



# **Delivery of Health and Human Services to Young Texans**

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**As Required by  
Texas Government Code, Section  
531.02492(b)**

**Texas Health and Human Services  
December 2024**



**TEXAS**  
Health and Human  
Services

# Table of Contents

<b>Executive Summary .....</b>	<b>3</b>
<b>1. Introduction .....</b>	<b>4</b>
<b>2. Texas Child Health Programs.....</b>	<b>5</b>
Financial and Nutrition Assistance.....	5
Health Insurance and Health Care Coverage .....	9
Developmental and Disability Services .....	23
Community-Based Behavioral Health Programs and Services .....	30
Health Checks and Prevention.....	34
Support Services .....	41
<b>3. Child Health Partnerships .....</b>	<b>45</b>
Affinity Groups .....	45
Children and Youth with Special Health Care Needs Systems Development Group .....	46
Community Resource Coordination Groups.....	46
Help Me Grow Texas .....	47
Newborn Screening Advisory Committee .....	47
Policy Council for Children and Families .....	47
Sickle Cell Task Force.....	47
State Child Fatality Review Team Committee and Local Teams .....	48
State Medicaid Managed Care Advisory Committee’s Subcommittee on Children and Youth with Medical, Behavioral, and Developmental Complexity .....	48
Texas Collaborative for Healthy Mothers and Babies .....	49
Texas System of Care.....	49
<b>4. Conclusion.....</b>	<b>51</b>
<b>List of Acronyms .....</b>	<b>52</b>

# Executive Summary

The Delivery of Health and Human Services to Young Texans report, required by Texas Government Code, [Section 531.02492\(b\)](#), discusses services for children under six years of age. This biennial report updates the previous December 2022 report and covers the services offered in the Health and Human Services (HHS) system.

HHS' mission is to serve Texas, and its vision is to make a positive difference in the lives of the people we serve. Protecting and enhancing the health, safety, and well-being of young children is essential to carrying out this mission. HHS leads many programs and efforts that impact the different factors affecting child health. While most programs focus on providing medical and supportive services, other programs help families with nutrition and financial assistance. Additional programs prevent illness and injuries by promoting healthy behaviors and safe environments.

To maximize the reach and effectiveness of services to young Texans, program areas continue to form collaborations with other state and local programs and organizations.

This report highlights the unified and collaborative approach to delivering services and improving the health of Texas children. This report contains the following:

- Texas Child Health Program Briefs: Summary information on programs serving children under six years of age, including program descriptions, eligibility requirements, and contact information.
- Partnerships to improve child health, including program collaborations and structured state and local efforts.

Creating a healthy foundation for young Texans to thrive is vital. In partnering with families and other organizations, HHS delivers services essential to building this foundation.

# 1. Introduction

Texas Government Code, [Section 531.02492\(b\)](#) requires the Texas Health and Human Services Commission (HHSC) to report biennially on HHS agencies' efforts to provide services to children younger than six years of age. HHSC may include recommendations on improving collaboration and coordination between programs serving children. HHSC must notify the governor, lieutenant governor, speaker of the house, comptroller, and appropriate legislative committees upon publication of the report.

This report contains information from the two HHS system agencies: HHSC and the Department of State Health Services (DSHS). It provides information about the health of children in Texas, programs serving children, and collaborative efforts contributing to the advancement of child health. In addition, while the Department of Family and Protective Services (DFPS) is an independent agency outside of the HHS system, because it provides services to children under the age of six, the report also includes information from DFPS.

## 2. Texas Child Health Programs

This report contains information on approximately 40 programs that provide services to Texas children under six years of age. These summaries include information on the programs' purpose and eligibility requirements and highlight some recent programmatic accomplishments.

To help organize the information, this report classifies programs by their primary function: 1) financial and nutrition assistance; 2) health insurance and health care coverage; 3) developmental and disability services; 4) community-based behavioral health programs and services; 5) health checks and prevention; and 6) support services. Some programs may provide services that fit multiple categories but will only be included once.

### Financial and Nutrition Assistance

#### Supplemental Nutrition Assistance Program

- Administered by HHSC

#### Program Description

The Supplemental Nutrition Assistance Program (SNAP) provides nutrition assistance to low-income families and individuals. SNAP households include all individuals who reside at the same address and purchase and prepare food together. Recipients receive a monthly financial allotment based on income and household size to purchase food items. Most benefit periods last six months but can be as short as one month or as long as three years. Benefits are provided monthly and can be used to purchase food, seeds, and plants that produce food for the household to eat. The purchase of certain items is prohibited under standard guidelines, including vitamins, medicine, hot foods, alcohol, and tobacco. SNAP food benefits are put on an electronic benefits transaction card, known as the Lone Star Card, that can be used like a credit card at any store that accepts SNAP. People can also use their SNAP benefits to buy food online from certain retailers.

There are multiple channels available for individuals to apply for benefits, including:

- Online at [YourTexasBenefits.com](https://YourTexasBenefits.com).

- In person at a local benefits office. There are over 280 benefit offices and processing centers. To find a local benefits office, visit [Your Texas Benefits – Screener](#).
- Through a network of over 1,600 community partners. To find a local community partner, visit [Texas Community Partner Program](#).
- Getting information by calling 2-1-1 and selecting Option 2.
- Faxing an application to 1-877-447-2839.
- Mailing an application to HHSC, PO Box 149024, Austin, TX 78714-9968.

## Eligibility Requirements

**Table 1. Summary of SNAP Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Any age (see below regarding benefit timeframe)
Residency/Citizenship	Citizen or qualified eligible immigrant
Income/Assets	The gross income test of 165 percent of the federal poverty level (FPL) and net monthly income of 100 percent of FPL. Countable resources cannot exceed \$2,200. Certain resources (the full amount of one prepaid burial insurance policy per household member, up to \$15,000 for highest valued countable vehicle) are exempt. Net monthly income is determined by subtracting certain deductions such as dependent care, medical, and housing costs.
Diagnosis	Not applicable
Other	Unless exempt, able-bodied adults without dependents ages 18 through 54 may only receive SNAP benefits for three months in a three-year period if they do not meet work requirements. Persons with a disability or those caring for a child under six may be exempt from work requirements.

## Special Supplemental Nutrition Program for Women, Infants and Children

- Administered by HHSC

### Program Description

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a nutrition program that helps low-income pregnant women, postpartum and breastfeeding women, infants, and young children up to the age of five receive

tailored nutrition education, referrals to essential health and community resources, and supplemental nutritious foods. WIC foods meet the nutritional needs of participants and are rich in protein, iron, vitamins C and A, and calcium, which are vital to healthy development during pregnancy and early childhood. The Texas WIC program significantly improves short- and long-term health outcomes of Texans by providing families the education, support, training, and supplemental foods needed during key stages of child development.

WIC serves approximately 780,000 women, infants, and children each month. Benefits are available in all 254 Texas counties through 62 contracted local agencies that operate over 500 clinics or mobile sites. During the 2026-27 biennium, WIC will transition electronic benefits processing to an online system. This will modernize the Texas WIC program and reduce the need for participants to return to a physical clinic to have benefits re-issued or changed on the Texas WIC electronic benefits transfer card. The program expects this change will reduce barriers to WIC participation, supporting participant enrollment and retention efforts. Individuals can apply for WIC by:

- Visiting a WIC clinic in person. Applicants can use the [WIC Office Locator](#) to find the closest location.
- Starting an application over the phone by calling 800-942-3678.
- Starting an application online at [Apply for WIC | Texas WIC](#).

**Table 2. Summary of WIC Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Pregnant, breastfeeding, or postpartum women; infants; children under 5 years of age.
Residency/Citizenship	Texas resident
Income	Income at or below 185 percent of the FPL or be eligible for SNAP, Temporary Assistance for Needy Families (TANF), or Medicaid.
Diagnosis	Not applicable
Other	Applicants must meet nutrition risk eligibility requirements, including having a medical or dietary risk. For example, a history of poor pregnancy outcomes, underweight, iron-deficiency anemia, or poor eating habits leading to poor nutrition or health status are medical or dietary risks.

## Temporary Assistance for Needy Families

- Administered by HHSC

## Program Description

TANF provides temporary financial assistance to needy children and their parents or relative caretakers with whom they live. The program's purpose is to: ensure that children are cared for in their own homes; support parents transitioning to self-sufficiency; prevent out-of-wedlock pregnancies; and encourage the formation and maintenance of two-parent families. One form of TANF assistance is a monthly cash benefit issued through the Lone Star Card. Other forms of TANF assistance include One-Time Temporary Assistance for Needy Families (OTTANF) and OTTANF for relatives, which are both \$1,000 supplemental payments. OTTANF can be received once in a 12-month period and OTTANF for relatives can be received once in a lifetime. TANF also provides an annual \$30 school subsidy payment per child that can be used to purchase clothing, school supplies, and other items needed for school.

There are multiple channels available for individuals to apply for benefits, including:

- Online at [YourTexasBenefits.com](https://YourTexasBenefits.com).
- In person at a local benefits office. There are over 280 benefit offices and processing centers. To find a local benefits office, visit [Your Texas Benefits - Screener](#).
- Through a network of over 1,600 community partners. To find a local community partner, visit [Texas Community Partner Program](#).
- Getting information by calling 2-1-1 and selecting Option 2.
- Faxing an application to 1-877-447-2839.
- Mailing an application to HHSC, PO Box 149024, Austin, TX 78714-9968.

