



**Medicaid CHIP Data  
Analytics Unit Quarterly  
Report of Activities State  
Fiscal Year 2023,  
Quarter 1**

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**As Required by  
2022-23 General Appropriations Act,  
Senate Bill 1, 87th Legislature, Regular  
Session, 2021 Texas Health and Human  
Services  
(Article II, HHSC, Rider 7)**

**Texas Health and Human Services  
Commission  
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**TEXAS**  
Health and Human  
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# 1. Executive Summary

The 2022-23 General Appropriations Act, Senate Bill (SB) 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 7), directs the Health and Human Services Commission (HHSC) to submit a quarterly report on activities and findings of the Data Analysis Unit established pursuant to Government Code, §531.0082. In compliance with this rider, this report focuses on the quarterly activities, the status of major projects, and the findings of the Medicaid CHIP Data Analytics Unit (MCDA).

Highlights this quarter include:

- This quarter, MCDA continued partnering with the Performance Management and Analytics System (PMAS) teams within the Office of Data, Analytics, and Performance (DAP) and HHSC Information Technology (IT), to integrate and automate the data systems required to monitor provider network adequacy in a more efficient and holistic manner. To date, MCDA has built and updated multiple proof-of-concept data tables in Microsoft SQL Server, used the tables to calculate three predefined provider related key measures, and created a proof-of-concept provider key measure Tableau dashboard. MCDA also coordinated with IT to upgrade software to allow for dashboard automation in the PMAS Tableau Server, and continued to document processes and requirements for later use by IT.
- While progressing on the Provider Network Adequacy PMAS initiative, MCDA continued to improve its processes to closely monitor and report on trends related to provider network adequacy.
  - ▶ In collaboration with Texas Medicaid & Healthcare Partnership (TMHP) and the Office of Inspector General (OIG), MCDA is comparing the accuracy of United States Postal Services (USPS) based geographic location services software (Informatica AddressDoctor) and Geographic Information System (GIS) based location services software (ArcGIS StreetMap Premium) for cleaning Medicaid client and provider address data. The goal of the analysis is to ensure consistency and accuracy of Medicaid client and provider addresses across agency data sources and to assess costs and benefits of enhancing current processes.
  - ▶ MCDA provided information on the network adequacy of Medicaid managed care enrolled audiologists for the Governor's Committee on

People with Disabilities, in preparation for their legislative report recommendations.

- MCDA provided the legislature and executive leadership with a variety of analyses on Medicaid and CHIP mental and behavioral healthcare.
  - ▶ SP 26 (Senate Bill 1, Article II, Special Provisions Relating to All Health and Human Services Agencies, Section 26, 87th Legislature, Regular Session, 2021) requires MCS to report to the legislature on maximizing the use of federal funds in providing behavioral health services for foster care, community-based care, and other child services. MCDA provided utilization and expenditure data on intensive outpatient and partial hospitalization to estimate the cost and usage of a Serious Mental Illness (SMI) / Serious Emotional Disturbance (SED) 1115 waiver for Medicaid members enrolled in STAR Health.
- In SFY23 Q1, 58 new anomalies related to the utilization rate or the amount paid were detected in the Service Utilization Dashboard data. On October 26, 2022, MCDA presented its highest priority anomaly findings to the Service Utilization Workgroup, a committee of subject matter experts from across MCS, such as policy and program divisions, and other areas in HHSC, including Actuarial Analysis.

## 2. Introduction

The 2022-23 General Appropriations Act, Senate Bill (SB) 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 7), directs HHSC to “report to the Legislative Budget Board on a quarterly basis the activities and findings of the Data Analysis Unit” created by Government Code, §531.0082. The following report fulfills this requirement for the first quarter of State Fiscal Year 2023 (SFY23 Q1).

During SFY23 Q1, MCDA within the Office of Data, Analytics, and Performance (DAP) completed 34 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 and CHIP programs. 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 many units within the MCS division. At the most recent quarterly Service Utilization Workgroup meeting, where MCDA presents its findings of service utilization trends and anomalies, 41 participants attended. Units represented included the Medical Director’s Office, Policy and Program, Operations Management, Quality Assurance, and Utilization Review (UR). Several Actuarial Analysis staff also attended the Service Utilization Workgroup meeting. MCDA continues to meet with the Director of Actuarial Analysis on a monthly basis to exchange observations of data variations of interest.

