The following consumer, patient, and faith-based organizations share a desire to see the state of Texas implement a sustainable health care system and provide quality affordable health coverage to its citizens. We believe now that the Affordable Care Act (ACA) is the law of the land, Texas should make the most of the new law to help our families struggling with the high cost of health insurance, bring back home our federal tax dollars, and reduce our 6.4 million uninsured. We also want to ensure that Texas Medicaid and the Children's Health Insurance Program (CHIP) can continue to provide vital health care and life-saving supports for some of Texas' poorest and most vulnerable.

We oppose the following bills, which fundamentally undermine or radically restructure Texas Medicaid and health reform.

- HB 1/SB 1: the 2012-13 Texas state budget. Budget bills adopted by both the House and the Senate both significantly underfund Texas Medicaid and CHIP. The Legislature has better choices available, including spending the Rainy Day Fund, to help ensure sufficient funding for Medicaid and CHIP.
- HB 5 (Kolkhorst): Health care compact to block grant federal funds. If ultimately approved by Congress, would turn all federal health funding coming to Texas for Medicare, Medicaid, CHIP, and other programs into one big block grant. Removes all federal rules governing who is served and how they are served, likely resulting in cuts to covered populations and services. Would be disastrous for seniors, children, and persons with disabilities who rely on Medicare, Medicaid, and CHIP. (Similar bills: SB 25, HB 1008.)
- HB 13 (Kolkhorst): Waiver to radically restructure Medicaid. Directs the state to seek a "waiver" of federal law to dramatically restructure Medicaid. As approved by House, includes no protections to guarantee continued comprehensive coverage for Medicaid's vulnerable population of children, seniors, Texans with disabilities, and expectant mothers.
- HB 32 (Creighton): No individual mandate to have coverage. Declares that Texans are not required to obtain health insurance or pay a tax penalty, as required (with several exceptions) under the ACA. As long as the federal requirement stays in place, this state law would have no effect. The ACA prevents insurance companies from denying coverage to those with pre-existing conditions. Without the individual mandate, healthy people could wait until they got sick to buy coverage, driving up premiums. (Similar bills: HB 97, HB 124, HB 144, HB 203, HJR 24, HJR 27, HJR 30, HJR 51, SB 515.)
- HB 335 (Shelton): Unnecessary reporting requirements. Requires state agencies to produce unnecessary reports about activities to implement the ACA. Reporting requirements raise concerns about violating an individual's privacy or HIPAA protections. With state agencies subject to requests to analyze the cost of compliance with federal law as a routine matter, there is no sound reasoning for singling out this federal law for this level of reporting.
- HCR 27 (Christian): A resolution expressing the opposition of the Legislature to the ACA. The resolution includes erroneous statements, and asserts that the status quo "has served all interests well," ignoring Texas' 6.4 million uninsured. With little time left in session, focus should remain on getting the best deal for Texans within current federal structures.
- HB 297 (Berman): Criminal penalties for public employees implementing the ACA. Creates criminal penalties, including jail time, for any public employee that acts to implement the ACA. Would subject public employees to incarceration for doing their jobs.



