## Eligibility Requirements

**Table 3. Summary of TANF Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Family must include a child under the age of 18 living in the household or an 18-year-old who is a full-time student who expects to graduate high school before or during the month of the child's 19th birthday. The child must live with an adult relative, such as a parent, stepparent, grandparent, sibling, aunt, uncle, or cousin.
Residency/Citizenship	Citizen or qualified eligible immigrant



Eligibility Criteria	Requirements
Income/Assets	Resource limits are \$1,000 and income limits are based on household size according to the following needs tests: Budgetary Needs Test: Gross income minus allowable deductions, such as dependent care and work expenses. Recognizable Needs Test: Net income (from Budgetary Needs Test) minus 1/3 or 90 percent earned income deduction.
Diagnosis	Not applicable
Other	Personal Responsibility Agreement and complete an interview with HHSC. The Personal Responsibility Agreement includes requirements related to employment, child support, school attendance, alcohol/drug abuse, medical care for child, and parenting skills.

## Health Insurance and Health Care Coverage

HHSC operates several programs that provide health care coverage for Texas children, including Medicaid fee-for-service (FFS) and managed care programs, the Children’s Health Insurance Program (CHIP), dental programs, and other programs for specific populations. While a small number of children remain in FFS Medicaid, the vast majority of children in Medicaid receive services through a managed care organization (MCO). Enrollment in one of these programs depends on the criteria outlined for each program.

### Children’s Medicaid

- Administered by HHSC

#### Program Description

Children’s Medicaid is a jointly funded state-federal health care program administered under Title XIX of the Social Security Act. In Texas, Medicaid primarily serves low-income families, children, related caretakers of dependent children, pregnant women, people aged 65 and older, and adults and children with disabilities. Medicaid also provides coverage for people in need of chronic care or long-term services and supports (LTSS). Children’s Medicaid recipients, whether enrolled in the traditional FFS model or managed care delivery model, receive the same set of Medicaid state plan services.

Children’s Medicaid services include the following: acute care, pharmacy services, behavioral health, and LTSS, which are primarily delivered through managed care. Children enrolled in any Medicaid program receive services through the Early and Periodic Screening, Diagnosis, and Treatment benefit, known as Texas Health Steps

(THSteps), and the Comprehensive Care Program (CCP), an expanded THSteps benefit. THSteps provides preventive health and comprehensive care services consisting of periodic medical and dental checkups and preventive care such as immunizations, laboratory screenings, oral evaluations, and fluoride varnish. There are multiple channels available for individuals to apply for benefits including:

- Online at [Your Texas Benefits.com](https://www.yourtexasbenefits.com).
- In person at a local benefits office. There are over 280 benefit offices and processing centers. To find a local benefits office, visit [Your Texas Benefits - Screener](#).
- Through a network of over 1,600 community partners. To find a local community partner, visit [Texas Community Partner Program](#).
- Applying by phone by calling 2-1-1 and selecting Option 2.
- Faxing an application to 1-877-447-2839.
- Mailing an application to HHSC, PO Box 149024, Austin, TX 78714-9968.

There are four major managed care programs serving Medicaid-eligible children:

- State of Texas Access Reform (STAR)
- STAR Health
- STAR Kids
- Children’s Medicaid Dental

This report provides information about each of these programs in the subsequent program briefs.

## **Eligibility Requirements**

To be eligible for Medicaid, a child will typically meet one of the following categories:

- Low-income family;
- In state conservatorship<sup>1</sup>; or

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<sup>1</sup> DFPS is the state agency granted authority to administer child protective services in Texas. All children in DFPS conservatorship are eligible to receive health services through Texas Medicaid.

- Have a qualifying disability.

Table 4 provides information about the Medicaid eligibility criteria for each of these categories. Once a child is eligible for Medicaid, they will receive services through the service model matching their eligibility category, most likely through one of the managed care programs (e.g., STAR, STAR Health, or STAR Kids). However, there is a small percentage of children who do not enroll in a managed care program and continue to receive services through traditional FFS Medicaid.

**Table 4. Summary of Medicaid Eligibility Criteria Applicable to Children.**

<b>Eligibility Criteria</b>	<b>Eligibility Category: Low-income, non-disabled children</b>	<b>Eligibility Category: Children in state conservatorship</b>	<b>Eligibility Category: Children with disabilities</b>
Age/Family Status	Under age 19	Under age 21 (children in state conservatorship) or under age 22 (adults in voluntary foster placement)	Under age 21 (children applying for waiver programs) or under age 19 (children applying for Medicaid Buy-In for Children)
Residency/Citizenship	Texas resident who is a U.S. citizen or a lawfully residing non-citizen	Texas resident who is a U.S. citizen or a lawfully residing non-citizen	Texas resident who is a U.S. citizen or a qualified non-citizen

<b>Eligibility Criteria</b>	<b>Eligibility Category: Low-income, non-disabled children</b>	<b>Eligibility Category: Children in state conservatorship</b>	<b>Eligibility Category: Children with disabilities</b>
Income/Assets	<ul style="list-style-type: none"> <li>• Under age 1: 198 percent of FPL</li> <li>• Age 1 to 5: 144 percent of FPL</li> <li>• Age 6 to 18: 133 percent of FPL</li> </ul> <p>A standard income disregard is deducted from financial eligibility equivalent to 5 percentage points of FPL.</p>	Not applicable	<ul style="list-style-type: none"> <li>• Supplemental Security Income (SSI): 74 percent FPL (100 percent SSI federal benefit rate)</li> <li>• Medicaid Buy-In for Children for children age 18 and under with gross family income not more than 300 percent FPL</li> <li>• Medicaid Buy-In for working individuals of any age with disabilities and an earned income less than 250 percent FPL</li> <li>• Children residing in a community-based intermediate care facility for individuals with an intellectual disability (ICF/IID) or a nursing facility and children receiving waiver services with income not more than 222 percent FPL (300 percent SSI federal benefit rate)</li> </ul> <p>Individuals are also subject to an asset test.</p>
Diagnosis	Not applicable	Not applicable	Meets Social Security's definition of disability. Children receiving waiver services or nursing facility care must also meet medical necessity requirements for a nursing facility. Children receiving ICF/IID services in a community-based program or in a facility must meet level of care requirement.

<b>Eligibility Criteria</b>	<b>Eligibility Category: Low-income, non-disabled children</b>	<b>Eligibility Category: Children in state conservatorship</b>	<b>Eligibility Category: Children with disabilities</b>
Other	Have a Social Security number or apply for one	Have a Social Security number or apply for one	Have a Social Security number or apply for one

## **STAR Medicaid Managed Care Program**

- Administered by HHSC

### **Program Description**

STAR is the first and largest managed care program in Texas. Most children receiving Children’s Medicaid are enrolled in STAR. The program primarily covers children, pregnant women, and some families. STAR MCOs also provide service coordination to members with special healthcare needs. There are 16 MCOs delivering the STAR program across 13 STAR service areas. Members in the STAR program can access Medicaid benefits, such as the following: THSteps and CCP services; regular checkups at the doctor and dentist; prescription drugs and vaccines; hospital care and services; X-rays and lab tests, vision, and hearing care; case management services; access to medical specialists and mental health care; and treatment of special health needs and pre-existing conditions.

In addition to children, the STAR program serves pregnant women and includes prenatal visits, prescription prenatal vitamins, labor and delivery, and postpartum care. Adults caring for a related dependent child receiving Medicaid may themselves be eligible to receive Medicaid benefits through STAR.

### **Participation Requirements**

The following Medicaid-eligible populations can participate in STAR:

- Pregnant women and children with limited income
- Parents and caretaker relatives caring for a dependent child who is also receiving Medicaid
- Newborns
- Certain former foster care youth

## STAR Health

- Medicaid eligibility for children in state conservatorship is determined by DFPS, and the program is administered by HHSC.

### Program Description

In partnership with DFPS, Medicaid provides STAR Health, a managed care program for children in state conservatorship and other situations as outlined below. The program is administered by a single, statewide MCO. Children in foster care and kinship care are a high-risk population with greater medical and behavioral health needs than most children with Medicaid. STAR Health provides the following services to this population: acute care, LTSS, behavioral health, dental, vision, and pharmacy services. In addition, STAR Health members receive THSteps and CCP services, which provide preventive health and comprehensive care services for children, birth through age 20. The Health Passport is a patient-centered, internet-based health record and is available for all STAR Health members. STAR Health trains and certifies behavioral health providers, caregivers, and caseworkers in trauma-informed care—including evidence-based practices, such as Trauma-Focused Cognitive Behavioral Therapy. Use of psychotropic medication among STAR Health clients is carefully monitored for compliance with parameters set by the HHSC Psychiatric Executive Formulary Committee.

All STAR Health members have access to service coordination through Superior HealthPlan. Their service coordinator assesses for and coordinates the array of services a member needs, including LTSS, and develops a service plan for the member.

