

Data Element Guide

Thriving Texas Families Program

Family Health Services

Version 2.01

Revised June 2024



TEXAS
Health and Human
Services

Table of Contents

1. Overview	1
2. Client Demographic Information	2
3. Client Services.....	6
4. Care Coordination – Referrals.....	10
5. Care Coordination – Enrollments	11
6. TTF Client Outcomes- Applicable to TTF Pilot Projects only.	12
7. TTF Outcomes Achieved- Applicable to TTF Pilot Projects only.....	14
8. TTF Performance Measure Methodology	15
9. Legislative Budget Board and Other Reporting	16
10.Updates and Revisions	17

1. Overview

This document serves as a data collection instructional guide for HHSC funded Alternatives to Abortion (TTF) Providers. The guide discusses each required TTF data element and the valid responses accepted by HHSC.

This guide has four sections which correspond with the required reporting sections in the TTF reporting workbook:

- Client Demographic Information
- Client Services
- Care Coordination: Referrals
- Care Coordination: Enrollments

Additionally, the document contains information regarding client type, reimbursable services, expectations on methodology and other guidance relevant to the TTF Program.

In each section you will find a description of each data element and an overview of the acceptable responses for each data element. Should you wish to provide any additional details about provided services beyond what is defined in this document, HHSC encourages you to reach out to your assigned contract manager to share information or include supplementary documentation with your monthly data submissions.

This guide also provides the methodology HHSC uses to determine the following performance measures and for reporting to the Texas Legislative Budget Board.

- Unduplicated number of clients
- Number of TTF Services provided
- Percent of clients referred to and enrolled in Medicaid
- Percent of clients referred to and enrolled in Nurse Family Partnership

2. Client Demographic Information

Year	Month (1-12)	Client ID	Gender (use drop down list)	Returning Client (1=Yes, 0=No)	Marital Status (use drop down list)	Client Type (use drop down list)	Public Health Region (input the number of the Health	County (enter name of county)	Client's age at initial enrollment in A2A (years)	Gestational age at enrollment (number of	Ethnicity (use drop down list.)	Number of existing children	Highest Level of Education Completed
------	--------------	-----------	-----------------------------	--------------------------------	-------------------------------------	----------------------------------	--	-------------------------------	---	--	---------------------------------	-----------------------------	--------------------------------------

Data Elements and Accepted Responses

While contractors may import data into the TTF reporting workbook, the upload process must ensure that required data elements adhered to, including the options for drop-down responses.

- Year – This is the reporting by fiscal year.
- Month – This is the reporting month.
 - Accepted responses – This field is required and must be numerical and correspond with the calendar year. For example, when reporting data for January this column would reflect “1”.
- **Client ID** – The client ID is a unique number assigned to the client upon entering the organization for allowable services and is assigned to the client by the TTF Provider. The client will keep this same client ID number throughout the fiscal year even if they return for additional services. For clients who receive TTF services in a subsequent fiscal year, they may or may not receive a new client ID number.
 - Accepted responses - This field is required and must be a unique alphanumeric or numeric value or a combination of the two.
- **Client's age at initial enrollment in TTF (years)** – The age of the client at the first time of service within the fiscal year. Record the age of the client.
 - Accepted responses – This field is required, and the age must be reported as a numerical value. If the client does not disclose their age, enter “unknown.” This field must capture the age of the client at the initial enrollment for the fiscal year.

- **Client Type** – Grantee shall provide services to individuals who are Texas residents and meet one of the following Client types:
 1. A pregnant woman;
 2. The biological father of an unborn child;
 3. The biological parent of a child who is 36 months of age or younger;
 4. An adoptive parent of a child who is 36 months of age or younger;
 5. An approved adoptive parent of an unborn child;
 6. A former Client who has experienced the loss of a child;
 7. A parent or legal guardian of a pregnant minor who is a program Client;
 8. Parent, legal guardian, or adult caregiver of a child who is 36 months of age or younger; or
 9. A parent who experienced a miscarriage or loss of a child not more than ninety (90) calendar days before the parent begins participation in the services offered through the program.
 - Accepted Responses - This field is required and must contain the client type as is it is written in the TTF reporting workbook drop down menu. No deviations from client type will be accepted.

