

A BRIGHTER TEXAS FOR EVERYBODY



AGENDA FOR THE 88TH LEGISLATURE

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PRIORITY 3: MAKE HEALTHY TEXAS WOMEN ACCESSIBLE

Healthy Texas Women (HTW) is the largest of Texas's safety net women's health programs. The program offers post-partum care, cancer screenings, STI testing and treatment, and contraception hundreds of thousands of low-income Texas women each year.

HTW and the expanded HTW Plus were designed by the legislature to ensure that all Texas women have access to critical, life saving healthcare. The program was **designed to be easy to access**, so eligible women wouldn't have to wait for services to get the care they need.

HEALTHY TEXAS WOMEN TIMELINE



CHANGES TO THE PROGRAM MAKE IT HARDER TO ACCESS

In recent years, changes to the program have made it harder to access services. These popular policies were recently removed from the program:

Automatic Enrollment: Previously, women were enrolled automatically into HTW following the end of their Medicaid for Pregnant Women coverage. Today new moms must file additional paperwork in the first month after giving birth to transfer into the program. Losing health coverage during the first year postpartum can lead to serious health complications.

Adjunctive Eligibility: Previously, women who applied to other safety net programs with similar eligibility, like SNAP, were automatically screened for and enrolled in Healthy Texas Women. Streamlining these screenings reduced administrative burdens for state agencies and ensured that Texas families got all the support they were eligible for.

Simple Application: Previously, the HTW application was two pages long and easy for women to fill out quickly. The new application ranges between 12 and 30 pages and asks for detailed financial information that younger applicants might not have access to.

THE SOLUTION

While the legislature may have limited power to change administrative requirements, there are important supports the legislature can provide to ensure that every eligible Texas woman has the support she needs to enroll. This can be done in the following ways:

1. Ensure that **applications are prioritized** and processed in a timely manner by HHSC.
2. Appropriate funds for **application assisters** in clinics.
3. Pass a **budget rider** directing HHSC to negotiate the return of automatic enrollment, adjunctive eligibility, & simpler application in the next round of negotiations.