### Participation Requirements

The following Medicaid-eligible populations participate in STAR Health:

- Children and young adults in DFPS conservatorship;
- Young adults aged 18 through the month of their 22nd birthday who voluntarily agree to continue in a foster care placement;
- Young adults aged 18 through the month of their 21st birthday who are participating in the Medicaid for Former Foster Care Children program or are participating in the Medicaid for Transitioning Foster Care Youth Program due to ineligibility for the Medicaid for Former Foster Care Children program;

- An infant born to a Medicaid-eligible mother enrolled in STAR Health MCO; and
- A child or young adult, from birth through the month of his or her 21st birthday, who is enrolled in the Adoption Assistance Program or the Permanency Care Assistance Program and who:
  - ▶ receives SSI;
  - ▶ received SSI before becoming eligible for the Adoption Assistance Program or the Permanency Care Assistance Program;
  - ▶ is enrolled in a Medicaid 1915(c) waiver; or
  - ▶ is enrolled in Medicare.

## **STAR Kids**

- Administered by HHSC

### **Program Description**

STAR Kids is a managed care program that provides acute care, primary and specialty care, vision services, behavioral health care, case management services, prescription drugs, pharmacy, THSteps, CCP, and LTSS to children and youth with disabilities who are eligible for Medicaid. There are nine MCOs delivering the STAR Kids program across 13 STAR Kids service areas. All STAR Kids members have access to service coordination through their MCO. Their service coordinator assesses for and coordinates the array of services a child needs, including LTSS, and develops a yearly individual service plan. If an individual is enrolled in multiple programs, their STAR Kids service coordinator works with all their other service coordinators or case managers to determine which programs will provide each of their services.

### **Participation Requirements**

The following Medicaid-eligible populations of children and young adults aged 20 and younger participate in STAR Kids:

- Receive SSI or SSI-related Medicaid.
- Receive Medicaid and Medicare.
- Eligible for Medicaid for the Elderly and People with Disabilities or a Medicaid Buy-In program.

- Receive Medically Dependent Children Program (MDCP) waiver services.
- Receive Youth Empowerment Services (YES) waiver services for acute care services only.
- Receive intellectual and developmental disabilities (IDD) waiver services such as Community Living Assistance and Support Services (CLASS), Deaf Blind with Multiple Disabilities (DBMD), Home and Community-based Services (HCS), and Texas Home Living (TxHmL) for acute care services only.
- Reside in a community-based intermediate care facility for individuals with an ICF/IID or related conditions, or in a nursing facility for acute services only.

## Children’s Health Insurance Program

- Administered by HHSC

### Program Description

CHIP covers children in families who are not financially eligible for Medicaid but cannot afford to purchase private insurance. Texans who apply for benefits and do not qualify for Medicaid are automatically tested for CHIP eligibility. Texas has flexibility in determining CHIP benefits. The Texas CHIP benefit package provides acute care, behavioral health care, dental benefits (see CHIP Dental), and pharmacy services. Yearly enrollment fees are \$50 or less per family. Co-pays for both doctor visits and medicine are \$5 for lower-income families and \$20 to \$35 for higher-income families. Currently, 15 MCOs deliver CHIP services in 10 service delivery areas across the state. CHIP MCOs also provide service coordination to members with special healthcare needs. There are multiple channels available for individuals to apply for benefits including:

- Online at [Your Texas Benefits.com](https://www.yourtexasbenefits.com).
- In person at a local benefits office. There are over 280 benefit offices and processing centers. To find a local benefits office, visit [Your Texas Benefits - Screener](#).
- Through a network of over 1,600 community partners. To find a local community partner, visit [Texas Community Partner Program](#).
- Applying by phone by calling 2-1-1 and selecting Option 2.
- Faxing an application to 1-877-447-2839.
- Mailing an application to HHSC, PO Box 149024, Austin, TX 78714-9968.



# Eligibility Requirements

**Table 5. Summary of CHIP Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Under age 19
Residency/Citizenship	Texas resident who is a U.S. citizen or lawfully residing non-citizen
Income	Income is at or below 201 percent of the FPL. A standard income disregard is deducted from financial eligibility equivalent to 5 percentage points of FPL.
Diagnosis	Not applicable
Other	A child must be ineligible for Medicaid, be uninsured for at least 90 days or have a "good cause" exemption, and either have a Social Security number or have applied for one.

## Children’s Medicaid Dental Services

- Administered by HHSC

### Program Description

Dental maintenance organizations (DMOs) provide Children’s Medicaid Dental Services to children and young adults under age 21 with limited exceptions. Dental benefits and services include: diagnostic, preventive, restorative, therapeutic, endodontic, periodontic, prosthodontic, oral, maxillofacial, orthodontic, and adjunctive. Children’s Medicaid Dental Services members may select a DMO and a main dentist or be defaulted to a dental plan and main dentist. The main dentist serves as the member’s dental home and is responsible for providing routine care, maintaining continuity of patient care, and initiating referrals for specialty care. Members choose between three DMOs throughout the state.

### Eligibility Requirements

Children under 21 enrolled in Medicaid are eligible for comprehensive dental services. The following clients do not qualify to receive services through the Children’s Medicaid managed care dental plans:

1. Clients who are 21 years of age or older.
2. Clients who reside in a facility such as a nursing facility, state-supported living center, or ICF/IID.

3. Clients in STAR Health. STAR Health members receive dental services through the STAR Health MCO.

## **Children’s Health Insurance Program Dental Services**

- Administered by HHSC

### **Program Description**

DMOs provide CHIP Dental Services to children under the age of 19 who are eligible for CHIP. CHIP dental benefits and services include diagnostic, preventive, restorative, endodontic, periodontic, prosthodontic, oral, and maxillofacial services.

These benefits are subject to a \$564 annual “calendar year” limit unless an exception applies. In addition, some of the dental benefits described above are subject to annual limits over a 12-month coverage period. CHIP members who exhaust the \$564 annual limit continue to receive diagnostic and preventive services, and other medically necessary services to allow a CHIP member to return to normal, pain-free functionality. This includes treatment of traumatic clinical conditions or treatments to prevent dental problems from becoming more serious.

CHIP Dental Services members may select a DMO and a main dentist or default to a dental plan and a main dentist. The main dentist serves as the member’s dental home and is responsible for providing routine care, maintaining continuity of patient care, and initiating referrals for specialty care. Members have the choice of three DMOs throughout the state.

### **Eligibility Requirements**

Children who meet the eligibility requirements for CHIP also qualify to receive CHIP Dental Services.

## **Children’s Health Insurance Program Perinatal**

- Administered by HHSC

### **Program Description**

CHIP Perinatal (CHIP-P) services are for the unborn children of pregnant women who are uninsured and do not qualify for Medicaid. CHIP-P benefits include up to 20

prenatal visits, prescriptions and prenatal vitamins, some diabetic supplies, some tests, assessments, education, labor and delivery, two postpartum doctor visits within 60 days after delivery, and, depending on eligibility for either Medicaid or CHIP, regular checkups, immunizations, and prescriptions for the baby after the baby leaves the hospital. When a child is born to a CHIP-P mother whose income is below the income limit for Medicaid for Pregnant Women, the child is automatically enrolled in Medicaid. If the mother’s income is above the income limit for Medicaid, the child receives CHIP-P coverage through the remainder of the 12-month certification period. At the end of the certification period, the child is assessed for Medicaid eligibility, and if not eligible for Children’s Medicaid, the child will be assessed for CHIP eligibility.

All Texas CHIP MCOs must provide CHIP-P program services. Members receiving perinatal benefits are exempt from the 90-day waiting period and all cost sharing, including enrollment fees and co-pays, for the duration of their coverage period.

A family can apply for CHIP-P through multiple channels, including:

- Online at [Your Texas Benefits.com](https://www.yourtexasbenefits.com).
- In person at a local benefits office. There are over 280 benefit offices and processing centers. To find a local benefits office, visit [Your Texas Benefits - Screener](#).
- Through a network of over 1,600 community partners. To find a local community partner, visit [Texas Community Partner Program](#).
- Applying by phone by calling 2-1-1 and selecting Option 2.
- Faxing an application to 1-877-447-2839.
- Mailing an application to HHSC, PO Box 149024, Austin, TX 78714-9968.

## Eligibility Requirements

**Table 6. Summary of CHIP-P Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Unborn child
Residency/Citizenship	Texas resident

Eligibility Criteria	Requirements
Income	Household income exceeds 198 percent of the FPL, but is at or below 202 percent of the FPL and does not qualify for Medicaid for Pregnant Women because of income; or Household income at or below 202 percent of FPL but does not qualify for Medicaid because of the pregnant woman's immigration status.
Diagnosis	Not applicable
Other	Are without insurance or ineligible for Medicaid or CHIP. Women who are U.S. citizens or qualified immigrants with household income at or below 198 percent FPL may be eligible for coverage under the Medicaid for Pregnant Women program. For CHIP-P individuals at or below 198 percent FPL, Emergency Medicaid will cover labor and delivery.

## Medically Dependent Children Program

- Administered by HHSC

### Program Description

MDCP is a 1915(c) waiver program that provides home and community-based services to children and youth aged 20 and younger, as a cost-effective alternative to residing in a nursing facility. People enrolled in MDCP receive all services through their STAR Kids or STAR Health MCO. MDCP includes an array of LTSS: respite, flexible family support services, minor home modifications, adaptive aids, transition assistance services, supported employment, and employment assistance. MDCP services are in addition to other Medicaid benefits provided through the managed care plan.