In addition, Rider 7 directs that “...any anomalies identified related to service utilization, providers, payment methodologies, and compliance with the requirements in Medicaid and CHIP shall be reported to the Office of the Inspector General (OIG) for further review.” MCDA and the OIG communicate monthly to exchange updates on respective analyses.

### 3. Routine Projects

**Table 1. State Fiscal Year 2023 Quarter 1 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 Compliance & Operations (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 chapters 5.24.1 through 5.24.7, MCDA extracts MCO self-reported data referencing Member/Provider Complaints, Member Hotlines, Member Appeals, Claims Adjudication, and Out-of-network Utilization, Provider Terminations, and Network Adequacy.	Ongoing	In SFY23 Q1, 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.
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 Uniform Managed Care Manual 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 Personal Care Services (PCS) and number of members who received those services, as well as the number of units authorized and received.	Ongoing	In SFY23 Q1, 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 data analysis between MCOs.

Project Name	Project Overview	Frequency of Update	Project Update
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 Medicaid Uniform Managed Care Manual, such as claims adjudication timeliness and hotline call pick-up rate standards.	Quarterly	In SFY23 Q1, the QPR compliance dashboards were updated and revised to include all new data points through SFY22 Q4.
MCO Contract Compliance - Complaints Dashboards	As a result of findings from the report required by Rider 61 of the 2018-2019 General Appropriations Act, 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	In SFY23 Q1, MCDA compiled the SFY22 Q3 complaints data and refreshed the dashboards for the <a href="#">reports published on the HHSC website</a> .
Provider Network Adequacy - 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	In SFY23 Q1, MMP managed care plans were added to the Time and Distance reporting. The SFY23 Q1 report is currently in review and will be published next quarter.

Project Name	Project Overview	Frequency of Update	Project Update
Provider Network Adequacy - PMAS	MCDA is partnering with the PMAS teams within DAP and HHSC IT, to further integrate and automate the data systems required to monitor provider network adequacy in a more holistic manner.	Ongoing	In SFY23 Q1, as part of a proof of concept of an integrated provider data system, MCDA updated several provider-related data tables in Microsoft SQL Server. MCDA also began development of a Tableau dashboard displaying predefined MCS key measures and using data from the updated provider-related data tables in Microsoft SQL Server. Work has also begun to identify, document, and collect multiple data sets from external sources, such as licensure data, for later use by IT.
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. 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 SFY23 Q1, MCDA continues to consult with MCUR staff regarding prior authorization data quality, access and querying the data in Oracle, developing a reporting strategy, and development of an anomaly detection dashboard.
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, SDA, age groups, race/ethnicity, and gender. The dashboard features multiple measures, including amounts paid, utilization rates, and number of claims.	Quarterly	In SFY23 Q1, the Service Utilization Dashboard was updated to include finalized data through SFY22 Q1 and preliminary data through SFY22 Q3.



Project Name	Project Overview	Frequency of Update	Project Update
Ongoing Trend and Anomaly Detection	<p>MCDA presents its highest priority anomaly findings from the Service Utilization Dashboard to the Service Utilization Workgroup, a committee of subject matter experts from across MCS, such as policy and program divisions, and other areas in HHSC, including Actuarial Analysis. The MDCA team asks the workgroup members to offer ideas for what is driving the anomaly and to provide direction on next steps. Anomalies may continue to be monitored past the quarter in which they are identified and may be referred to MCS leadership or OIG for further review.</p>	Quarterly	<p>In SFY23 Q1, new anomalies related to the utilization rate per 1,000 members or the amount paid per client were detected in the Service Utilization Dashboard data and shared with the Service Utilization Workgroup. Observations about the impact of the Public Health Emergency (PHE) on services since then were based on final data through SFY22 Q1 (November 2021) and preliminary data from December 2021 - May 2022.</p>
COVID-19 Dashboards and Studies	<p>Since January 2021, MCDA has been posting <a href="#">external dashboards</a> displaying the numbers and rates of Medicaid and CHIP clients receiving COVID-19 tests or receiving a service with a diagnosis of COVID-19, including emergency department visits and inpatient stays.</p>	Quarterly	<p>In SFY23 Q1, MCDA refreshed the external COVID-19 dashboards with data through May 2022.</p>
COVID-19 Non-risk Payment Expenditures	<p>MCDA conducted an analysis to estimate the non-risk payment expenditures for COVID-19 testing/diagnostic services as well as inpatient hospital treatment. MCDA has built a dashboard that identifies any abnormal billing practices for MCOs that are receiving non-risk payments for testing/diagnostic services.</p>	Monthly	<p>In SFY23 Q1, MCDA updated this dashboard to include data up to October 2022's reporting time period. MCDA also fulfilled a request by MCS Operations division to calculate how much HHSC has paid out in non-risk payments for COVID-19 vaccinations, medical treatment, and testing/diagnostic services.</p>

