality Control (CQC) Fiscal Monitoring Unit (FMU) and Single Audit Unit (SAU) conduct monitoring activities to ensure systemwide accountability. FMU conducts fiscal monitoring reviews of HHS grantees that are cost reimbursement recipients and subrecipients in support of certain services within the Chief Program and Services Office (CPSO) division, including completion of an annual fiscal risk assessment and development of an annual monitoring plan. FMU refers suspected fraud, waste, or abuse to the OIG.

SAU monitors HHS recipients of state funds for compliance with the Texas Grant Management Standards (TGMS) and subrecipients of federal funds for compliance with the federal Uniform Grant Guidance, 2 CFR 200. SAU conducts desk reviews of single audit reporting packages and financial statements and coordinates with program staff when additional follow-up with recipients or subrecipients is required.

MCDA MCO Compliance Dashboards

HHSC’s MCDA’s compliance dashboards enhance contract oversight by trending MCOs’ compliance with standards required by MCO contracts, such as claims adjudication timeliness and hotline call pick-up rate standards. The compliance dashboards facilitate data-driven decisions concerning the need for corrective actions, including the issuance of liquidated damages.

Predictive Analytics

HHSC’s RSD is working to improve its process for deterring future noncompliance using past noncompliance indicators to warn providers of enhanced enforcement sanctions in the wake of repeat violations. Using predictive analytics enables RSD to improve monitoring, enforcement, and protect Texans.

Performance Measure Reporting

DSHS strives to meet all reporting deadlines for performance measures which address the value and quality of public health services provided to Texans. The DSHS Chief Financial Officer (CFO) Division publishes monthly financial reports including expenditure data on the DSHS website to provide access and
transparency to Texans. The DSHS CFO Division collaborates with DSHS public health programs to quantify, report, and measure performance to analyze the execution of public health projects and initiatives for Texans. DSHS ensures effective public health efforts by measuring success through performance measures of agency programs and operations.

**Goal 7. The promotion of teamwork among the health and human services agencies and the provision of incentives for creativity.**

**HHS Action Items:**

The action items below support the promotion of teamwork among the health and human services agencies and the provision of incentives for creativity and are included in either the HHSC or DSHS Strategic Plans.

- 1.2.1. Engaging Older Adults.
- 2.3.1. State Supported Living Center Quality.
- 2.4.3. Standardized Data Release Process.
- 4.2.2. Critical Position Staffing.

**Additional Initiatives:**

The initiatives below also support the promotion of teamwork among the health and human services agencies and the provision of incentives for creativity.

**Increased Collaboration**

OIG works to increase collaboration on fraud, waste and abuse trends and program vulnerabilities, and makes recommendations to the broader HHS team for programmatic enhancements and efficiencies. OIG promotes a high-performing workforce committed to excellence, collaboration, and increasing organizational effectiveness to deliver high-quality outcomes.

**Medicaid Managed Care Procurement Project**

The goal of the Medicaid Managed Care Procurement Project is the efficient development of solicitation packages that clearly identify required services and define an evaluation process that leads to the selection of qualified vendors to
provide best value for the beneficiaries of Texas’ four STAR programs (STAR Health, STAR+PLUS, STAR, and STAR Kids.) This project is a cross-divisional initiative that uses an innovative and unique collaborative process to bring all stakeholders to the table during development across a portfolio of STAR procurements. This effort allows HHSC to leverage and incorporate best practices and lessons learned in real time as each solicitation package moves through the process. HHSC seeks to apply the best practices and lessons learned to other HHS complex procurements and use the collaborative work group process on other high-risk procurements.

**Continuous Improvement Idea Portal**

The Continuous Improvement Idea Portal, created and managed by OTI, provides HHS employees an easy way to suggest ways to improve work processes or save money throughout HHS using a short online form. OTI evaluates these submissions based on process improvement, cost savings, and error-reduction criteria. OTI considers ideas with sufficient potential impact for improvement projects. In addition to the Continuous Improvement Idea Portal, HHSC business areas promote initiatives designed to identify cost savings opportunities.

**Research Studies and Evaluations**

HHSC’s DAP and DSHS collaborate on studies and data initiatives related to the health of HHS populations, such as the COVID-19 Vulnerable Populations Study and the Maternal Mortality and Morbidity Review Committee. These initiatives lead to improved understanding of which factors have the greatest effect on particular HHS populations and how best to improve health outcomes for these populations.

**Rebuilding Child Care Capacity**

In response to closures resulting from the COVID-19 pandemic, HHSC’s RSD is coordinating with other state agencies and stakeholders to assess and rebuild capacity in regulated Child Care Operations to help expand the availability of safe childcare for working parents.