MDCP maintains an interest list that people can join at any time. When an interest list slot opens, the person at the top of the list is released. After a person is released, they go through the eligibility determination process.

### Eligibility Requirements

**Table 7. Summary of MDCP Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Under age 21
Residency/Citizenship	Texas resident
Income	Financially eligible for Medicaid based on child or young adult's income and resources
Diagnosis	Level of care meets medical necessity for nursing facility admittance

## Title V Child Health and Dental Fee-for-Service Program

- Administered by HHSC

### Program Description

The Title V Child Health and Dental Fee-for-Service (TV CHD FFS) program provides preventative and primary health and dental services to children who are not eligible for another payor source that covers the same services. These services include child developmental screening, well-child exams, basic laboratory testing, immunizations, and routine dental exams.

Potential clients or their parents must apply to receive services at a contracted provider clinic, and, if determined eligible, may receive services immediately.

### Eligibility Requirements

**Table 8. Summary of TV CHD FFS Program Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Age 0 to 22nd birthday
Residency/Citizenship	Texas resident
Income	At or below 185 percent of FPL
Diagnosis	Not applicable
Other	Cannot be eligible for other programs or benefits providing the same services

## Children with Special Health Care Needs Services Program

- Administered by HHSC

### Program Description

The Children with Special Health Care Needs (CSHCN) Services Program provides benefits to low-income children, aged 20 years or younger, with special health care needs, and people of any age with cystic fibrosis. The program assists clients with the following: medical, dental, and mental health care; vision; special medical equipment and supplies; prescription drugs; special therapies; case management; family support services; travel to health care visits; and insurance premiums.

# Eligibility Requirements

**Table 9. Summary of CSHCN Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Under 21 years old (or any age with cystic fibrosis)
Residency/Citizenship	Texas resident
Income	Family income equal or less than 200 percent of FPL
Diagnosis	Have a chronic physical or developmental condition with physical manifestations that is expected to last for at least 12 months and may result in limits to one or more major life activities or could result in death if not treated.

## Primary Health Care Program

- Administered by HHSC

### Program Description

The Primary Health Care (PHC) program provides comprehensive primary health care services to prevent, detect, and treat health problems to clients of all ages who are not eligible for another payor source that covers the same services. PHC provides health care services including the following: diagnosis and treatment of acute and chronic illnesses; emergency medical services; family planning; preventive health, including screenings and immunizations; labs, X-rays, and other diagnostic services; and health education. PHC providers may also offer a variety of optional services, which vary by location.

Potential clients or their parents must apply to receive services at a contracted provider clinic, and, if determined eligible, may receive services immediately. While children may be eligible for PHC benefits, they are often also eligible for other health care programs such as Children’s Medicaid or CHIP. As a result, children represent a very small portion of the population served by PHC.

The PHC program served 2,793 clients under the age of eighteen in fiscal year 2024. The PHC program is available statewide through contracted providers.

# Eligibility Requirements

**Table 10. Summary of PHC Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Any age

<b>Eligibility Criteria</b>	<b>Requirements</b>
Residency/Citizenship	Texas resident
Income	Income at or below 200 percent of FPL
Diagnosis	Not applicable
Other	Cannot be eligible for other programs or benefits providing the same services

## Developmental and Disability Services

### Deaf Blind with Multiple Disabilities

- Administered by HHSC

#### Program Description

DBMD is a Medicaid 1915(c) waiver program that provides home and community-based services to people of all ages who are deaf and blind or have a condition that will result in deaf-blindness and have one or more additional disabilities. The delivery of home and community-based services is an alternative to placement in an ICF/IID facility. DBMD is one of the six Medicaid waiver programs for persons with IDD and delivers its services through the FFS model. While the unique needs of the person determine specific services, DBMD services may include case management, individualized skills and socialization, residential habilitation-transportation, assisted living, prescriptions, audiology services, dietary services, behavioral support, and intervener services.

DBMD maintains an interest list that people can join at any time. When an interest list slot opens, the person at the top of the list is released. After a person is released, they go through the eligibility determination process.

#### Eligibility Requirements

**Table 11. Summary of DBMD Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Any age
Residency/Citizenship	Texas resident
Income	Income up to 300 percent of SSI limit (financially eligible for Medicaid)
Diagnosis	HHSC-determined Level of Care VIII eligibility (diagnosed condition prior to age 22 and exhibits substantial functional limitations in at least three major life activities)

<b>Eligibility Criteria</b>	<b>Requirements</b>
Other	Deafblind or functioning as a person with deaf/blindness

## Home and Community-Based Services

- Administered by HHSC

### Program Description

HCS is a Medicaid 1915(c) waiver program that provides individualized services and supports to persons with intellectual disabilities who are living with their family, in their own home, or in other community settings, such as small group homes. The delivery of home and community-based services is an alternative to placement in an ICF/IID. HCS is one of the six Medicaid waiver programs for people with IDD and delivers its services through the FFS model. HCS has a large service array which includes but is not limited to adaptive aids, audiology, behavioral support, cognitive rehabilitation therapy, individualized skills, and socialization, dental, dietary, employment assistance, minor home modifications, occupational therapy, physical therapy, transition assistance, nursing, residential assistance, respite, speech and language pathology, social work, and supported employment.

HCS maintains an interest list that people can join at any time. When an interest list slot opens, the person at the top of the list is released. After a person is released, they go through the eligibility determination process.

### Eligibility Requirements

**Table 13. Summary of HCS Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Any age
Residency/Citizenship	Texas resident
Income	Income up to 300 percent of SSI limit
Diagnosis	ICF/IID Level of Care (LOC) I: (1) full scale Intelligence Quotient (IQ) of 69 or below, or full-scale IQ of 75 or below and a primary diagnosis of a related condition; and (2) mild to extreme deficits in adaptive behavior – or ICF/IID LOC VIII: (1) primary diagnosis of a related condition; and (2) moderate to extreme deficits in adaptive behavior.
Other	Not applicable



## Texas Home Living

- Administered by HHSC

### Program Description

TxHmL is a Medicaid 1915(c) waiver program that provides selected essential services and support to people with intellectual and developmental disabilities who live in their family homes or their own homes. The delivery of home and community-based services is an alternative to placement in ICF/IID. TxHmL is one of the six Medicaid waiver programs for people with IDD and delivers its services through the FFS model. TxHmL’s service array includes but is not limited to adaptive aids, audiology, behavioral support, community support (transportation), individualized skills and socialization, dental, dietary, employment assistance, minor home modifications, occupational therapy, physical therapy, nursing, respite, speech and language pathology, and supported employment.

TxHmL maintains an interest list that people can join at any time. When an interest list slot opens, the person at the top of the list is released. After a person is released, they go through the eligibility determination process.

### Eligibility Requirements

**Table 14. Summary of TxHmL Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Any age
Residency/Citizenship	Texas resident
Income	100 percent of SSI Limit
Diagnosis	ICF/IID LOC I: (1) full scale IQ of 69 or below, or full-scale IQ of 75 or below and a primary diagnosis of a related condition; and (2) mild to extreme deficits in adaptive behavior – or ICF/IID LOC VIII: (1) primary diagnosis of a related condition; and (2) moderate to extreme deficits in adaptive behavior.

## Community Living Assistance and Support Services

- Administered by HHSC

### Program Description

CLASS is a Medicaid 1915(c) waiver program that provides home and community-based services and supports to people with related conditions as an alternative to

placement in an ICF/IID facility. A related condition is a disability, other than an intellectual disability, that originated before age 22 and that affects a person's ability to function in daily life. CLASS is one of the six Medicaid waiver programs for persons with IDD and delivers its services through the FFS model. The CLASS service array includes but is not limited to adaptive aids, auditory integration and auditory enhancement training, behavioral support, case management, cognitive rehabilitation therapy, continued family services, dental treatment, dietary services, employment assistance, minor home modifications, nursing, occupational therapy, physical therapy, prevocational services, respite, specialized therapies, speech and language pathology, supported employment, and transition assistance services.

CLASS maintains an interest list that people can join at any time. When an interest list slot opens, the person at the top of the list is released. After a person is released, they go through the eligibility determination process.

## Eligibility Requirements

**Table 15. Summary of CLASS Eligibility Requirements.**

Eligibility Criteria	Requirements
Age	Any age
Residency/Citizenship	Texas resident
Income	Income up to 300 percent of SSI limit
Diagnosis	ICF/IID LOC VIII: (1) primary diagnosis of a related condition; and (2) moderate to extreme deficits in adaptive behavior.

## Community First Choice

- Administered by HHSC

### Program Description

Community First Choice (CFC) offers a set of services and supports to Medicaid recipients living in home and community-based settings. CFC services are Medicaid state plan services and are delivered under the authority of Section 1915(k) of the Social Security Act. The services available through CFC are personal assistance services (PAS), habilitation, emergency response services, and support management.

Many children and youth receive CFC PAS and CFC habilitation services. CFC PAS provides assistance with activities of daily living, instrumental activities of daily

living, household chores, and health-related tasks. CFC habilitation helps a person acquire, maintain, and enhance skills to accomplish activities of daily living, instrumental activities of daily living, and health-related tasks. People may use the Consumer Directed Services<sup>2</sup> option for CFC PAS and CFC habilitation.

