



**Medicaid CHIP Data
Analytics Unit
Annual Report of Activities
State Fiscal Year 2024**

**As Required by
2024-25 General Appropriations Act,
House Bill 1, 88th Legislature, Regular
Session, 2023 (Article II, HHSC,
Rider 7)**

**Texas Health and Human Services
Commission
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1. Introduction

The 2024-25 General Appropriations Act, House Bill (HB) 1, 88th Legislature, Regular Session, 2023 (Article II, HHSC, Rider 7), directs the Health and Human Services Commission (HHSC) to “report to the Legislative Budget Board on an annual basis by December 1 of each year the activities and findings of the Data Analysis Unit” created by Government Code, §531.0082. Government Code §531.0082 requires the Data Analysis Unit to provide a quarterly update on the unit’s activities and findings. The following report fulfills the annual reporting requirement for State Fiscal Year 2024 (SFY24).

During SFY24, the Medicaid CHIP Data Analytics Unit (MCDA) within the Office of Data, Analytics, and Performance (DAP) completed 147 projects supporting the direction of the Government Code to “1) improve contract management, (2) detect data trends, and (3) identify anomalies relating to service utilization, providers, payment methodologies, and compliance with requirements” in the state's Medicaid program and the Children’s Health Insurance Program (CHIP). The status of major projects and activities, along with findings, are described in Table 1, below, and include updates to projects related to three general categories: 1) Monitoring Managed Care Organization (MCO) Contract Compliance, 2) Tracking Service Utilization and Related Data, and 3) Enhancing Data Infrastructure.

MCDA collaborates closely with the HHSC Medicaid and CHIP Services (MCS) division. During the quarterly Service Utilization Workgroup meetings where MCDA presents its findings of service utilization trends and anomalies, an average of 58 participants attended from MCS and other areas within HHSC.

In addition, Rider 7 directs that “any anomalies identified related to service utilization, providers, payment methodologies, and compliance with the requirements in Medicaid and the Children’s Health Insurance Program shall be reported to the Office of the Inspector General for further review.” MCDA and the Office of the Inspector General communicate quarterly as needed to exchange updates on respective analyses.

2. Routine Projects

Table 1. State Fiscal Year 2024 Routine Project Updates

Project Name	Project Overview	Frequency of Update	Project Update
Monitoring MCO Contract Compliance - Extract, Transform, and Load (ETL) Automation: Contract Deliverables	The goal of the MCO Contract Compliance ETL process is to redirect Managed Care Contracts and Oversight (MCCO) staff resources that would otherwise have been spent manually processing thousands of reports MCOs formerly submitted in Excel format. Per Uniform Managed Care Manual (UMCM) chapters 5.24.1 through 5.24.7, MCDA extracts MCO self-reported data referencing Member/Provider Complaints, Member Hotlines, Member Appeals, Claims Adjudication, Out-of-network Utilization, Provider Terminations, and Network Adequacy.	Ongoing	In SFY24, MCDA provided MCCO staff with complete data extracts for quality review of two deliverables (network adequacy and provider termination) by pulling data directly from the TexConnect database. MCDA also extracted data for Member/Provider Complaints, Member Hotlines, Member Appeals, Claims Adjudication, and Out-of-network Utilization to prepare visualizations for use by MCCO. MCDA added the new deliverable UMCM 5.24.10 (Service Coordination Report) to the ETL process in SFY23. ETL were designed, tested, and moved to production, with ongoing improvements occurring in SFY24. MCDA provided detailed reports on MCO data to MCCO to facilitate the improvement in data quality. MCDA continued to perform data quality review of the submissions, and also worked with policy staff to refine the reporting of the Service Coordination data.

Project Name	Project Overview	Frequency of Update	Project Update
Monitoring MCO Contract Compliance - ETL Automation: Personal Care Services (PCS) Authorization	In SFY2022 Q1, MCDA staff began assisting STAR+PLUS and STAR KIDS policy staff in automating report production for MCO self-reported data submitted per UMCM chapters 5.4.5.3 and 5.4.5.6. The deliverables referenced in these chapters collect information about number of members authorized to receive PCS and number of members who received those services, as well as the number of units authorized and received.	Ongoing	MCDA staff continued to work with STAR+PLUS and STAR KIDS policy staff in redesigning the deliverable to provide for quality review of the submissions and to improve comparisons between MCOs.
MCO Contract Compliance – Quality Performance Report (QPR) Dashboards	The goal of the MCDA compliance dashboards is to enhance contract oversight by trending MCOs’ compliance with standards required by MCO contracts and the UMCM, such as claims adjudication timeliness and hotline call pick-up rate standards.	Quarterly	The QPR compliance dashboards were updated and revised to include all new data points from SFY23 Q4 through SFY24 Q3.