**Workforce Planning & Strategy Taskforce (WPST) Oversight Committee**

The HHSC’s WPST Oversight Committee provides and supports HHSC workforce directives, strategies, and priorities. WPST provides agency-wide strategic planning and guidance for FTE management, workforce development, and other workforce-related issues. The committee consists of HHSC executive staff, including deputy
executive commissioners and their equivalents, and provides oversight of projects and implementation efforts, establishes implementation workgroups, and makes recommendations.

**Cross Division Coordination Group (CDCG)**

The CDCG collaborates to improve operations and enhance coordination across DFPS, DSHS, OIG, and HHSC. CDCG members have a broad understanding of the HHS System and shared organizational interests. The primary purpose of the CDCG is to identify and monitor cross-functional efforts involving different administrative components within the HHS system and establish cross-functional teams to improve the coordination of services provided through the system.

**Coordination in Aging Care**

DSHS and HHSC’s Office of Aging Services Coordination (OASC) engage collaboratively, and with shared and agency-specific goals, to ensure programs are designed to meet multiple needs without duplication and with improved outcomes. Examples of these efforts include:

- aging priorities for the [Aging Texas Well Plan](#);
- Building Resilient, Inclusive Communities Initiative’s issue brief on social isolation’s impacts on older adults’ health; and
- inclusion of an aging indicator in the DSHS Texas Healthy Communities assessment (DSHS Community Health Improvement Division).

**Employee Upward Mobility**

DSHS increases employee awareness and perception of advancement opportunities to promote job satisfaction and professional development. DSHS’ Business Support and Planning (BSP), under the PO Division, informs, prepares, and trains managers on management best practices and tools necessary to support their success. BSP is improving employee’s awareness of career advancement opportunities within DSHS to empower employees and ensure fulfillment of DSHS’ core functions. BSP disseminates best practices for succession planning to provide management the ability to continue vital functions while supplying employees with career opportunities.
State Agency Coordinating Committee (SACC)

HHSC actively participates in the SACC alongside other Texas state agencies. SACC’s purpose is to examine administrative and management practices, opportunities for improvement, potential risk areas, and other issues. SACC members share information regarding best practices, technology solutions, and other ideas considered beneficial and cost-effective for state agencies and stakeholders. SACC has nine subcommittees on topics including finance; human resources; information technology; internal audit; legal affairs; purchasing; quality, process improvement and innovation; records management; and training and development.

Multi-Goal Initiatives

The activities listed below are described in more detail earlier in this document. Click on the heading to be directed to where this information resides in the plan.

- Data Governance and Performance Measurement
- Identifying Servicemember Population Services

Goal 8. The fostering of innovation at the local level.

HHS Action Items:

The action items below support the fostering of innovation at the local level and are included in either the HHSC or DSHS Strategic Plans.

1.1.4. Community Attendants.
1.2.1. Engaging Older Adults.
1.2.2. Addressing Opioid Harm.
1.2.3. Mental Health First Aid Training.
2.1.1. Community Partner Program.
2.4.2. Servicemember Support
Additional Initiatives:

The initiatives below also support the goal of fostering of innovation at the local level.

Data Sharing

HHSC’s DAP Data Dissemination and Reporting team and contract management functions in Business Operations facilitate the provision of data to universities and other entities conducting studies deemed to be of value or have the potential for innovation by HHSC program data owners.

Innovators in Aging Award

HHSC’s OASC administers the Innovators in Aging Award to annually recognize efforts that improve and enhance the quality of life for older Texans. HHSC hopes that by highlighting innovators throughout the state others will be inspired to seek out new and creative ways to serve older adults.

Servicemember Continuum of Care

HHSC encourages adoption of memorandums of agreement between community providers and local Department of Veteran Affairs clinics and hospitals to promote continuum of care for servicemembers in the community. Additionally, HHSC facilitates connections and provides technical assistance to aid the adoption of local agreements. This work promotes current and future efforts to empower communities to close gaps in services in collaboration with HHSC and its state and federal partners.

Coordination with Local Health Entities

DSHS is improving coordination with LHEs by increasing opportunities for collaboration. The DSHS Regional and Local Health Operations (RLHO) Division provides essential public health services, support to local public health agencies, and coordination for emergency preparedness and response. RLHO coordinates and cooperates daily among eight DSHS PHRs, 165 LHEs, and 203 Texas Health Authorities. RLHO supports and coordinates with LHE across Texas to directly serve communities, families, and individuals. RLHO is improving collaboration with LHEs by using subject matter experts throughout the agency and sharing best practices for public health services.
Multi-Goal Initiatives

The activities listed below are described in more detail earlier in this document. Click on the heading to be directed to where this information resides in the plan.