CFC may be available to people enrolled in Medicaid, including Medicaid recipients in managed care and FFS programs. To receive CFC, a person must require an institutional level of care (e.g., nursing facility, intermediate care facility, or an institution for mental diseases) and must have a functional need for CFC services. CFC is delivered through a managed care model to children and youth in the STAR Kids and STAR Health programs. CFC is delivered through an FFS model for children and youth in the STAR program or in one of the following 1915(c) waiver programs for people with intellectual and developmental disabilities: CLASS, DBMD, HCS, and TxHmL.

## Eligibility Requirements

**Table 16. Summary of CFC Eligibility Requirements.**

Eligibility Criteria	Requirements
Age	Any age
Residency/Citizenship	Texas resident
Income	Enrolled in Medicaid
Other	Must need help with activities of daily living, such as dressing, bathing, and eating; and must need an institutional level of care.

## Blind Children’s Vocational Discovery and Development Program

- Administered by HHSC

### Program Description

Blind Children’s Vocational Discovery and Development Program (BCVDDP) serves children living in Texas who are blind or visually impaired, from birth through age 21. BCVDDP helps children who are blind or visually impaired discover their future potential by giving them the tools to be as independent as possible. BCVDDP works

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<sup>2</sup> Consumer Directed Services allows people who receive services from HHSC to hire and manage the people who provide their services, including setting the wages for their employees, within state guidelines, and giving benefits, such as vacation days and bonuses.

with eligible children and families to develop an individualized family service plan that meets the unique needs of each child. Program services include direct skills training, parent education, and case management services. BCVDDP also provides specialized support to children with combined vision and hearing loss. Specialists are available to provide services to children and families statewide.

## Eligibility Requirements

**Table 17. Summary of BCVDDP Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Under age 22
Residency/Citizenship	Texas resident
Income	No income requirement to qualify for services.
Diagnosis	Must have a documented severe visual impairment or vision condition that negatively affects the current or potential functioning of the child.
Other	Contact <a href="mailto:BlindChildrensProgram@hhs.texas.gov">BlindChildrensProgram@hhs.texas.gov</a> to submit a referral or for more information.

## Children’s Autism Program

- Administered by HHSC

### Program Description

Children’s Autism Program helps improve the quality of life for children on the autism spectrum and their families through focused applied behavior analysis (ABA) treatment services. Focused ABA treatment targets a few specific outcomes rather than the general developmental needs of the child. ABA treatment is particularly useful when children have challenging behaviors, and the goal is to improve social and adaptive skills. In fiscal year 2024, the Children’s Autism Program served 791 children statewide.

## Eligibility Requirements

**Table 18. Summary of Children’s Autism Program Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Ages 3 through 15
Residency/Citizenship	Texas resident
Income	Not applicable
Diagnosis	Documented diagnosis on the autism spectrum

# Early Childhood Intervention

- Administered by HHSC

## Program Description

Early Childhood Intervention (ECI) is a statewide program for families with children, birth to 36 months of age, with developmental delays, disabilities, or certain medical diagnoses that may impact development. ECI provides early intervention services designed to enhance the child’s development and improve the capacity of families to meet their child's needs.

ECI offers an array of services such as case management, physical therapy, speech-language therapy, nutrition services, occupational therapy, specialized skills training, specialized services for children who are deaf or hard of hearing or have visual impairment, and more. ECI service providers are licensed and credentialed and work as a team with parents and other caregivers to help them integrate developmental activities in a variety of routines in the child’s natural environment, or where the child lives, learns, and plays.

There are 40 ECI programs located across the state that provide ECI services to every Texas county. The [ECI program search page](#) helps to locate the ECI program that serves each region. Local ECI programs provided ECI services to 67,512 children in fiscal year 2023 and 67,413 in fiscal year 2024.

## Eligibility Requirements

**Table 19. Summary of ECI Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Age 0 to 36 months
Residency/Citizenship	Texas resident
Income	Not applicable

Eligibility Criteria	Requirements
Diagnosis	Have one of the following conditions: <ul style="list-style-type: none"> <li>• <a href="#">Medical diagnosis</a> that is likely to cause a developmental delay and demonstrates a need for services;</li> <li>• Developmental delay of 25 percent in one or more areas of development (social-emotional, self-help, communication, motor functions, or cognitive skills);</li> <li>• Developmental delay of 33 percent if the delay occurs only in the area of expressive communication; and/or</li> <li>• Deaf or hard of hearing or visual impairment as defined by the Texas Education Agency.</li> </ul>
Other	When a child is referred for developmental delay, the ECI program administers the Battelle Developmental Inventory, Third Edition or the Developmental Assessment of Young Children, Second Edition — standardized, norm-referenced tools that evaluate all developmental domain areas including cognitive, social interactions, gross and fine motor skills, adaptive skills, and communication — to establish a child’s percent of delay for eligibility.

# Community-Based Behavioral Health Programs and Services

## Children’s Mental Health

- Administered by HHSC

### Program Description

Children’s Mental Health (CMH) provides community-based mental health services, such as counseling, skills training and development, routine and intensive case management, crisis intervention, and medication management. CMH may also include family partner services and other adjunct services, such as support groups and respite services to eligible children and adolescents. These services are provided through local mental health authorities (LMHAs) and local behavioral health authorities (LBHAs). Any child or adolescent can receive crisis intervention services at an LMHA or LBHA when experiencing a mental health crisis.

The LMHAs and LBHAs serve as local CMH providers of the Texas Resilience and Recovery (TRR) community service delivery system under HHSC. LMHAs and LBHAs collaborate with community stakeholders to develop external provider networks.

CMH providers develop service plans to address goals identified by the child or adolescent, and caregiver.

Children and their families can access community mental health services through the LMHA or LBHA serving the county in which they reside. The LMHA or LBHA schedules an intake to determine if a child meets eligibility requirements for mental health services. The LMHA or LBHA conducts a diagnostic interview along with the Texas Child and Adolescent Needs and Strengths assessment to determine the child’s diagnosis and need for mental health services.

During fiscal year 2024, 152,056 children were enrolled in CMH services. CMH services are offered through the 39 LMHAs or LBHAs making services accessible throughout the state.

## Eligibility Requirements

**Table 20. Summary of CMH Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Between 3 and 17 years of age
Residency/Citizenship	Texas resident
Income	Not applicable
Diagnosis	Children with serious emotional disturbances (excluding a single diagnosis of substance use, intellectual or developmental disability, or autism spectrum disorder).
Other	Children who have a serious functional impairment; who are at risk of disruption of a preferred living or childcare environment due to psychiatric symptoms; or are enrolled in special education because of serious emotional disturbance.

## Children’s Mental Health Residential Treatment Center Project

- Administered by HHSC

### Program Description

The Children’s Mental Health-Residential Treatment Center (RTC) Project is a collaborative effort between DFPS and HHSC. The (RTC) Project implements the relinquishment avoidance program in accordance with Texas Family Code, Chapter 262, Subchapter E, which provides intensive mental health support for families at risk of conservatorship relinquishment to DFPS because they cannot access the necessary mental health services for their child to remain in the community. The

goal of the RTC Project is to provide treatment support for families with a child at risk of entering into DFPS custody because of their mental health care needs. The RTC Project supports families by:

- Connecting families to mental health services available in their community through their LMHA or LBHA.
- Paying for the cost of an RTC to meet the child’s mental health needs when families do not have the resources to pay for residential placement.

Following Senate Bill 642, 87th Legislature, Regular Session, 2021, another referral option was codified for the RTC Project. The child’s LMHA or LBHA can refer directly to the HHSC RTC Project team, or the DFPS caseworker can send their referral to the DFPS State Office of Mental Health. The DFPS State Office of Mental Health team screens the referral and supporting information and determines the next steps, including sending the referral to HHSC.

HHSC’s RTC Project team helps identify an RTC that best matches the needs of the family. Treatment services in an RTC may not be immediate, and there is no guarantee of admission. While the child is waiting for admission to an RTC, the LMHA or LBHA provides support and local resources to the family in the community. The family receives community mental health services offered at the LMHA or LBHA throughout the process of enrollment in the RTC Project. Often, children are diverted from admission to an RTC as they receive community mental health services that meet their needs and no longer require placement in an RTC.

Seventy three children were served for fiscal year 2024. The RTC Project services are offered at the community level by contacting the LMHA or LBHA throughout the state who refer to residential treatment centers.

## Eligibility Requirements

**Table 21. Summary of RTC Project Eligibility Requirements.**

<b>Eligibility Criteria</b>	<b>Requirements</b>
Age/Family Status	Between 5 and 17 years of age
Residency/Citizenship	Texas resident
Income	Not applicable
Diagnosis	Serious emotional disturbance and is eligible to receive services through an RTC



Eligibility Criteria	Requirements
Other	The child must not be in the custody of DFPS through joint, temporary, or permanent managing conservatorship. There is no current abuse or neglect in the household. The family may be placing their child into DFPS custody because of the seriousness of their child’s mental health needs. The family will support the mental health needs of their child through the RTC treatment process. The family is willing to actively participate in the treatment with a family reunification goal.

