



# **Primary Health Care Services Program Report Fiscal Year 2021**

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**As Required by  
Texas Health and Safety Code, Section  
31.015**

**Texas Health and Human Services  
April 2022**



**TEXAS**  
Health and Human  
Services

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# Introduction

The Primary Health Care Services (PHC) Program report for fiscal year 2021 is submitted in accordance with [Texas Health and Safety Code, §31.015\(d\)](#).

Section 31.015(d) requires the Health and Human Services Commission (HHSC) to submit an annual report to the Governor and Texas Legislature. HHSC must make this report public, and the report must include:

- The number of individuals receiving care in the PHC program;
- The total cost of the program, including a delineation of the total administrative costs and the total cost for each service authorized under Health and Safety Code, Section 31.003(e);
- The average cost per recipient of services;
- The number of individuals who received services in each public health region; and
- Any other information required by the executive commissioner.

PHC serves adults and children with an income at or below 200 percent of the Federal Poverty Level (FPL) who are unable to access comparable care through insurance or other health care programs. PHC provides clients with the following: diagnosis and treatment; preventative and emergency medical services; family planning services; and primary health education.

## Required Data

In fiscal year 2021, the total cost for administration of the PHC program was \$11,743,728, of which \$11,490,243 was expended for the provision of medical services. PHC served 134,565 clients at an average cost of \$85.39 per client. This is a 34 percent increase in clients served from 100,102 clients in fiscal year 2020, and a 24 percent decrease in cost per client from \$113 on average in fiscal year 2020. The rise in client served from fiscal year 2020 to fiscal year 2021 may be attributed to the ongoing allowance of telehealth services along with a rise in face-to-face visits as a gradual decrease in COVID-19 spread was observed in communities across the state. An increased client count, without an increase in PHC funding, resulted in a lower average cost per client.

Table 1 outlines the number of individuals who received services in each public health service region.

**Table 1. PHC Clients by Health Service Regions**

<b>Health Service Region</b>	<b>Number of Clients Served</b>	<b>Percentage</b>
<b>1</b>	8,356	6.21%
<b>2/3</b>	67,948	50.49%
<b>4/5N</b>	7,710	5.73%
<b>5S/6</b>	19,916	14.80%
<b>7</b>	8,139	6.05%
<b>8</b>	9,603	7.14%
<b>9/10</b>	4,290	3.19%
<b>11</b>	8,603	6.39%
<b>Total</b>	<b>134,565</b>	<b>100%</b>

Table 2 outlines the total cost of all services and categorizes expenditures by the type of service provided.

**Table 2. Fiscal Year 2021 Contractor Costs Reported**

<b>Type of Service</b>	<b>Annual Cost</b>
Diagnosis & Treatment <sup>1</sup>	\$6,488,742
Emergency Medical Services	\$1,427,346
Preventative Health <sup>2</sup>	\$2,526,416
Health Education <sup>3</sup>	\$94,294
Laboratory <sup>4</sup>	\$360,096
Family Planning <sup>5</sup>	\$593,349
Administrative (Non-Medical Services) <sup>6</sup>	\$253,485
<b>Total Cost of Program</b>	<b>\$11,743,728</b>

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<sup>1</sup> Includes hypertension and diabetes screening, prescriptions, therapeutic dental services, and prenatal dental services.

<sup>2</sup> Includes services provided during office visits, cervical cancer screening, immunizations, and dental services.

<sup>3</sup> Includes instruction to individuals, groups, and communities.

<sup>4</sup> Includes radiology and mammography, as well as laboratory and sexually transmitted infection testing.

<sup>5</sup> Clients receive contraceptives (including traditional methods and Long Acting Reversible Contraceptives), counseling, sterilization, pregnancy testing, and prenatal care.

<sup>6</sup> Includes expenses such as supplemental payroll, required certification fees, and license renewals.