Project Name	Project Overview	Frequency of Update	Project Update
MCO Contract Compliance - Complaints Dashboards	As a result of findings from the report required by Rider 61 of the 2018-19 General Appropriations Act, Senate Bill (SB) 1, 85th Legislature, Regular Session, 2017 (Article II, HHSC), on Medicaid Managed Care Oversight, MCS initiated a project to revise the managed care member complaints process to streamline intake and tracking, more effectively leverage complaints data to identify risks, and ultimately improve quality of services. HB 4533, 86th Legislature, Regular Session, added related requirements, including making aggregated data available to the legislature and the public.	Quarterly	MCDA compiled the complaints data for SFY23 Q3 through SFY24 Q2 and refreshed the dashboards for publication on the HHSC website .
Provider Network Adequacy (PNA) - Time and Distance Reporting	HHSC requires MCO provider networks to comply with distance and travel time standards in accordance with managed care contracts. MCDA measures geodistance and travel time between clients and providers using geospatial mapping analysis and displays results in a Tableau dashboard, which presents data on compliance with HHSC distance performance standards by MCO, county, and provider type.	Quarterly	MCDA worked with Performance Management and Analytics System (PMAS) Engineering to provide MCS with additional tools related to monitoring compliance with time and distance standards. MCDA also transitioned to utilizing the PNA data mart as the source of provider data for PNA analysis.

Project Name	Project Overview	Frequency of Update	Project Update
PNA – PMAS	<p>MCDA is partnering with MCS and the PMAS teams within DAP and HHSC Information Technology (IT), to further integrate and automate the data systems required to monitor PNA in a more holistic manner.</p>	Ongoing	<p>In SFY24, MCDA continued to work with MCS, the PMAS Data Engineering Team, and other DAP teams on integrating disparate provider datasets, data validation and profiling, designing a data model to support efficient network adequacy monitoring analysis and integrating geocoding automation for standardizing client and provider location data.</p> <p>Members of MCDA have been appointed as data stewards for the data mart and are working with IT and Enterprise Information Management on data documentation while ensuring that data stored in the data mart and in connected geodatabases adhere to Data Governance and Performance Management (DGPM) standards and guidelines.</p> <p>Members of MCDA are participating in user acceptance testing and data validation of ingested data.</p> <p>MCDA is also working with the Geographic Information Systems Administrator to design security protocols.</p>

Project Name	Project Overview	Frequency of Update	Project Update
Prior Authorization Data Collection	In SFY22 Q4, HHSC, in collaboration with Texas Medicaid & Healthcare Partnership (TMHP), completed development of the project to finalize variables to include in the new Member-Level Data Warehouse. MCS Managed Care Utilization Review (MCUR) staff have continued to work with the MCOs to assist them in successfully submitting test data to the TMHP Data Warehouse.	Ongoing	In SFY24, MCDA continued to consult with MCUR staff regarding prior authorization data.
Service Utilization Dashboard	MCDA creates and maintains a comprehensive service utilization dashboard displaying healthcare utilization by multiple service types, broken out by Medicaid and CHIP programs, MCOs, Service Delivery Area, age groups, race/ethnicity, and gender. The dashboard features multiple measures, including amounts paid, utilization rates, and number of claims.	Quarterly	In SFY24, the Service Utilization Dashboard was updated each quarter to ultimately include finalized data through SFY23 Q4 and preliminary data through SFY24 Q2.
Behavioral Health - Psychotropic Medications for Interstate Compact on the Placement of Children (ICPC)	MCDA provides a quarterly report to MCS Vendor Drug Program on psychotropic medications among ICPC. ICPC children are foster children from other states who are sent to Texas to live with a relative and are covered by Texas Medicaid per the ICPC agreement. The report examines similar topics of prescription usage as other MCDA psychotropic monitoring reports but on a quarterly, rather than annual timeframe.	Quarterly	In each quarter of SFY24, MCDA completed the Psychotropic Medications ICPC report for prescriptions.

Project Name	Project Overview	Frequency of Update	Project Update
Autism Services	<p>The Medicaid Autism Services Policy went live Feb. 1, 2022, in compliance with Rider 28 (SB 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC)). MCDA provides a bi-weekly update on licensed behavior analysts that have applied for enrollment and preliminary assessments to assist with recruitment and outreach.</p>	Bi-weekly	MCDA continued providing, on a biweekly cadence, analysis to support provider enrollment monitoring activities.
Client Enrollment and Eligibility Reporting	<p>MCDA developed the monthly Medicaid and CHIP Enrollment and Eligibility Report to help investigate variations in client eligibility and enrollment data. The data in this report alerts the team to fluctuations in enrollment or Medicaid program rollouts which might impact service utilization. Enrollment data also provides the denominators used in utilization rates, which normalizes the rates to aid in direct comparisons between, for example, MCOs. The one-page enrollment report is distributed widely to MCS and other HHSC staff.</p> <p>In addition to the static PDF report produced by MCDA, MCDA has designed and implemented a Tableau Dashboard version of the eligibility and enrollment report.</p>	Monthly	The Medicaid CHIP Enrollment and Eligibility Report is updated each month, and the latest report released in SFY24 Q4 was compiled in August 2024 and included data as of December 2023.