## Youth Empowerment Services Waiver

- Administered by HHSC

### Program Description

The YES Waiver is a 1915(c) Medicaid program that helps children and youth with serious mental, emotional, and behavioral difficulties. The YES Waiver provides intensive, specialized services delivered within a strengths-based team planning process referred to as Wraparound. Wraparound builds on family and community support and uses YES services to help expand a family’s natural support network and connection with their community. YES services are family-centered, coordinated, and effective at preventing out-of-home placement and promoting lifelong independence and self-defined success.

The objective of the YES Waiver program is to provide community-based services in lieu of institutionalization in accordance with the approved waiver and program capacity. In providing these services, the YES Waiver seeks to accomplish the following goals:

- Reduce the amount of time youth are out of their home and community because of a mental health need.
- Prevent entry into the foster care system and relinquishment of parental custody.
- Expand available mental health services and supports.
- Ensure families have access to nontraditional support services, as determined in a family-centered planning process.
- Improve the lives of youth and families.

HHSC allocates YES Waiver enrollment vacancies by service delivery area (per county) to LMHAs and LBHAs. HHSC determines the vacancy allocations based on

population size, community need, and local infrastructure. HHSC re-evaluates allocations annually, or more often as needed. Areas with greater service demands receive unused vacancies from other areas.

During fiscal year 2024, 1,988 children were enrolled in CMH services. The YES Waiver services are offered through the 39 LMHAs or LBHAs, making services accessible throughout the state.

## Eligibility Requirements

**Table 22. Summary of YES Waiver Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Between 3 and up until the day before the youth’s 19th birthday.
Residency/Citizenship	Texas citizen or qualified, eligible immigrant
Income	Eligible for Medicaid (parent’s income does not apply). Special income level equal to 300 percent of SSI Federal Benefit Rate.
Diagnosis	<ul style="list-style-type: none"> <li>• Serious mental, emotional, and behavioral difficulties with a qualifying mental health diagnosis.</li> <li>• Outpatient therapy or partial hospitalization must have been attempted and failed to improve condition.</li> <li>• At risk of being placed outside of their home due to mental health needs.</li> <li>• Meet the criteria for admission to a psychiatric hospital.</li> </ul>
Other	Currently live in a home setting with a legally authorized representative, or on their own if legally emancipated, or in an institution with a planned discharge date of 30 calendar days or less.

## Health Checks and Prevention

### Medicaid Texas Health Steps

- Administered by DSHS and HHSC

### Program Description

THSteps are Medicaid medical, dental, and case management services focusing on preventive care. THSteps, expanded through the CCP, includes medical care and other services deemed medically necessary on a case specific basis. THSteps served an average of 4,361,186 members monthly in fiscal year 2023.

# Eligibility Requirements

**Table 23. Summary of THSteps Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Under age 21
Residency/Citizenship	Texas resident who is a U.S. citizen or a lawfully residing non-citizen
Income	Eligible for Medicaid
Diagnosis	Not applicable
Other	Medicaid client

## Newborn Screening

- Administered by DSHS

### Program Description

The DSHS Public Health Laboratory screens Texas newborn dried blood spot specimens for 55 genetic and congenital conditions. Every Texas newborn should have two bloodspot screens. Health care providers obtain the blood spot specimens via heel stick at 24 to 48 hours, and the second specimen is collected at seven to 14 days of life. Two additional screens, newborn hearing screening and critical congenital heart disease screening, are completed at the point of care (at the hospital or birthing facility).

DSHS screens just under 400,000 Texas newborns each year. In fiscal year 2022, the laboratory screened 761,082 dried blood spot specimens. Around 19,000 abnormal results are reported to the DSHS Newborn Screening (NBS) Clinical Care Coordination team for required follow-up care and coordination.

NBS Clinical Care Coordination supports timely follow-up to diagnosis and condition management. Approximately 1,130 babies of the 19,000 abnormal screens referred to NBS Clinical Care Coordination are diagnosed with a newborn screening condition. Early diagnosis and early treatment prevent serious complications, such as growth problems, developmental delays, deafness, blindness, intellectual disabilities, seizures, or sudden or early death. NBS Clinical Care Coordination also provides newborn health education to healthcare professionals and parents about the importance and benefits of newborn screenings and follow-ups.

The Secretary of the Department of Health and Human Services (HHS) recommends conditions for states to screen in the Recommended Uniform Screening Panel (RUSP). DSHS adds new conditions to the Texas NBS panel as they

are added to the RUSP and as funding allows. DSHS will add Krabbe disease, Pompe disease, Mucopolysaccharidosis type I, and Mucopolysaccharidosis type II to the Texas NBS Panel in 2025.

## Eligibility Requirements

**Table 24. Summary of NBS Clinical Care Coordination Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Newborns, with long-term follow-up as needed
Residency/Citizenship	None
Income	None
Diagnosis	An infant with an abnormal screen for or diagnoses of a condition on the Texas NBS Panel
Other	None

## Newborn Screening Benefits Program

- Administered by DSHS

### Program Description

The NBS Benefits Program provides funds for medically appropriate foods, vitamins, medicine, and lab services for persons diagnosed with a screened disorder. NBS Benefits may also pay for confirmatory diagnosis coverage costs. The program is a payor of last resort for eligible individuals.

Approximately 200 individuals diagnosed with a newborn screened disorder are served by the NBS Benefits Program.

## Eligibility Requirements

**Table 25. Summary of NBS Benefits Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	None
Residency/Citizenship	Texas resident
Income	Family income at or below 350 percent of FPL
Diagnosis	The individual must be diagnosed with a disorder the NBS Program screens for (or pending a diagnosis confirmation).

Eligibility Criteria	Requirements
Other	<ul style="list-style-type: none"> <li>• Uninsured or ineligible for other benefit programs.</li> <li>• Individuals who are placed on the wait list for CSHCN Benefits may still be eligible for NBS Benefits if other eligibility requirements are met.</li> <li>• The requested service is not covered or partially covered by available payors.</li> <li>• The individual’s eligibility must be reviewed annually to continue eligibility.</li> </ul>

## Texas Early Hearing Detection and Intervention

- Administered by DSHS

### Program Description

The Texas Early Hearing Detection and Intervention (TEHDI) program tracks and manages newborn hearing screening data through the TEHDI Management Information System. As a point-of-care screen, newborns are tested for hearing at birthing facilities. The program helps coordinate follow-up care for babies who fail their newborn hearing screens to support timely diagnosis and early enrollment in intervention services to help prevent delays in communication and cognitive skill development. TEHDI also establishes certification criteria and monitors newborn hearing screening programs at birthing facilities.

In fiscal year 2022, through the work of the TEHDI program:

- 377,256 babies received their initial newborn hearing screens at birth facilities;
- 490 babies were identified as deaf or hard of hearing; and
- 191 babies were enrolled in early intervention services.

### Eligibility Requirements

All babies are screened in accordance with Texas Health and Safety Code, Chapter 47.

## Texas Vaccines for Children

- Administered by DSHS

## Program Description

The Texas Vaccines for Children (TVFC) Program reduces the burden of vaccine-preventable diseases for infants, children, and adolescents. The program serves over 5 million Texas children annually, of which about 2 million are under six years of age. The program provides vaccinations through a statewide network of over 3,000 TVFC provider service locations. Since 1994, the TVFC Program fulfills requirements of federal law, guaranteeing vaccine availability to providers at no cost to vaccinate children from birth through 18 years of age. Through program participation, providers receive free vaccines to administer to eligible patients. The budget covers the cost of vaccines. DSHS contracts with local health departments that oversee providers within their jurisdiction, and DSHS directly oversees providers in areas without a local health department. The following licensed practitioners are eligible to enroll as TVFC program providers:

- Medical doctors;
- Doctors of osteopathy;
- Nurse practitioners;
- Certified nurse midwives;
- Physician assistants; and
- Registered pharmacists.

In fiscal year 2024, the DSHS Immunizations Program successfully distributed 92,405 doses of Beyfortus during the first respiratory syncytial virus (RSV) season it was available. Despite a national shortage during this time, 1,547 providers in Texas received Beyfortus shipments. RSV is the greatest cause of hospitalizations for children under two years of age and Beyfortus makes a direct, significant impact.

## Eligibility Requirements

**Table 26. Summary of TVFC Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	Any child who is 18 years of age or younger
Residency/Citizenship	Immigration or residency status does not affect a child’s eligibility for the TVFC Program
Income	See Other
Diagnosis	Not applicable

Eligibility Criteria	Requirements
Other	Meet one of the following conditions: <ul style="list-style-type: none"> <li>• Enrolled in Medicaid, or Medicaid-eligible</li> <li>• Enrolled in Texas CHIP</li> <li>• Uninsured</li> <li>• Underinsured (private health insurance that does not cover vaccines, only covers selected vaccines, or has a fixed dollar limit or cap on the amount that it will cover for vaccines. TVFC-eligible once fixed dollar amount or cap is reached.)</li> <li>• American Indian or Alaska Native (in accordance with 25 United States Code §1603)</li> </ul>

## Oral Health Improvement Program

- Administered by DSHS

### Program Description

The Oral Health Improvement Program (OHIP) implements public health strategies to improve the oral health of Texas children. This includes a school-based preventive services program called Smiles in Schools, which is staffed by five regionally based dentists and dental hygienist teams. Students may receive an oral health screening, fluoride varnish, dental sealants, education, and referrals. Parents or guardians receive screening results and recommendations. OHIP also provides oral health education and conducts medical-dental integration projects. OHIP manages Smiles for Moms and Babies, an initiative to increase the number of at-risk pregnant women and infants who visit a dentist. In fiscal year 2023, OHIP served 8,570 clients.

