



Center for Public Policy Priorities

How Texas is Helping Hurricane Katrina Victims with Health Care Services

Provided below are details on some of the **immediate** steps Texas state and local governments have taken to facilitate provision of health care services to gulf coast state residents who have evacuated to Texas.

The large-scope question of whether special federal “disaster Medicaid” assistance will be made available to persons affected or displaced by Katrina has not yet been answered as we post this summary. This kind of special assistance—with vastly simplified enrollment procedures and eligibility standards—extended temporary health coverage after 9/11 to nearly 350,000 uninsured New Yorkers, many of whom would not have qualified for Medicaid under normal circumstances. More information on what federal authorities and Congress are considering is provided in the last section of this memo, and CPPP will post an update on Medicaid as soon as decisions are announced.

Immediate provision of acute medical care:

Evacuees generally are having their medical needs served by local government safety nets and volunteer medical providers, who are not waiting for answers about how those services will ultimately be funded. Links to major urban health departments’ web pages and local resources can be found on the Department of State Health Services (DSHS) web page at:

<http://www.dshs.state.tx.us/dshstoday/katrina.shtm>

Emergency Prescription Refills:

Normally, under Texas pharmacy rules, pharmacists may not dispense more than a 72-hour emergency supply of medication. However, the Texas State Board of Pharmacy has announced that pharmacists may use their professional judgment to provide up to a 30-day supply of medication (except a Schedule II controlled substance) for patients relocated into Texas by Hurricane Katrina: <http://www.tsbp.state.tx.us/hurricaneinfo.htm>

Immunization:

DSHS has temporarily waived normal immunization requirements for attending school or child-care facilities in Texas for children displaced by Hurricane Katrina. Students will be given a 30-day provisional enrollment, which will be extended as necessary. A special form allowing the 30-day provisional enrollment will be available from the schools and child-care facilities and at the DSHS web page: <http://www.tdh.state.tx.us/immunize/default.htm>

HIV Medications:

Persons who were receiving HIV medications through the Louisiana, Mississippi, or Alabama AIDS Drug Assistance Programs can apply to get those medications in Texas. Clients will need to complete a single-page form, titled the Emergency Relief ADAP Application. More

information and the Emergency Relief ADAP application can be obtained by calling the THMP at (800) 255-1090 or (512) 533-3000, or at <http://www.tdh.state.tx.us/hivstd/meds/>

Public Health Program Providers:

DSHS has notified public health providers who currently contract with the agency to provide medical services funded under Title V (Maternal and Child Health block grant) and Title X (Family Planning), Title XX (Social Services Block Grant), Breast and Cervical Cancer, Epilepsy, or Primary Health Care that they may serve evacuees with those contract funds. Contractors are asked to track these clients and related services separately.

Dialysis Assistance

Persons needing services can contact End Stage Renal Disease Network #14 of Texas, 877-886-4435. Regular hours are 8:00 a.m.-5:00 p.m. CDT, Monday-Friday. Staff can assist in locating a dialysis facility and identifying other resources available (prescriptions, medical, financial). A database of dialysis facilities that are accepting displaced dialysis patients is at <http://www.esource.net>.

After locating a source of care through the contacts above, clients can contact TxDOT if they need Medical Transportation services to medical or dialysis appointments; call 1-877-633-8747 for services.

Commissioner Sanchez to Develop Statewide Health Plan for Needs of Evacuees

The Governor has directed DSHS Commissioner Dr. Eduardo Sanchez to develop a statewide plan to address the short-term and long-term health needs of Hurricane Katrina evacuees in Texas. DSHS has “special needs staff” working in their Emergency Support Center who can answer complex questions about accessing care. Check for updates at: <http://www.dshs.state.tx.us/>

Information for persons with Disabilities:

www.katrinadisability.info/

Temporary Texas Licensure for Louisiana Health Professionals; Texas Professionals Volunteering

Licensed healthcare professionals from Louisiana – nurses, social workers, and more – who are in Texas to participate in the relief effort can get expedited temporary Texas licensure; in some cases Louisiana licenses are being honored.

The Department of State Health Services has a Hurricane Katrina Volunteer Registry for physicians, nurses and allied fields:

<https://tigerlily.tdh.state.tx.us/volunteerreg/volunteerinfo.aspx>

Nurses:

Texas Board of Nurse Examiners: <http://www.bne.state.tx.us/h-katrina.htm>

Texas Ready Nurses: http://www.texasnurses.org/RTN_katrina.htm

Physicians:

The State Board of Medical Examiners' web site provides information for Texas doctors wishing to volunteer, and for out-of-state doctors needing temporary Texas licensure. Requests related to Hurricane Katrina will be given top priority. Call Customer Information Center at 512-305-7030 if you have questions or need assistance, or visit

http://www.tsbme.state.tx.us/katrina_emergency.htm

The Texas Medical Association also provides links for volunteers and out-of-state physicians:
<http://www.texmed.org/Template.aspx?id=4292>

EMS Providers and Personnel:

Texas EMS services and responders wanting to volunteer for Hurricane Katrina response:
http://www.tdh.state.tx.us/hcqs/ems/Katrina_volunteering.htm. Out-of-state EMS Workers seeking temporary licensure: http://www.dshs.state.tx.us/katrina/kat_professionals.shtm

Mental Health Professionals

To volunteer services, please contact Janet Fletcher at Janet.Fletcher@DSHS.state.tx.us, phone 512-206-5153, or fax to 512-206-4827. Include your name, e-mail address, 24/7 contact number, licensure (psychiatrist, social worker, etc.), whether you are licensed in Texas (if not, where), and your availability.