- **County** – The Texas county where the client resides.
 - Accepted responses – This field is required and must contain the county of the client’s residence. Be sure to use the region as determined by HHSC

- **Ethnicity** – This is determined by available ethnicities as described in the drop-down menu.
 - Accepted Responses – No deviations from ethnicity will be accepted

- **Gender** – Is for the TTF clients only.
 - Accepted Responses - Male or Female, no deviations from gender will be accepted

- **Gestational age at enrollment (number of weeks)** – For clients who are pregnant when first receiving TTF services, please enter the gestational age at the first time of service within the fiscal year. For clients who are not pregnant, enter “0”. If the client becomes pregnant, then it will require an update to the “client type” designation which will include the inclusion of gestational age.
 - Accepted Responses – Gestational age should be designated as number of weeks only; no additional metric should be used (e.g., Gestational Age = 7 (weeks) not 7.4 (weeks))

- **Highest Level of Education** – Only utilize data descriptors as identified in the drop-down menu.
 - Accepted Responses – Less Than High School, Some High School, High School Diploma / GED, Some College Or Some Post-Secondary Vocational School, College Degree or Post-Secondary Vocational Diploma or Certificate, Some Post-Graduate, and Post-Graduate Degree.

- **Marital Status** – Only utilize data descriptors as identified in the drop-down menu.
 - Accepted Responses - Single, Married, Divorced or Widowed, no deviations from marital status will be accepted.

- **Number of Existing Children** – This is for TTF clients who meet the definition as determined by “client type.”
 - Accepted Responses – This should be reflective of number of children by household.

- **Public Health Region (PHR)** – Identify the public health region in which the client resides. Information on the regions can be found in the [Texas Health and Human Services Regional Map](#).
 - Accepted Responses – This value should be numerical and correspond with the region number.

- **Returning Client** – Indicate whether the client is a returning client or not. A returning TTF client is someone who has already been reported to HHSC with services for the current fiscal year and is now continuing to receive services. This could be continual services or a client who stopped receiving services and is now returning within the same fiscal year.
 - Accepted Responses – Enter 1 (yes) to indicate the TTF client is a returning client and 0 (No) to indicate they are not a returning client.

3. Client Services

	Counseling/Mentoring					Educational Materials					Classes				
A	B1	B2	B3	B4	B5	C1	C2	C3	C4	C5	D1	D2	D3	D4	D5
Call center/hotline (phone triage, call coordination)	Pregnancy	Parenting	Adoption	Life Skills	Employment Readiness	Pregnancy	Parenting	Adoption	Life Skills	Employment Readiness	Pregnancy	Parenting	Adoption	Life Skills	Employment Readiness

Data Elements and Accepted Responses

If there are any questions or you need technical guidance, on all data elements specified in the RFA section 2.7.1 Monthly Reports (TTF reporting workbook and TTF reporting workbook Supplement). Please contact the TTF program at hdisTTFcontractor@hhs.texas.gov.

Guidance for TTF Required Core Client Services

- Counseling/Mentoring** – This service should be reported when providing a client service such as professional counseling, peer therapy, and any other form of therapeutic treatment delivered by qualified care coordinator as defined in 2.6.6 in the RFA. This includes mentoring, understanding and support, advocacy, and/or case management related to any one or more of the following five categories:
 1. Pregnancy
 2. Parenting
 3. Adoption
 4. Life Skills
 5. Employment Readiness

- Accepted Responses- Enter 0 (zero) for no service and 1 (one) for each instance that the client received the service.

Additional Guidance:

Time spent in an active counseling session with an TTF client discussing TTF-billable topics. Time spent discussing spiritual topics is not an allowable TTF services and should not be reported as TTF counseling time but non-TTF time. It is important to remember the distinction between counseling and class time when completing the TTF reporting workbook.

- **Educational Information**- This service should be reported when providing a client with educational information at each interaction or instance of providing a client with educational information related to any one or more of the following five categories:

1. Pregnancy
2. Parenting
3. Adoption
4. Life Skills
5. Employment Readiness

- Accepted Responses - Enter 0 (zero) for no service and 1 (one) for each instance that the client received the service.

Additional Guidance:

If you provide educational information covering two or more of the categories below, that is considered one instance. If the client requires additional educational information at a subsequent interaction, that would be considered an additional service.

- **Classes**- This service should be reported when providing a client with classes covering topics which can include but are not limited to:
 - ✓ Adoption education;
 - ✓ Alcohol/substance use disorder;
 - ✓ Babyproofing the home;
 - ✓ Budgeting for the family;
 - ✓ Car seat training;
 - ✓ Childbirth;
 - ✓ Child development;

- ✓ Child immunizations;
- ✓ Healthy Relationships;
- ✓ Infant/child nutrition;
- ✓ Infant CPR;
- ✓ Newborn care;
- ✓ Parenting;
- ✓ Postpartum care;
- ✓ Postpartum depression;
- ✓ Postpartum nutrition;
- ✓ Prenatal exercise;
- ✓ Prenatal nutrition;
- ✓ Safe sleep for babies;
- ✓ Smoking cessation; and
- ✓ Stress management.