Project Name	Project Overview	Frequency of Update	Project Update
Physical, Occupational, and Speech Therapy Monitoring	MCDA continues to closely monitor physical, occupational, and speech therapy utilization rates in compliance with Senate Bill 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 10).	Biannual	In SFY23 Q1, MCDA completed analyses on client service utilization, provider network adequacy, and services provided to clients while on wait lists, for inclusion in the December 2022 report. The most recently published <a href="#">Biannual Therapy Access Monitoring Report is for June 2022</a> .
Behavioral Health - Psychotropic Medications for Children in Foster Care	Since 2004, HHSC has reported on the utilization of psychotropic medications among children in foster care, in the Use of Psychotropic Medications for Children in Texas Foster Care annual report.	Annual	In SFY23 Q1, MCDA finalized the SFY21 Use of Psychotropic Medications for Children in Texas Foster Care report and anticipates the report to be published in January 2023.
Behavioral Health - Psychotropic Medications for Interstate Compact for Placement of Children (ICPC)	MCDA provides a quarterly report to Medicaid Vendor Drug on psychotropic medications among Interstate Compact for Placement of Children (ICPC). ICPC children are foster children from other states who are sent to Texas to live with a relative and are insured 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 SFY23 Q1, MCDA completed the Psychotropic Medications for Interstate Compact for Placement of Children (ICPC) report with data through August 2022.
Autism Applied Behavior Analysis	The Medicaid Autism Services Applied Behavior Analysis (ABA) benefit went live Feb. 1, 2022, in compliance with Rider 28 (SB 1, 87 <sup>th</sup> Legislature, Regular Session, 2021 (Article II, HHSC)). MCDA provides the Autism benefit work group and the MCOs a bi-weekly update on licensed behavior analysts (LBAs) that have applied for enrollment and preliminary assessments to assist with recruitment and outreach.	Bi-weekly	In SFY23 Q1, MCDA provided analysis to the Medicaid Benefits Policy staff for Readiness Governance presentations.

Project Name	Project Overview	Frequency of Update	Project Update
Client Enrollment and Eligibility Reporting	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.	Monthly	The last Medicaid CHIP Enrollment and Eligibility Report released in SFY23 Q1 was compiled in October 2022 and included data as of March 2022. 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. This quarter, MCDA worked with IT to setup the appropriate Microsoft SQL Server drivers on the Tableau Server to make refreshing extracts possible. The Medicaid and CHIP Enrollment and Eligibility One-Pager Dashboard data now automatically updates itself on a monthly basis.
Enhancing Data Marts	The Analytical Data Store (ADS) is a 'Best Picture' view of the claims and encounter data, meaning that it contains only the most current version of a transaction. ADS offers a cohesive blend of managed care and fee-for-service medical and pharmacy data, allowing a holistic view of a provider or member at the time a service took place. The ADS has become the preferred source for blended claims/encounters data and is accessible to MCDA and other DAP teams via the Data Analytics Platform.	Ongoing	In SFY23 Q1, MDCA continued to work with TMHP to enhance ADS with additional variables which will improve the accuracy and consistency of analyses. The enhancements that were finalized and implemented this quarter include indicators for Healthy Texas Women (HTW) and HTW Plus pharmacy claims, as well as standardized addresses and enhanced geocoding of client and provider addresses. This quarter, TMHP began incorporating long-term care (LTC) claims into ADS, with a projected completion date of May 2023.
Telemedicine, Telehealth, and Home Telemonitoring Services in Texas Medicaid Report	Senate Bill 789, 77th Legislature, Regular Session, 2001, requires the Health and Human Services Commission to submit a report detailing the current state of telemedicine, telehealth, and home telemonitoring services in the Texas Medicaid program.	Biennial	In SFY23 Q1, MCDA delivered additional data to MCS and reviewed and edited the December 2022 report.

