Women’s Health and family planning programs provide low-income women with preventive health screenings, contraceptive services, and certain treatment services. The federal and state governments have funded family planning services since the 1960s, both for their public health benefits and to help contain pregnancy-related Medicaid costs. In fiscal year 2014, 53.9% percent of all births to Texas residents were paid by Medicaid.

Texas women’s health and family planning programs historically have been funded with General Revenue (GR) Funds and a variety of Federal and Other Funds. Services initially were provided through two programs operated by the Department of State Health Services (DSHS): Family Planning and Breast and Cervical Cancer Screenings. A third program, the Medicaid Women’s Health Waiver operated by the Health and Human Services Commission (HHSC), was established in January 2007 and later became the state-funded Texas Women’s Health Program (TWHP). A fourth program, Expanded Primary Health Care (EPHC), was established at DSHS in fiscal year 2014. All DSHS programs were transferred to HHSC in 2015. In 2016, HHSC launched the Healthy Texas Women program, which combined services from EPHC and TWHP. At that time, the Family Planning program also was reconfigured to offer additional services. The 2016-17 General Appropriations Act includes $284.6 million in All Funds for women’s health, including $262.1 million in GR Funds. The portion of women’s health programs funded with GR funds increased from 11.7 percent in the 2006-07 biennium to 92.1 percent in the 2016-17 biennium.

In addition to these programs, low-income women may receive women’s health services, family planning services, and prenatal care through Medicaid or the Children’s Health Insurance Program (CHIP).
**BIENNIAL HIGHLIGHTS**

**ALL FUNDS**
- **2012-13**: $127.4 MILLION
  - GR: 25%
  - Federal/Other Funds: 75%
- **2014-15**: $217.4 MILLION
  - GR: 83%
- **2016-17**: $284.6 MILLION
  - GR: 92%

**Family Planning Reductions**
Legislative reductions to the Family Planning program cause a decline in both All Funds and GR appropriations.

**Medicaid Women’s Health Waiver reconfigured as Texas Women’s Health Program**
HHSC applies for, but does not receive, federal approval to continue the program as a Medicaid waiver because certain providers are prohibited from participating in the program, resulting in a loss of Federal Funds beginning in January 2013.

**Expanded Primary Health Care**
Program created
The new program is appropriated $100.0 million in GR Funds for the biennium.

**Shift to GR funding**
The proportion of programs funded by GR increases from 25% in the prior biennium to 80% as a result of: funding the new Expanded Primary Health Care Program with GR Funds, replacing lost Family Planning Program Title X Federal Funds with GR Funds, and a full biennium of operating the Texas Women’s Health Program without federal funding.

**Transition to HHSC**
Family Planning and Expanded Primary Health Care funding and operations transferred from Department of State Health Services to HHSC.

**New Healthy Texas Women Program**
July 1, 2016, HHSC consolidated the Expanded Primary Health Care Program and Texas Women’s Health Program into the Healthy Texas Women Program, and revamped the Family Planning Program with additional services.

**Women’s health services appropriations include additional $50.0 million GR Funds, which can be allocated between programs.**

**PROGRAMS AT A GLANCE**

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>EST.</th>
<th>PROVIDES</th>
<th>AVAILABLE TO</th>
<th>INCOME CAP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HEALTHY TEXAS WOMEN</strong> (NEW PROGRAM)</td>
<td>2016</td>
<td>Family planning, preventive health services, and immunizations</td>
<td>Female US citizens or eligible immigrants of childbearing age (15-44)</td>
<td>200% FPL</td>
</tr>
<tr>
<td><strong>FAMILY PLANNING</strong> (NEW PROGRAM)</td>
<td>2016</td>
<td>Family planning, preventive health services, immunizations, and limited prenatal care</td>
<td>Texas residents under the age of 64</td>
<td>250% FPL</td>
</tr>
<tr>
<td><strong>BREAST &amp; CERVICAL CANCER SERVICES</strong></td>
<td>1991</td>
<td>Breast and cervical cancer screening and cervical dysplasia treatment</td>
<td>Women age 40-64 for breast screening, women age 21-64 for cervical screening, and some coverage for certain women 65+</td>
<td>200% FPL</td>
</tr>
</tbody>
</table>