Leading the nation in population and job growth, Texas has one of the country’s strongest economies. Yet, no other state has more residents without health insurance, and no other state has experienced more hospital closures in rural communities.

To support a strong health care infrastructure, Texas hospitals advocate for the following:

1. **FUNDING**
   Funding for health care programs and services to meet the physical and behavioral health care needs of a growing population.
   - Continue state funding of health and human services and programs, including adequate Medicaid funding that supports hospital payments that are closer to the actual costs of providing care.
   - Provide state funding to ensure access to continuous care for vulnerable populations, including women, children and individuals with behavioral health conditions.
   - Continue state funding for educating and training a workforce of physicians, nurses, behavioral health professionals and allied health care professionals in numbers sufficient to care for the state’s large, growing and aging population.

2. **HOSPITAL FINANCE**
   A fair and equitable system of financing hospital payments.
   - Protect the flexibility needed to generate the non-federal share of Medicaid supplemental payments through locally generated solutions, such as intergovernmental transfers and local provider participation funds.
   - Maximize spending allowed under the state’s “budget neutrality” cap or the amount of funding the federal government determines the state can spend for all Medicaid expenditures, including supplemental payment programs, that it would have otherwise spent without the Medicaid 1115 Waiver.
   - Preserve federal payments that extend and sustain successes from the Delivery System Reform Incentive Payment program into the Medicaid program and ensure access to care for the uninsured.
   - Align quality, safety and payment reform initiatives across all payers.

3. **HEALTH CARE COVERAGE**
   An increase in the number of Texans with affordable, comprehensive private health insurance.
   - Support enrollment of all uninsured Texans who are eligible for coverage in the federal health insurance marketplace or other insurance programs.
   - Support development of a private market solution for low-wage working Texans with incomes too low to qualify for marketplace health insurance to purchase affordable, comprehensive health insurance.
4. BEHAVIORAL HEALTH
Funding for behavioral health care that is commensurate with the need for services and policies that foster, rather than inhibit, access to emergency psychiatric care.

- Increase state funding to ensure timely and appropriate access to inpatient and outpatient, community-based services and supports for Texans with a behavioral health or substance use condition.
- Support efforts to streamline emergency detention orders and orders of protective custody to ensure timely behavioral health care for patients who are deemed to be a danger to themselves or others.

5. MANAGED CARE OVERSIGHT
Increase oversight of Medicaid managed care organizations to ensure adequate and timely hospital reimbursement and patients’ access to care.

- Decrease administrative and unnecessary burdens that hinder access to care.
- Reduce inappropriate denials.
- Ensure MCO reimbursement is timely and covers the cost of care.

6. SURPRISE BILLING
Preservation of the state law that protects patients from surprise medical bills for emergency or unplanned out-of-network health care services.

- Protect private negotiation for hospitals and health plans to determine network inclusion and payment for services.
- Oppose government-set rate parameters to determine payment for services.

7. PRICE TRANSPARENCY
Empowerment of health care consumers through access to information that supports better health care decision making.

- Support patients’ access to timely, straightforward and accurate estimates of their out-of-pocket costs for scheduled and elective procedures.
- Ensure that efforts to help patients make informed health care decisions protect private contract negotiations between hospitals and health plans and do not impose excessive administrative burdens on hospitals.
- Engage all stakeholders—hospitals, physicians, health plans, employers and consumers alike—to ensure meaningful transparency for patients.
- Support enhanced disclosure of freestanding emergency centers’ ability to charge facility fees and of their participation in insurance networks.

8. LIABILITY PROTECTION
Preservation of the state’s model medical liability and prompt payment laws.

- Oppose efforts to repeal the state’s 2003 tort reform law and any efforts to modify the law’s limits on non-economic and medical damages.
- Support the current law (Prompt Pay Act) to ensure that physicians and hospitals receive timely and accurate payments for health care provided and ensure the law’s applicability to all payor sources.