

## HEALTH AND HUMAN SERVICES COMMISSION

### Public Notice - Texas State Plan for Medical Assistance Amendment

The Texas Health and Human Services Commission (HHSC) announces its intent to submit amendments to the Texas State Plan for Medical Assistance, under Title XIX of the Social Security Act. The proposed amendments will be effective April 1, 2024.

The purpose of the amendments is to update the fee schedules in the current state plan by adjusting fees, rates, or charges for Family Planning Services.

The proposed amendment is estimated to result in an annual aggregate expenditure of \$3,058 for federal fiscal year (FFY) 2024, consisting of \$2,735 in federal funds and \$306 in state general revenue. For FFY 2025, the estimated annual aggregate expenditure is \$6,050 consisting of \$5,445 in federal funds and \$605 in state general revenue. For FFY 2026, the estimated annual aggregate expenditure is \$5,987 consisting of \$5,388 in federal funds and \$599 in state general revenue.

Further detail on specific reimbursement rates and percentage changes will be made available on the HHSC Provider Finance website under the proposed effective date at: <https://pfd.hhs.texas.gov/rate-packets>.

### Rate Hearing.

A Rate Hearing was conducted in person and online on February 5, 2024. Information about the proposed rate changes and hearings was published in the January 26, 2024, issue of the *Texas Register* (49 TexReg 438-439). Additional information and the notice of hearings can be found at <https://www.sos.state.tx.us/texreg/index.shtml>. Archived recordings of the hearings can be found at <https://www.hhs.texas.gov/about/meetings-events>.

### Copy of Proposed Amendment.

Interested parties may obtain additional information and/or a free copy of the proposed amendment by contacting Nicole Hotchkiss, State Plan Policy Advisor, by mail at the Health and Human Services Commission, P.O. Box 13247, Mail Code H-600, Austin, Texas 78711; by telephone at (512) 487-3349; by facsimile at (512) 730-7472; or by e-mail at [Medicaid\\_Chip\\_SPA\\_Inquiries@hhsc.state.tx.us](mailto:Medicaid_Chip_SPA_Inquiries@hhsc.state.tx.us). Copies of the proposed amendment will be available for review at the local county offices of HHSC, (which were formerly the local offices of the Texas Department of Aging and Disability Services).

### Written Comments.

Written comments about the proposed amendment and/or requests to review comments may be sent by U.S. mail, overnight mail, special delivery mail, hand delivery, fax, or email:

U.S. Mail  
Texas Health and Human Services Commission  
Attention: Provider Finance Department  
Mail Code H-400  
P.O. Box 149030  
Austin, Texas 78714-9030

Overnight mail, special delivery mail, or hand delivery  
Texas Health and Human Services Commission  
Attention: Provider Finance Department  
North Austin Complex  
Mail Code H-400  
4601 W. Guadalupe St.  
Austin, Texas 78751  
Phone number for package delivery: (512) 730-7401

Fax  
Attention: Provider Finance at (512) 730-7475

Email  
[PFDAcuteCare@hhs.texas.gov](mailto:PFDAcuteCare@hhs.texas.gov)

Preferred Communication.  
For quickest response, please use e-mail or phone, if possible, for communication with HHSC related to this state plan amendment.  
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