- Accepted Responses- Enter 0 (zero) for no service and 1 (one) for each instance that the client received the service.

Additional Guidance:

Classes can be provided either individually or in a group setting, web-based or in-person) related to any one or more of the following five categories:

1. *Pregnancy*
2. *Parenting*
3. *Adoption*
4. *Life Skills*
5. *Employment Readiness*

Time spent preparing for an TTF-billable class session or completing administrative tasks (e.g., paperwork or data entry) associated with the class session are considered reimbursable services.

- **Non-medical Goods and Services**- This service should be reported when providing a client with non-medical goods and services that meet the immediate or short-term needs of the client and that directly support or promote childbirth. Non- medical goods and services **may include but are not limited to** goods or services that meet the clients' short-term needs related to food, clothing, and transportation including cribs and car seats which meet the current safety standards for use; maternity clothes; baby clothes;

formula; baby food; diapers and any non-medical goods or services that support woman in her decision to breastfeed.

Additional Guidance:

A non-medical goods or service is (1) one service regardless of the number of items provided per instance.

- **Call-center for information or to schedule appointments**- This service should be reported when a call comes into the hotline number and an appointment is scheduled and/or information is given related to one or more of the following five categories of TTF services:
 1. Pregnancy
 2. Parenting
 3. Adoption
 4. Life Skills
 5. Employment Readiness
 - Accepted Response – Enter 0 (zero) for no service and 1 (one) for each instance that the client received the service.

Additional Guidance:

Call-center information and the scheduling of appointments are to be reported as one instance regardless of the length of time or amount of information provided. (e.g., When a client calls to request information on TTF provider services, and subsequently obtains an appointment, this would be counted as one call center service. If a client calls to schedule a meeting and receives a referral by phone, this would be counted as one call center service and one referral service.

Additionally, each service should be documented in the TTF reporting workbook.

All call-center information and scheduling appointments that that are reported must be for direct TTF services. Non TTF related calls may not be counted, these include but are not limited to hang ups, prank calls, wrong numbers, and calls seeking non-TTF services.

4. Care Coordination – Referrals

Care Coordination: Referrals to HHSC programs and services
(0 = Not Referred, 1 = Referred)

Medicaid	Children's Health Insurance Program (CHIP)	Temporary Assistance to Needy Families (TANF)	Supplemental Nutrition Assistance Program (SNAP)	Nurse Family Partnership (NFP)	Women Infants and Children (WIC)	Early Childhood Intervention (ECI)	Healthy Texas Women (HTW)	Title V: Child Health and Dental Program	Title V: Prenatal and Dental Program	Primary Health Care (PHC)	Family Violence Program (FVP)	Family Planning Program (FPP)	Healthy Marriage Program	Medical Transportation Program (MTP)	Texas Workforce Commission (TWC)	OAG Child Support Division
----------	--	---	--	--------------------------------	----------------------------------	------------------------------------	---------------------------	--	--------------------------------------	---------------------------	-------------------------------	-------------------------------	--------------------------	--------------------------------------	----------------------------------	----------------------------

- Referrals for TTF clients should be driven by client need. Referrals provided under the TTF program must align directly with a client need and be something in which the client is or may be eligible for. Referral should, when possible, provide the client with detailed information about the program and how to apply. When possible and the client desires, TTF contractors/providers will assist the client with completing and submitting the program application.
 - Accepted Responses- All responses for referrals are to be reported through the drop-down menu, indicating "0" for Not Referred and "1" for Referred. This ensures the spreadsheet captures the various types of referrals a client may have received throughout the reporting period.

Additional Guidance:

A client referral can only be counted if no previous referral has been made and active. (e.g., if a client discloses, they already have a referral to WIC, the referral cannot be counted for referral or enrollment)

5. Care Coordination – Enrollments

Care Coordination: Enrollment in HHSC programs and services
(0 = Not Enrolled 1 = Enrolled, unless otherwise noted)

Medicaid	Children's Health Insurance Program (CHIP)	Temporary Assistance to Needy Families (TANF)	Supplemental Nutrition Assistance Program (SNAP)	Nurse Family Partnership (NFP)	Women Infants and Children (WIC)	Early Childhood Intervention (ECI)	Healthy Texas Women (HTW)	Title V: Child Health and Dental Program	Title V: Prenatal and Dental Program	Primary Health Care (PHC)	Family Violence Program (FVP)	Family Planning Program (FPP)	Healthy Marriage Program	Medical Transportation Program (MTP)	Texas Workforce Commission (TWC)	OAG Child Support Division
----------	--	---	--	--------------------------------	----------------------------------	------------------------------------	---------------------------	--	--------------------------------------	---------------------------	-------------------------------	-------------------------------	--------------------------	--------------------------------------	----------------------------------	----------------------------

- Client enrollment can be verified with direct enrollment acknowledgement from the client, or with verification from the associated program.

