



**Medicaid CHIP Data
Analytics Unit
Quarterly Report of Activities
State Fiscal Year 2025
Quarter 2**

**As Required by
Texas Government Code, Section
531.0082 523.0154**

**Texas Health and Human Services
Commission
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TEXAS
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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 523.0154. Government Code §531.0082 523.0154 requires the Data Analysis Unit to provide a quarterly update on the unit’s activities and findings. The following report fulfills the quarterly reporting requirement for the second quarter of State Fiscal Year 2025 (SFY25 Q2).

During SFY25 Q2, the Medicaid CHIP Data Analytics Unit (MCDA) within the Office of Data, Analytics, and Performance (DAP) completed 35 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, 66 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 (OIG) communicate quarterly as needed to exchange updates on respective analyses.

2. Routine Projects

Table 1. State Fiscal Year 2025 Quarter 2 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 SFY25 Q2, 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 also worked with policy staff to refine the reporting for the Service Coordination data.
Monitoring MCO Contract Compliance – ETL Automation: Personal Care Services (PCS) Authorization	In SFY22, 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 to provide guidance and recommendations on previous data collection issues while the UMCM updates are in progress.

Project Name	Project Overview	Frequency of Update	Project Update
ETL for UMCM 5.24.14 – Non-Medical Needs Screening Report	HB 1575 (88th Legislature, Regular Session, 2023) requires, among other things, HHSC to submit a biennial report of the results of standardized screening questions designed to screen for, identify, and aggregate data regarding the nonmedical health-related needs of pregnant women. UMCM 5.24.14 – Non-Medical Needs Screening Report was approved and posted and requires the MCOs to submit data to report on all Members in managed care who are pregnant during the reporting month including information about all non-medical needs screenings completed during the reporting month for the report population in the MCOs STAR, STAR KIDS, STAR+PLUS and STAR HEALTH programs.	Monthly	Data for UMCM 5.24.14 are submitted as a flat file to TexConnect. The data are then loaded into the TexConnect Oracle database. During SFY25 Q2, MCDA staff designed, developed, tested, and implemented an ETL process to extract the data from the Oracle server and make the data available in the DAP SQL Server for DAP staff to evaluate the quality of submissions and prepare the required legislative biennial report. MCDA staff also developed views for reports on timeliness of MCO submissions.
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 through SFY25 Q1.

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 SFY24 Q4, refreshed the dashboards, and submitted them 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 is currently working with MCCO to develop a custom web-based application for MCO Compliance Monitoring.

Project Name	Project Overview	Frequency of Update	Project Update
<p>PNA – Performance Management and Analytics System (PMAS)</p>	<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>	<p>Ongoing</p>	<p>In SFY25 Q2, 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 Provider+ (previously PNA) data mart and are working with IT and Enterprise Information Management (EIM) 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 (GIS) Administrator to test cloud environments, populate data stores, and design ETL pipelines to support GIS product development for PNA, and standardize geographic data in the data mart.</p> <p>MCDA is also assisting IT in the development of data mart training needs and materials.</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 SFY25 Q2, 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 program, MCO, Service Delivery Area (SDA), and demographic information. The dashboard features multiple measures, including amounts paid, utilization rates, and number of claims.	Quarterly	In SFY25 Q2, the Service Utilization Dashboard was updated to include finalized data through SFY24 Q2 and preliminary data through SFY24 Q4.
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 SFY25 Q2, MCDA completed the Psychotropic Medications for ICPC report for SFY25 Q1 prescriptions.

Project Name	Project Overview	Frequency of Update	Project Update
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 SFY25 Q2, MCDA finalized the Update on the Use of Psychotropic Medications for Children in Texas Foster Care: State Fiscal Years 2002-2023 Data Report and published it on the HHSC website in January 2025.
Autism Services	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 (LBAs) that have applied for enrollment and preliminary assessments to assist with recruitment and outreach.	Bi-weekly	MCDA continued providing, on a biweekly cadence, analysis to support provider enrollment monitoring activities.

Project Name	Project Overview	Frequency of Update	Project Update
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 SFY25 Q2 was compiled in January 2025 and included data as of June 2024.
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 SFY25 Q2, MCDA provided reports for Member/Provider Complaints with data from SFY24 Q3 and enrollment, provider counts, provider terminations, Member Hotlines, Member Appeals, Claims Adjudication, Out-of-network Utilization and Service Coordination with data from SFY24 Q4.

Project Name	Project Overview	Frequency of Update	Project Update
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 (MSHCN) Report beginning SFY23 Q2.	Quarterly	In SFY25 Q2, MCDA delivered the Service Coordination Report with SFY25 Q1 data.
Quarterly Pharmacy Report and Dashboard	MCDA is creating a quarterly dashboard for staff of MCS’s Vendor Drug Program that will include prescription related prior authorization and percentage of maximum allowable cost metrics.	Quarterly	In SFY25 Q2, MCDA delivered the Quarterly Pharmacy Report with SFY25 Q1 data. MCDA is developing the dashboard and will continue to perform data quality reviews on the MCO submissions to allow MCCO staff the opportunity to assist the MCOs with data quality.
89 th Texas Legislature, Regular Session, 2025	Every two years, the Texas Legislature convenes and hundreds of house and senate bills are proposed that could impact HHSC. MCDA reviews, analyzes, provides data, and calculates fiscal impacts for selected bills.	Biennial	MCDA has prepared bill analyses on Texas Senate and House bills that may impact the work MCDA performs to support MCS. MCDA also provided Medicaid service data for a variety of topics, including counseling services utilization and birth data, to help MCS estimate the fiscal impact of legislative bills that would change client services.

3. Goals for Next Quarter

In SFY25 Q3, 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 Provider+ data mart. MCDA also began user acceptance testing of the data mart in SFY24 Q2 and will continue this effort into SFY25 Q3. Comprehensive Snowflake and data mart training is also under development.
- Beta testing SAS Viya software to evaluate unique functionality and potential applications to data management and analytics.
- 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.
- Coordinating with TMHP staff, MCS Operations Management, and MCS Office of Policy to create an ongoing project to monitor and map enrollment of Children and Pregnant Women (CPW) providers, as per the implementation of HB 1575, 88th legislature, Regular Session, 2023.
- Supporting the transition to Provider Enrollment Management System (PEMS) in the Provider+ data mart through collaboration with IT on the data model design changes and testing needed to meet the implementation goal.
- Continuing to support MCS with bill analyses and fiscal estimates to respond to legislative inquiries during the Texas 89th Legislature, Regular Session.

4. List of Acronyms

Acronym	Full Name
CHIP	Children’s Health Insurance Program
CPW	Children and Pregnant Women
DAP	Office of Data, Analytics, and Performance
DGPM	Data Governance and Performance Management
EIM	Enterprise Information Management
ETL	Extract, Transform, and Load
GIS	Geographic Information System
HB	House Bill
HHSC	Health and Human Services Commission
ICPC	Interstate Compact on the Placement of Children
IT	Information Technology
LBA	Licensed Behavioral Analyst
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
MSHCN	Members with Special Health Care Needs
OIG	Office of Inspector General
PCS	Personal Care Services
PEMS	Provider Enrollment Management System
PMAS	Performance Management and Analytics System
PNA	Provider Network Adequacy
QPR	Quality Performance Report
SB	Senate Bill
SDA	Service Delivery Area
SFY	State Fiscal Year
TMHP	Texas Medicaid & Healthcare Partnership

Acronym	Full Name
UMCM	Uniform Managed Care Manual