### Eligibility Requirements

OHIP identifies schools in underserved communities for preventive services. The number of grade levels visited at a particular school is based on the size of the school. For instance, only children in grades K-2 may be seen at a large elementary school, but all children in a small rural K-12 may be seen. Any child in a selected grade who returns a signed consent form may receive services.

### Prevention and Early Intervention

- Administered by DFPS through fiscal year 2024.

- Effective September 1, 2024, the Prevention and Early Intervention (PEI) division of DFPS transferred to HHSC and was renamed the Family Support Services department.

## **Program Description**

The PEI division of DFPS funds community-based, evidence-informed programs and systems of support designed to promote opportunities for partnerships that capitalize on the strengths of parents and children to build healthy families and resilient communities upstream from crisis and the need for intensive interventions. Through its programs, PEI strives to mitigate risk factors that lead to childhood adversities, promote positive outcomes for families, and strengthen communities.

PEI works with communities to address prevention and early intervention needs in Texas through the following actions:

- Funding community-level programs designed to promote positive outcomes for children, youth, and families and create thriving communities.
- Working with communities to implement programs that address community-level needs.
- Helping normalize the challenges of parenting and seeking help through parenting tips, articles, information, and resources.
- Recommending best practices and policies for building on the strengths of both caregivers and children to promote strong families and resilient children.

## **Eligibility Requirements**

Each PEI program may serve children up to 18 years of age depending on the specific program or service. Some PEI services are available statewide, while others are only available in targeted areas. PEI-funded prevention services are voluntary and free of charge to families in Texas communities. Eligibility criteria vary based on program.



# Support Services

## Case Management for Children and Pregnant Women

- Administered by HHSC

### Program Description

Case Management for Children and Pregnant Women (CPW) is a Medicaid benefit for children aged 20 or younger who have a health condition or health risk, and pregnant women of any age with a high-risk condition. CPW providers assist eligible clients in accessing necessary medical, social, educational, and other services, and include registered nurses, licensed social workers, Federally Qualified Health Centers, community health workers, and doulas.

### Eligibility Requirements

**Table 27. Summary of Case Management for CPW Eligibility Requirements.**

Eligibility Criteria	Requirements
Age/Family Status	0 through 20 or pregnant woman of any age
Residency/Citizenship	Texas resident who is a U.S. citizen or a lawfully residing non-citizen
Income	Medicaid-eligible
Diagnosis	Have a health condition or health risk or high-risk pregnancy and need help accessing medical, social, educational, and other services.
Other	Client must want to receive CPW services

## Children’s Advocacy Programs

- Administered by HHSC

### Program Description

The Children’s Advocacy Programs provide critical child advocacy services by contracting with the Texas Court-Appointed Special Advocates (CASA) and Children’s Advocacy Centers of Texas (CACTX) to support the protection of abused and neglected children.

Texas CASA is a statewide nonprofit organization that provides training, technical assistance, evaluation services, and funds administration of local CASA volunteer

advocacy programs. Local CASA programs recruit, train, and supervise volunteers to represent the best interests of children in the child protection system.

CACTX is a statewide nonprofit organization that provides training, technical assistance, evaluation services, and funds administration of local children's advocacy centers. Children's advocacy centers use a multidisciplinary team approach in the investigation and prosecution of child abuse cases. This approach involves specialized forensic interviews, therapeutic recovery services, medical evaluations, and case management.

## **Eligibility Requirements**

- Texas CASA services: Any child under 18 years of age in the Child Protective Services system.
- CACTX services:
  - ▶ Any child when there is a report of child abuse or neglect reported to law enforcement or to DFPS.
  - ▶ Any adult with intellectual disabilities when there is a report of abuse or neglect reported to law enforcement or DFPS.

## **Family Violence Program**

- Administered by HHSC

## **Program Description**

Family Violence Program promotes safety, self-sufficiency, and long-term independence of adult and child survivors of family violence and their families, including survivors of dating violence. Through a network of trauma-informed service providers, the program provides emergency shelter and supportive services to survivors and their children, educates the public, provides training, and offers prevention support to various organizations across Texas.

## **Eligibility Requirements**

The only qualification for service eligibility is that the person be a victim or survivor of family violence or dating violence. The survivor's non-victim family members may also receive services.

## Foster Grandparent Program

- Administered by HHSC

### Program Description

The Foster Grandparent Program (FGP) serves children through partnerships with local entities that are volunteer stations for the program. A volunteer station must be a public agency, private nonprofit organization, or a proprietary health care organization that accepts the responsibility for the assignment of a child to a foster grandparent volunteer. FGP volunteers (income-eligible adults aged 55 and older) provide one-on-one emotional support, mentoring, and tutoring.

There are currently 103 FGP volunteer stations administered by HHSC throughout the state that focus on children under six years of age. Throughout the 2023-2024 grant year, 215 volunteers served 951 children at these stations. FGP service areas include Abilene, Austin, Corpus Christi, Denton, Fort Worth, Lubbock, Lufkin, Mexia, Rosenberg, Temple, and their surrounding counties.

### Eligibility Requirements

Volunteer station staff select children with exceptional needs including having difficulty with literacy, other academic attainment issues, and fine motor skill development; children who are homeless or in the foster care system; and children with other unmet needs. These children are partnered with foster grandparent volunteers.

## Thriving Texas Families

- Administered by HHSC

### Program Description

The Thriving Texas Families (TTF) program, seeks to promote healthy pregnancy and childbirth; promote childbirth as an alternative to abortion; increase access to resources that promote family and child development; encourage family formation; helps parents establish and implement successful parenting techniques; increase the number of families who achieve economic self-sufficiency; and provide a local approach and personalized support to pregnant women to promote childbirth in all instances of pregnancy.

TTF services are delivered through contracted providers, including pregnancy centers, social service providers, adoption agencies, and maternity homes for pregnant women. TTF services are offered to eligible participants in person, by phone, or online. The TTF program served 125,416 unduplicated clients statewide in fiscal year 2023. TTF program accomplishes its mission by providing the following support services:

- Counseling and mentoring on pregnancy, education, and readiness topics;
- Care coordination for prenatal, perinatal, and postnatal services, including connecting participants to health services;
- Educational materials and information about pregnancy, parenting, and adoption services;
- Referrals to governmental and social service programs, including child care, transportation, housing, and state and federal benefit programs;
- Classes on life skills, personal finance, parenthood, stress management, job training, job readiness, job placement, and educational attainment;
- Provision of supplies for infant care and pregnancy, including car seats, cribs, maternity clothes, infant diapers, and formula; and
- Housing services.

**Table 12. Summary of Eligibility Requirements**

Eligibility Criteria	Requirements
Age/Family Status	Families with an unborn child or child 36 months of age or younger and special populations, including parents who have experienced a miscarriage
Residency/Citizenship	Texas resident
Income/Assets	The TTF program has no income requirements for eligibility
Diagnosis	Not applicable

## 3. Child Health Partnerships

HHS participates in formalized partnerships that exemplify a cooperative approach to improving the health of mothers and young Texans. Through state and local collaborations, HHS and our partners can make vital contributions to enhancing the quality of life for children and families. The information below provides examples of these types of collaborations.

### Affinity Groups

HHSC participated in two national learning collaboratives and quality improvement (QI) initiatives focused on pediatric health outcomes hosted by the Centers for Medicare and Medicaid Services and Mathematica. In October 2021, HHSC joined the Infant Well-Child Visit Affinity Group. With technical assistance from the Centers for Medicare and Medicaid Services and Mathematica, states conducted QI projects in partnership with MCOs and local health organizations. For each QI initiative, HHSC partnered with several Medicaid MCOs where each MCO tested various small-scale QI projects.

In June 2024, HHSC joined a multi-state affinity group hosted by AcademyHealth as part of a Health Resources and Services Administration initiative to improve systems of care for children and youth with medical complexity and their families.

### Infant Well-Child Visit Affinity Group

The Infant Well-Child Visit Affinity Group aims to improve the use and quality of well-child visits for Medicaid for beneficiaries ages zero to 15 months, as demonstrated through improved performance on the well-child visits in the first 30 months of life metric. Ten MCOs partnered with HHSC and completed QI projects. The Infant Well-Child Visit Affinity Group concluded in October 2023.

### Sustainability Affinity Group for Enhancing Systems of Care for Children with Medical Complexity

The Health Resources and Services Administration funded Enhancing Systems of Care for Children with Medical Complexity (ESC CMC) initiative focuses on evaluating and implementing models of care that improve the well-being of and service delivery for children and youth with medical complexity. The ESC CMC Coordinating Center, led by AcademyHealth, invited Texas to participate in a multi-

state Sustainability Affinity Group through which states' Medicaid and Title V programs receive technical assistance to collaboratively develop and implement a sustainable policy or program that is meaningful to children with medical complexity and their families. The ESC CMC Sustainability Affinity Group began in June 2024 and concludes in September 2025.