CHIC Kids Pilot Program Evaluation

Goal 9. The encouragement of full participation of fathers on programs and services relating to children.

HHS Action Items:

The action item below supports the encouragement of full participation of fathers on programs and services relating to children and are included in either the HHSC or DSHS Strategic Plans.

2.1.1. Community Partner Program.

Additional Initiatives:

The initiative below also supports the encouragement of full participation of fathers on programs and services relating to children.

Help Me Grow Texas (HMG Texas)

DSHS is building and enhancing statewide early childhood systems of care - by involving fathers with the HMG Texas program - for the optimal health, development, and well-being of all Texas children. HMG Texas program is led by the MCH section in the DSHS Community Health Improvement Division. HMG Texas involves fathers in larger programming efforts. Operating in six communities serving 29 counties, HMG Texas builds and enhances statewide early childhood systems of care for the optimal health, development, and well-being of all Texas children.

Father participation activities include:

- Recruiting and selecting father participants for the Family Engagement Subcommittee leadership team and Early Childhood Wellness Council;
• Developing father representation within regional family advisory councils and coalitions;
• Hosting fathering skills workshops and events that reinforce the message that fathers have a unique and irreplaceable role in their children’s lives;
• Co-developing fatherhood engagement materials and messaging with father Family Partners; and
• Producing Fathers’ Stories video campaigns and testimonials.
Coordination of Health and Human Services in Regions, Counties, and Municipalities

HHS works to support the provision of health and human services throughout the regions, counties, and municipalities of the state.4

The DSHS RLHO Division serves the public through essential public health services, support to local public health agencies, and coordination for emergency preparedness and response.

RLHO is responsible for:

- Statewide DSHS public health offices;
- DSHS Office of Border Public Health;
- Center for Health Emergency Preparedness and Response; and
- Texas Center for Infectious Disease.

Support and coordination to regions, counties, and municipalities in Texas is an important mission for RLHO. Coordination can include public health data, supplies, information, subject matter experts, direct services, disaster logistics, and more.

- RLHO ensures daily coordination and cooperation among eight DSHS PHRs, 165 LHEs, and 203 Texas Health Authorities.
- Each RLHO PHR is led by a Regional Medical Director. Regional Medical Directors serve as local health authorities in counties where a local health authority has not been appointed.
- RLHO PHRs provide public health services as the primary public health provider in 194 of 254 counties and augment services in the remaining 60 counties.
- RLHO works directly with LHEs to ensure the operational administration and coordination of essential public health services to communities, families and individuals throughout the state.

4 Tex. Gov’t Code § 531.022(e).
• RLHO provides public health leadership and effective response to all types of health emergencies in Texas including bioterrorism, infectious disease outbreaks, and natural disasters.

• RLHO supports partners, LHEs, and other health decision makers in disaster response situations by providing essential, timely, and accurate data needed for emergency response.
### Appendix 1. Alignment between Statutory Goals and HHSC Action Items

The tables below show which HHSC Action Items support each of the nine goals listed in Texas Government Code Section 531.022.

**Goal 1. Improve and support health outcomes and well-being for individuals and families.**

**Objective 1.1. Enhance quality of direct care and value of services.**

<table>
<thead>
<tr>
<th>HHS Action Items</th>
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<tbody>
<tr>
<td>1.1.1. MCO Benchmarks.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
</tr>
<tr>
<td>1.1.2. STAR+PLUS Pilot Program.</td>
<td>2. The creation of a continuum of care for families and individuals in need of health and human services.</td>
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<tr>
<td>1.1.3. Medicaid for Breast and Cervical Cancer Treatment.</td>
<td>3. The integration of health and human services to provide for the efficient and timely delivery of those services.</td>
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<td>1.1.4. Community Attendants</td>
<td>4. The maximization of existing resources through effective funds management and the sharing of administrative functions.</td>
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<td>5. The effective use of management information systems to continually improve service delivery.</td>
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<td>9. The encouragement of full participation of fathers in programs and services relating to children.</td>
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## Objective 1.2. Prevent illness and promote wellness through public- and population-health strategies.