Allied Health-Care Personnel:

To volunteer services that do not fall under one of the categories listed, please send an e-mail to James Bryant at James.Bryant@DSHS.state.tx.us. Include your name, e-mail address, and 24/7 contact number, along with what you have to offer in terms of service, equipment, etc.

Locating Hospital patients:

The Texas Hospital Association is working with the AHA and LHA to establish a comprehensive online patient registry to help family members locate loved ones who have been admitted to Texas hospitals for inpatient care. Check the THA web site for updates:

<http://www.thaonline.org/Katrina/index.asp>

A hospital patient registry is already available for patients hospitalized in the Dallas - Fort Worth area: <https://gows.dfwhc.org/hcs/hospitalsearch.asp>

These are in addition to the American Red Cross National Next Of Kin Registry to help family members reunite: <http://www.pleasenotifyme.org/>

Medicaid/Disaster Relief Medicaid

At this moment, no plan for special short-term Medicaid Disaster Relief provisions has been announced. Texas officials hoped to be able to quickly implement a program with a simple streamlined application for short-term benefits that would cover most affected evacuees, but states are still waiting for federal Medicaid officials to make decisions. Absent these decisions, providers have been offered the awkward and cumbersome option of enrolling in Louisiana and Mississippi Medicaid programs (involving extensive paperwork) to bill for services to persons who were already enrolled in Medicaid in their home states.

HHSC has been taking evacuees' applications for assistance (medical and otherwise), accepting "self-declaration" where ID and other documents are not available. They will process the medical cases "as soon as final guidelines have been confirmed." Extended HHSC field office hours are in effect to accept and process applications and make referrals to local shelter and food resources.

Summarized below are what we know, some of the proposals being considered, and what we do not yet know. **First, what we know:**

- **As stated above, most health care providers are providing the care evacuees need right now, despite uncertainty about whether or how they will be paid.**
- Most gulf state residents who were already receiving Medicaid in their home states should be able to be enrolled in the state to which they were evacuated (e.g., Texas Medicaid).

And, many folks who now have no income can enroll for the first time in Texas. There are no residency restrictions in Medicaid that would delay enrollment.

- However, in Texas, as well as Louisiana and Mississippi, parents with dependent children cannot get Medicaid unless their incomes are extraordinarily low (i.e., less than \$188/month for a family of 3 in Texas), so once a relocated family gains any income, assistance would be lost under normal program rules (15 hours a week a \$5.15 per hour would put a parent with 2 children over the limit).
- Also, under federal Medicaid law, adults who have no children and are not disabled or pregnant cannot get Medicaid at all, no matter how poor they are, so many evacuees cannot get Medicaid if the usual program rules apply.
- Texas Medicaid has just announced that restored mental health counseling services for adults (eliminated in 2003) will not take effect until December 2005. Evacuees may need these services sooner.
- Finally, whether under normal Medicaid program rules or special rules, the cost to the state budget if significant numbers of evacuees are cared for (and paid for) under Texas Medicaid will be quite large.

What state Medicaid directors, elected officials and health advocates are proposing:

New York provided temporary medical coverage to nearly 350,000 low-to-moderate income persons affected by 9/11. This model has provided a starting point for proposals spearheaded by the Louisiana Congressional delegation. Key components are:

- 100% federal funding of a Temporary Disaster Relief Medicaid program, so the costs will be shared by the entire country.
- A program that can serve all evacuees in need, even if they would not have been covered under normal Medicaid rules (as explained above).
- Enrollment procedures that are simple and streamlined.

For more information, see the Kaiser Family Foundation's Daily Health Policy Report (http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=32425), and check for their daily updates.

To recap, what we do not know, but hope to learn soon:

- Whether evacuees will get special health relief, or will have to rely on existing Texas Medicaid programs which will exclude many in need;
- Whether mental health services will be immediately available for adult evacuees under Medicaid; and
- Whether Texas taxpayers will bear the costs of Medicaid provided to evacuees

Federal Centers for Medicare and Medicaid Services (CMS) has announced some helpful policies:

Last Friday (9/2/2005) CMS issued a press release with the following reassurances:

- Facilities may presume eligibility for Medicaid or Medicare (no proof required).
- CMS is working to facilitate interstate payment agreements for services provided to evacuees in other states.

- Services provided in good faith will be paid for “providers who cannot comply with normal program requirements.”
- Crisis care will be paid for, even to facilities not participating in Medicaid or Medicare.
- Dialysis in “alternative settings” will be paid.
- Medicare “may” pay for ambulance transfer costs.
- Normal prior authorization and out-of-network requirements for Medicaid, SCHIP, and Medicare can be waived.
- Licensed providers will be allowed to practice out of state “in stricken areas.”
- Relaxed HIPAA privacy rules will be allowed to let family members access information regarding their loved ones’ health conditions.
- Hospitals may use beds licensed for special purposes (e.g., psychiatric beds) for acute care if needed.
- EMTALA rules governing the transfer of patients to other hospitals are relaxed for hospitals affected by the disaster.

See <http://www.cms.hhs.gov/katrina/> for more information and CMS updates.