All responses for enrollments are to be reported through the drop-down menu. This ensures the spreadsheet captures the various types of enrollments a client may have received throughout the reporting period. To confirm enrollment status, contractors should ask the client and/or the associated program about the outcome of their referral to each relevant program.

- Accepted Responses – All responses for enrollments are to be reported through the drop-down menu, indicating "0" for Not Enrolled and "1" for Enrolled.

6. TTF Client Outcomes- Applicable to TTF Pilot Projects only.

Client Outcomes				
Pre Survey Performance Outcomes (0 = Survey Not Taken; 1 = Survey Taken)	Post Survey Performance Outcomes (0 = Survey Not Taken; 1 = Survey Taken)	Client Status in Program (Drop Down)	If Applicable Reason For Dropping Program (Drop Down)	Self-Assessment Satisfaction Requirement Met (Drop Down)

- Client outcomes capture the survey and client status data. All responses should use the drop-down menu.

Survey outcomes allowable response will be reported as a "0" for survey not taken or "1" for survey taken in the drop-down menu.

Client status in program allowable response include drop-down options for clients that are/have "Active," "Completed Program," or "Dropped from Program."

If applicable, the reason for dropping program if a client has dropped from the program, a reason will need to be selected for the client. Active or complete clients will select the N/A option.

Accepted responses in the drop-down:

N/A (For Active and Completed Clients)
 Stopped Contact
 Too Time Consuming
 No Longer Interested
 Miscarried/Pregnancy Loss
 Other

Self-Assessment Satisfaction Requirement Met Upon exit or completion of the program, grantees will report for each client, whether the client felt the program met satisfactory needs. Active or dropped clients will select the N/A option.

Accepted responses in drop-down: "Yes," "No," or "N/A (For Active or Dropped Clients.)"

7. TTF Outcomes Achieved- Applicable to TTF Pilot Projects only.

Outcomes Achieved <i>(1=Outcome Achieved, 0= Outcome not Achieved)</i>					
Improved Child Health & Development	Assisted family in achieving economic self-sufficiency & economic stability	Increased workforce participation	Promoted marriage & family formation for participating parents	Supported healthy pregnancy & improved child health	Other outcome achieved

- The outcome achieved section is for all clients who have completed the program. Grantees must report for each client whether each outcome was achieved through the course of the program. Grantees may have other outcomes that are measured as part of the TTF pilot project. If so, Grantee will indicate whether those other outcomes have been achieved.
- Accepted responses: All responses for outcomes achieved are to be reported using the drop-down menu, indicating "0" for outcome not achieved or "1" for outcome achieved.

Additional Guidance:

A client who is active or has dropped from the program should be marked as "0" for all outcomes.

8. TTF Performance Measure Methodology

HHSC TTF Program methodology for determining unduplicated client count:

- Unduplicated clients are counted across the current fiscal year (September-August); therefore, all clients are considered new beginning September regardless of whether they were receiving services in the prior month.
- All duplicated clients are removed within the reporting quarter to obtain the quarterly unduplicated client count and across the entire fiscal year to obtain the annual unduplicated count.

HHSC TTF Program methodology for determining the percentage of clients referred and enrolled in Medicaid and NFP

- The total number of clients referred to either program is divided by the total enrolled to obtain the percentage of successful enrollments (i.e., 16 total referrals and 4 successful enrollments is 25%)

9. Legislative Budget Board and Other Reporting

HHSC TTF Program methodology for purposes of reporting unduplicated number of clients to the Legislative Budget Board and other reporting:

Unduplicated clients are counted across the current fiscal year (September-August); therefore, all clients are considered new beginning September regardless of whether they were receiving services in the prior month.

- All duplicated clients are removed within the reporting quarter to obtain the quarterly unduplicated client count and across the entire fiscal year to obtain the annual unduplicated count.

HHSC TTF Program methodology for purposes of reporting number of services provided to the Legislative Budget Board and other reporting.

- The total number of services provided under each service category is totaled across the reporting quarter and fiscal year.

10. Updates and Revisions

HHSC reserves the right to amend the data element guide regarding updates and revisions.

Revision Log:

Revision Version	Summary of Changes	Approver	Approval Date
1.0	New TTF data guide	Crystal Starkey, FYSS Associate Commissioner	11/23/2022
2.0	Updated the list of eligible client types, highest level of education and added TTF pilot project outcome reporting structure	Crystal Starkey, FYSS Associate Commissioner	6/4/2024