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State/Territory Name: Texas

State Plan Amendment (SPA) : 25-0031

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
230 South Dearborn
Chicago, Illinois 60604



Financial Management Group

November 7, 2025

Director: Emily Zalkovsky
State Medicaid/CHIP Director
Health and Human Services Commission
Mail Code: H100
Post Office Box 13247
Austin, Texas 78711

RE: TN 25-0031

Dear Director: Emily Zalkovsky,

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed Texas state plan amendment (SPA) to Attachment 4.19-B 25-0031, which was submitted to CMS on August 26, 2025. The purpose of this amendment is to update Personal Care Services (PCS) reimbursement methodology.

We reviewed your SPA submission for compliance with statutory requirements including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of September 1, 2025. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Monica Neiman via email at Monica.Neiman@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 5 0 0 3 1
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2. STATE

T X
--3 PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACTTO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

September 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

Social Security Act §§ 1905(a)(24)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a FFY 2025 \$ 129,617

b FFY 2026 \$ 1550998

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-B
Page 25k.28 PAGE NUMBER OF THE SUPERSEDED PLAN
SECTION OR ATTACHMENT (If Applicable)Attachment 4.19-B
Page 25k.2 (TN 23-0013)

9. SUBJECT OF AMENDMENT

The purpose of the amendment is to update Personal Care Services (PCS) reimbursement rates by implementing the 2026-27 General Appropriations Act, Senate Bill 1, 89th Legislature, Regular Session, 2025 (Article 11, Health and Human Services Commission, Rider 23). Rider 23 provides appropriations for HHSC to increase the wage for personal attendants under Medicaid and other programs administered by HHSC, including PCS, to an average of \$13.00 per hour. The requested effective date for the proposed amendment is September 1, 2025.

10 GOVERNOR'S REVIEW (Check One)



GOVERNOR'S OFFICE REPORTED NO COMMENT

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED: Sent to Governor's Office this
date. Comments, if any, will be forwarded upon receipt.

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Emily Zalkovsky

13. TITLE

State Medicaid Director

14. DATE SUBMITTED

August 26, 2025

15. RETURN TO

Emily Zalkovsky
State Medicaid Director
Post Office Box 13247, MC: H-100
Austin, Texas 78711

FOR CMS USE ONLY

16. DATE RECEIVED

August 26, 2025

17. DATE APPROVED

November 7, 2025

PLAN APPROVED- ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

September 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Todd McMillion

21. TITLE OF APPROVING OFFICIAL

Director, Division of Reimbursement Review

22. REMARKS

Pen and ink change processed by CMS and approved by the state on box 5 to only include the applicable 1905(a)(24) medicaid benefit category.

32. Reimbursement Methodologies for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services - continued

(14) Personal care services (PCS)

- a) Services reimbursable only for Medicaid-eligible clients under age 21 include those delivered by the following provider types:
 - 1) School districts in accordance with Item 32(17) of Attachment 4.19-B, relating to the reimbursement methodology for School Health and Related Services (SHARS).
 - 2) Home health agencies and other PCS providers delivering PCS in the client's home, excluding services delivered through the Consumer Directed Services service delivery model, are reimbursed the lesser of the provider's billed charges or fees established by the Texas Health and Human Services Commission (HHSC) based on an analysis of relevant cost or fee surveys. Payments based on a fee schedule are made for these services.
- b) All fee schedules are available through the agency's website as outlined on Attachment 4.19-B, page 1.
- c) Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of EPSDT PCS. The agency's fee schedule rates were set as of September 1, 2025 and are effective for services provided on or after that date. The fee schedule was posted on the agency website on September 1, 2025. All rates are published on <https://pfd.hhs.texas.gov/long-term-services-supports>.

TN: 25-0031 Approval Date: 11/07/2025

Supersedes TN: 23-0013 Effective Date: 09/01/2025