Project Name	Project Overview	Frequency of Update	Project Update
Quarterly 1115 Transformation Waiver Report	Section 1115 of the Social Security Act requires that federal regulations specify requirements for demonstration monitoring and evaluation. Title 42 CFR 431.424 outlines general evaluation requirements and evaluation design components such as hypotheses, data sources, and comparison strategies.	Quarterly	In SFY24, MCDA provided reports for Member/Provider Complaints with data from SFY23 Q2 through SFY24 Q1. MCDA also provided enrollment, provider counts, provider terminations, Member Hotlines, Member Appeals, Claims Adjudication, Out-of-network Utilization and Service Coordination with data from SFY23 Q3 through SFY24 Q2.
Service Coordination Report	In SFY23 Q4, MCDA staff began assisting MCS Office of Policy staff with the production of a report for MCO self-reported data submitted per UMCM chapter 5.24.10 – Service Coordination Report. This report replaced UMCM 5.4.6.1 members with special health care needs Report beginning SFY23 Q2.	Quarterly	In each quarter of SFY24, MCDA delivered the Service Coordination Report to MCS Office of Policy.
Texas Medicaid and CHIP COVID-19 and Flu Utilization Data	MCDA provides data on utilization and expenditures for COVID-19 and flu testing and diagnosis.	Quarterly	The latest report, delivered in SFY24 Q4, contained data through February 2024.
Texas Medicaid Telemedicine, Telehealth, and Home Telemonitoring Services in Texas Medicaid Report	Every other year, MCDA provides analyses on Medicaid utilization of and expenditures for teleservice services to assist MCS with updating the biennial Telemedicine, Telehealth, and Home Telemonitoring Services in Texas Medicaid Report as directed by SB 789, 77th Legislature, Regular Session, 2001.	Biennial	In SFY24, MCDA delivered teleservices data from SFY19 to SFY23, broken out by procedure codes, county, metropolitan statistical areas, diagnosis codes, and provider type. MCDA also edited and proofread the draft report, due on December 1, 2024.

3. Goals for Next Fiscal Year

In SFY25, MCDA will build on the work it is conducting on MCS key initiatives and other projects, including the following:

- Continuing a partnership with MCS and the PMAS teams to further integrate and automate the data systems to monitor PNA in a more efficient and holistic manner and implement an automated geocoding pipeline to maintain standardized location-based information throughout the data mart. MCDA also began user acceptance testing of the data mart in SFY24 Q2 and will continue this effort into SFY25 Q1.
- Continuing collaborative work on enhancements to the Analytical Data Store (ADS), including creating a best-picture representation of long-term care (LTC) claims, adding other high value LTC data elements, and developing a method for data analysts to easily report across ADS and LTC-ADS data models. This effort is expected to be completed in SFY25 Q1.
- Creating a new Quarterly Pharmacy Report dashboard that will include prescription related prior authorization and percentage of maximum allowable cost metrics. MCDA will continue to perform data quality reviews on the MCO submissions to allow MCCO staff the opportunity to assist the MCOs with data quality. The dashboard will be finalized upon resolution of the data quality issues.
- Exploring the use of SAS Viya to develop an automated model to identify the most significant contributing factors or drivers in changing trends and anomalies in Home and Community-based Services data.
- Collaborating with MCS Office of Policy staff for the production of a dashboard for MCO self-reported data submitted per UMCM chapter 5.24.10 – Service Coordination Report.

4. List of Acronyms

Acronym	Full Name
ADS	Analytical Data Store
CHIP	Children’s Health Insurance Program
DAP	Office of Data, Analytics, and Performance
DGPM	Data Governance and Performance Management
ETL	Extract, Transform, and Load
HB	House Bill
HHSC	Health and Human Services Commission
ICPC	Interstate Compact on the Placement of Children
IT	Information Technology
LTC	Long-Term Care
MCCO	Managed Care Contracts and Oversight
MCDA	Medicaid CHIP Data Analytics
MCO	Managed Care Organization
MCS	Medicaid and CHIP Services
MCUR	Managed Care Utilization Review
PCS	Personal Care Services
PMAS	Performance Management and Analytics System
PNA	Provider Network Adequacy
QPR	Quality Performance Report
SB	Senate Bill
SFY	State Fiscal Year
TMHP	Texas Medicaid & Healthcare Partnership
UMCM	Uniform Managed Care Manual