## **Children and Youth with Special Health Care Needs Systems Development Group**

The Children and Youth with Special Health Care Needs (CYSHCN) Systems Development Group within DSHS provides funding for Family Supports and Community Resource contractors to improve systems supporting Texas children and youth with special health care needs and their families. In addition to Family Supports and Community Resource contractors, the Children and Youth with Special Health Care Needs Systems Development Group funds Case Management contractors to assist families in navigating health care, education, human services, and other systems. Staff collaborates with state and national partners, agencies, and community organizations to improve access to a medical home, plan for transition from pediatric to adult-based care and promote a sense of belonging in their communities.

## **Community Resource Coordination Groups**

Covering 247 counties, the 147 Community Resource Coordination Groups (CRCGs) are comprised of public and private agencies that work with children, families, and adults with complex multi-agency needs to identify and coordinate resources and services in their communities. CRCGs address gaps in services for Texans with complex needs that cannot be met by a single agency and therefore require interagency collaboration. CRCGs embrace system-of-care values, seek to find the least restrictive community-based solutions, and are a conduit to inform local and state systems of existing gaps and barriers to help find innovative solutions.

The state CRCG office collaborates with the state CRCG workgroup. The workgroup brings together staff from all legislatively mandated agencies to support local CRCG efforts. Support includes delivering information, training, and technical assistance to local CRCGs. These supports cover CRCG community programs and resources, best practices, interagency collaboration, data collection, evaluation, and resource development.

## **Help Me Grow Texas**

Help Me Grow Texas is a statewide network of communities maximizing the efficiency of early childhood systems to promote the optimal development of Texas children. The network enhances the capacity for the early detection of developmental concerns and the linkage of families with young children to needed community resources, services, and support. The DSHS Maternal and Child Health Unit is the organizing entity for the implementation of the Help Me Grow System Model in Texas. Key functions include convening state and local early childhood stakeholders, coordinating a cohort learning experience for regional communities, and identifying sustainable best practices for a high-impact early childhood system. In fiscal year 2023, DSHS implemented Help Me Grow Texas for the third year with 12 Help Me Grow sites statewide serving 42 Texas counties.

## **Newborn Screening Advisory Committee**

The Newborn Screening Advisory Committee advises DSHS on strategic planning, policy, rules, and services related to newborn screening. The committee reviews the necessity of requiring additional screening tests, to include associated implementation costs as needed.

## **Policy Council for Children and Families**

The Policy Council for Children and Families works to improve the coordination, quality, efficiency, and outcomes of services provided to children with disabilities and their families through the state's health, education, and human services systems.

## **Sickle Cell Task Force**

House Bill 3405, 86th Legislature, Regular Session, 2019, created the Sickle Cell Task Force to study and advise DSHS on implementing the 2018 Sickle Cell Advisory Committee Report recommendations. The task force focuses on raising public awareness of sickle cell disease and the sickle cell trait. House Bill 1488, 88th Legislature, Regular Session, 2023, expanded task force duties to include working with HHSC and other entities to promote sickle cell education and improve care.

## **State Child Fatality Review Team Committee and Local Teams**

The State Child Fatality Review Team Committee’s mission is to reduce the number of preventable child deaths. To achieve its mission, the committee builds a knowledge base of the causes and incidence of child deaths in Texas, makes policy recommendations, and identifies procedures within agencies represented on the committee that would prevent child deaths.

Child Fatality Review Teams (CFRTs) apply a public health perspective in reviewing child deaths at the local level. By reviewing circumstances surrounding child deaths, CFRTs identify prevention strategies that will decrease the incidence of preventable child deaths. In turn, CFRTs communicate and assist agencies with implementation of these strategies. They also provide recommendations to the State Child Fatality Review Team Committee.

CFRTs are multidisciplinary teams and include members such as Child Protective Services staff, medical examiners, pediatricians, law enforcement, child mental health providers, child advocates, and a variety of other child health and injury prevention experts.

In 2020 and 2021, 44 local CFRTs covering 135 counties reviewed cases. In 2020 and 2021, 6,896 child deaths occurred in Texas. Local CFRTs reviewed 1,766 (approximately 26 percent) of these deaths.

- In 2020, local CFRTs reviewed 947 cases out of 3,636 child deaths (26 percent).
- In 2021, local CFRTs reviewed 819 cases out of 3,260 child deaths (25 percent).

## **State Medicaid Managed Care Advisory Committee’s Subcommittee on Children and Youth with Medical, Behavioral, and Developmental Complexity**

The State Medicaid Managed Care Advisory Committee's Children and Youth with Medical and Behavioral, and Developmental Complexity Subcommittee focuses on



improving the care of children and youth with medical, behavioral, or developmental complexity within Medicaid managed care. Focus areas include issues within and among the STAR Kids program and other managed care programs for people with disabilities, best practices for providing care for children and youth with complex needs, access to specialized care, transitions of care, and improving health outcomes and quality of services.

## **Texas Collaborative for Healthy Mothers and Babies**

The Texas Collaborative for Healthy Mothers and Babies (TCHMB) is Texas' perinatal quality collaborative with a mission to advance health care quality, equity, and patient safety for all Texas mothers and babies. To accomplish this mission, TCHMB develops joint quality improvement initiatives, advances data-driven best practices, and promotes education and training. DSHS contracts with The University of Texas School of Public Health to facilitate meetings, strategic planning, and activities of TCHMB; organize an annual TCHMB Summit; and create the TCHMB website and communication plan. In addition, TCHMB coordinates the activities and evaluation of pilot projects and disseminates information and resources related to perinatal outcomes.

## **Texas System of Care**

HHSC leads the Texas System of Care (TxSOC) as the framework for the children's mental health system in Texas with the goal of improving mental health outcomes for children, youth, and young adults with serious emotional disturbance, as well as their families. The TxSOC launched a new, school-based initiative with grant funding awarded by the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration for fiscal years 2022 through 2025. This initiative serves El Paso County, Travis County, and a six-county region in North Texas by embedding teams of school-based providers employed by LMHAs in local school districts. Additionally, the TxSOC provides training to stakeholders on best practices for implementing the system-of-care values of being family-driven, youth-guided and driven, culturally and linguistically responsive, and community-based.

The TxSOC governance board is the Children and Youth Behavioral Health Subcommittee of the Behavioral Health Advisory Committee. The Children and Youth Behavioral Health Subcommittee brings together representatives from each

child and youth-serving agency, family members, youth, and community representatives to serve as an advisory body to aid HHSC in the statewide expansion of the system of care services and adolescent substance use prevention, treatment, and recovery services in Texas. Additionally, the Children and Youth Behavioral Health Subcommittee monitors and makes recommendations regarding the program and funding structure of child and youth behavioral health services and supports in Texas.

## 4. Conclusion

Texas operates a varied set of programs that positively address the key determinants affecting the health of the state's youngest people. As detailed in this report, these programs help children access critical services that improve and protect their health and wellbeing.

# List of Acronyms

Acronym	Full Name
ABA	Applied Behavior Analysis
BCVDDP	Blind Children’s Vocational Discovery and Development Program
CACTX	Children's Advocacy Centers of Texas
CASA	Court Appointed Special Advocates
CCP	Comprehensive Care Program
CFC	Community First Choice
CFRTs	Child Fatality Review Teams
CHIP	Children's Health Insurance Program
CHIP-P	CHIP Perinatal
CLASS	Community Living Assistance and Support Services
CMH	Children's Mental Health
CPW	Case Management for Children and Pregnant Women
CRCG	Community Resource Coordination Groups
CSHCN	Children with Special Health Care Needs
DBMD	Deaf Blind with Multiple Disabilities
DFPS	Department of Family and Protective Services
DMO	Dental Maintenance Organizations
DSHS	Department of State Health Services
ECI	Early Childhood Intervention
ESC CMC	Enhancing Systems of Care for Children with Medical Complexity
FFS	Fee-for-Service
FGP	Foster Grandparent Program
FPL	Federal Poverty Level
HCS	Home and Community-Based Services
HHS	Health and Human Services
HHSC	Health and Human Services Commission
ICF/IID	Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions
IDD	Intellectual and Developmental Disabilities
IQ	Intelligence Quotient
LBHA	Local Behavioral Health Authority
LMHA	Local Mental Health Authority
LOC	Level of Care
LTSS	Long-Term Services and Supports

<b>Acronym</b>	<b>Full Name</b>
MCO	Managed Care Organization
MDCP	Medically Dependent Children's Program
NBS	Newborn Screening
OHIP	Oral Health Improvement Program
OTTANF	One-Time Temporary Assistance for Needy Families
PAS	Personal Assistance Services
PEI	Prevention and Early Intervention
PHC	Primary Health Care
QI	Quality Improvement
RSV	Respiratory Syncytial Virus
RTC	Residential Treatment Center
SNAP	Supplemental Nutrition Assistance Program
SSI	Supplemental Security Income
STAR	State of Texas Access Reform Medicaid Managed Care Program
TANF	Temporary Assistance for Needy Families
TCHMB	Texas Collaborative for Healthy Mothers and Babies
TEHDI	Texas Early Hearing Detection and Intervention
THSteps	Texas Health Steps
TV CHD FFS	Title V Child Health and Dental Fee-for-Service
TVFC	Texas Vaccines for Children
TxHmL	Texas Home Living
TxSOC	Texas System of Care
WIC	Supplemental Nutrition Program for Women, Infants and Children
YES	Youth Empowerment Services Waiver