Project Name	Project Overview	Frequency of Update	Project Update
Texas Medicaid and CHIP COVID-19 and Flu Utilization Data	Prepare data for System Forecasting to estimate future expenditures of COVID-19 and possible cost offsets with lower flu diagnoses. Provide data on utilization and expenditures for COVID-19 and flu testing and diagnosis.	Quarterly	In SFY23 Q1, MCDA delivered the report with data through May 2022.
Annual 1115 Transformation Waiver Report	This report provides the annual reporting requirements for STAR, STAR Kids, STAR+PLUS, and the Children’s Medicaid Dental Services to the Centers for Medicare & Medicaid Services.	Annual	In SFY23 Q1, MCDA provided enrollment, expenditure, and network adequacy geoaccess data and visualizations for the SFY2021 report.
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 SFY23 Q1, MCDA provided enrollment, provider counts, provider terminations, Member/Provider Complaints, Member Hotlines, Member Appeals, Claims Adjudication and Out-of-network Utilization data for the SFY22 Q3 report.
Emergency Room Visits and Demographics of Texas Medicaid Children with Asthma Dashboard	Data related to emergency room visits and demographics of Texas Medicaid Children with asthma is currently being generated by DAPs Data Dissemination team, delivered in spreadsheet form, and used to inform proxy measures for MCS. MCS is now requesting the data be delivered as a dashboard.	Monthly	In Q1 SFY23, MCDA began development of an Emergency Room Visits and Demographics of Texas Medicaid Children with Asthma Dashboard.

## 4. Goals for Next Quarter

In SFY23 Q2, MCDA will build on the work it is conducting on MCS key initiatives and other projects, including the following:

### Provider Network Adequacy

MCDA will continue its partnership with MCS and the PMAS teams to further integrate and automate the data systems required to monitor provider network adequacy in a more efficient and holistic manner, as approved by the HHS DGPM Executive Steering Committee and Council. Next quarter, MCDA plans to consult with IT and continue to document current processes and requirements for later use, complete validating its method for producing key provider network adequacy measures, and pilot a semi-automated system to produce the measures.

### ADS

In SFY23 Q2, MCDA and TMHP will continue its collaborative work on enhancements to the ADS. Upcoming upgrades include creating a best picture representation of long-term care (LTC) claims in ADS, adding other high value long-term care data elements to the data model, and developing a method which allows data analysts to easily report across ADS and LTC-ADS data models.

### Enhancing Data Infrastructure

Given the breadth of the MCDA dashboard library, it is a resource-intensive endeavor to continuously carry out the ongoing updates necessary to keep the data as current as possible. To increase the efficiency of this process, MCDA is investigating the feasibility of using Tableau Python Server (TabPy) to automate these dataset refreshes. TabPy is an external server implementation which allows the execution of Python scripts on Tableau. MCDA is also exploring the use of Microsoft Power BI as a method for increasing the efficiency of its ETL processes.

### Behavioral Health

In SFY23 Q2, the annual Use of Psychotropic Medications for Children in Texas Foster Care report for SFY21 will be routed for approval and published in January 2022.

## List of Acronyms

Acronym	Full Name
ABA	Applied Behavior Analysis
ADS	Analytical Data Store
CHIP	Children’s Health Insurance Program
COVID-19	Coronavirus Disease of 2019
DAP	Office of Data, Analytics, and Performance
DFPS	Texas Department of Family and Protective Services
DGPM	Data Governance and Performance Management
ETL	Extract, Transform, and Load
HB	House Bill
HHS	Health and Human Services
HHSC	Health and Human Services Commission
HTW	Healthy Texas Women
IT	Information Technology
LBA	Licensed Behavioral Analyst
LTC	Long-term Care
MCCO	Managed Care Compliance and Operations
MCDA	Medicaid CHIP Data Analytics
MCO	Managed Care Organization
MCS	Medicaid and CHIP Services
MTP	Medical Transportation Program
OIG	Office of Inspector General
PCS	Personal Care Services
PCP	Primary Care Providers
PHE	Public Health Emergency
PMAS	Performance Management and Analytics System
QPR	Quality Performance Report
SB	Senate Bill
SDA	Service Delivery Area
SFY	State Fiscal Year
TabPy	Tableau Python Server
TMHP	Texas Medicaid & Healthcare Partnership
UR	Utilization Review