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<thead>
<tr>
<th>HHS Action Items</th>
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<tbody>
<tr>
<td>1.2.1. Engaging Older Adults.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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<td>1.2.2. Addressing Opioid Harm.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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<td>1.2.3. Mental Health First Aid Training.</td>
<td>3. The integration of health and human services to provide for the efficient and timely delivery of those services.</td>
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<td>1.2.4. Child Immunizations.</td>
<td>4. The maximization of existing resources through effective funds management and the sharing of administrative functions.</td>
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<td>1.2.5. Maternal Mortality and Morbidity.</td>
<td>5. The effective use of management information systems to continually improve service delivery.</td>
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<td>1.2.6. HIV Care.</td>
<td>6. The promotion of systemwide accountability through effective monitoring mechanisms.</td>
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</table>

| | 7. The promotion of teamwork among the health and human services agencies and the provision of incentives for creativity. |
| | 8. The fostering of innovation at the local level. |
| | 9. The encouragement of full participation of fathers in programs and services relating to children. |
Objective 1.3. Encourage self-sufficiency and long-term independence.

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<tr>
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<tr>
<td>1.3.1. Family Violence Survivor Support.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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</table>
Goal 2. Ensure efficient access to appropriate services.

Objective 2.1. Empower Texans to identify and apply for services.

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<tr>
<th>HHS Action Items</th>
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<tr>
<td>2.1.1. Community Partner Program.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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<tr>
<td>2.1.2. WIC Program.</td>
<td>2. The creation of a continuum of care for families and individuals in need of health and human services.</td>
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Objective 2.2. Provide seamless access to services for which clients are eligible.

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<tr>
<th>HHS Action Items</th>
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<tbody>
<tr>
<td>2.2.1. Extended Postpartum Coverage.</td>
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<td>2.2.2. Healthy Texas Women.</td>
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<td>2.2.3. State Hospital System Capacity.</td>
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Objective 2.3. Ensure people receive services and supports in the most appropriate, least restrictive settings, considering individual needs and preferences.

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<tr>
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<td>1. The creation of a continuum of care for families and individuals in need of health and human services.</td>
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<td>2.3.1. State Supported Living Center Quality.</td>
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<td>2.3.2. Individualized Skills and Socialization.</td>
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<td>2.3.3. Child Advocacy Centers of Texas.</td>
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<tr>
<td>2.3.4. Early Intervention Services.</td>
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Objective 2.4. Strengthen consumers' access to information, education, and support.

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<tr>
<td>2.4.1. 2-1-1 Texas.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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<td>2.4.2. Servicemember Support.</td>
<td>2. The creation of a continuum of care for families and individuals in need of health and human services.</td>
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**Goal 3. Protect the health and safety of vulnerable Texans.**

**Objective 3.1. Optimize preparation for and response to disasters, disease threats, and outbreaks.**

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<td>3.1.1. Emergency Broadcasting to Regulated Entities.</td>
<td>1. The development of a comprehensive, statewide approach to the planning of health and human services.</td>
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Objective 3.2. Prevent and reduce harm through improved education, monitoring, inspection, and investigation.

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Objective 4.1. Promote and protect the financial and programmatic integrity of HHS.

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<td>4.1.1. Focus on High-Risk Contracts.</td>
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<td>4.1.2. Cybersecurity.</td>
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<td>4.1.4. Group Purchasing Organizations.</td>
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Objective 4.2. Strengthen, sustain, and support a high-functioning, efficient workforce.

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<td>5. Effective use of management information systems to continually improve service delivery.</td>
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| 1. Development of a comprehensive, statewide approach to the planning of health and human services. | X | X | X |
| 2. The creation of a continuum of care for families and individuals in need of health and human services. |     |     |     |
| 3. The integration of health and human services to provide for the efficient and timely delivery of those services. |     |     |     |
| 4. The maximization of existing resources through effective funds management and the sharing of administrative functions. |     |     |     |
| 5. The effective use of management information systems to continually improve service delivery. |     |     |     |
| 6. The provision of systemwide accountability through effective monitoring mechanisms. |     |     |     |
| 7. The promotion of teamwork among the health and human services agencies and the provision of incentives for creativity. |     |     |     |
| 8. The fostering of innovation at the local level. |     |     | X |
| 9. The encouragement of full participation of fathers in programs and services relating to children. |     |     |     |
**Objective 4.3.** Continuously improve business strategies with optimized technology and a culture of data-driven decision-making.

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### Table Details:

- **HHS Action Items**
  - 4.3.1. Identifying Trends and Outliers.
  - 4.3.2. Improved Contract Management.
  - 4.3.3. Medicaid Enterprise System.
  - 4.3.4. Data Quality and Maturity.
  - 4.3.5. Self-Service Data Quality.

- **Statutory Goals**
  - X X
  - X X
  - X
  - X X X X X
  - X
  - X