



Texas Diabetes Council Assessment of State Agency Programs for the Prevention and Treatment of Diabetes

**As Required by
Texas Health and Safety Code, Section
103.0131**

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Executive Summary

Texas Health and Safety Code, Chapter [103](#), establishes the Texas Diabetes Council (TDC). Section [103.0131](#) requires the TDC to conduct a biennial statewide assessment of existing state programs for the prevention and treatment of diabetes. In conjunction with the assessment, the TDC develops a state plan, which includes TDC recommendations and priorities. It is available as a separate report on the Texas Department of State Health Services (DSHS) [legislative reports page](#).

The assessment includes information collected from DSHS and the Health and Human Services Commission (HHSC). Programs have addressed diabetes prevention and treatment in different ways, covering the entire state for some programs while targeting specific regions and counties for others.

Introduction

The TDC has 11 members appointed by the Governor and one nonvoting member each from DSHS, HHSC, Texas Workforce Commission Vocational Rehabilitation Division, Employees Retirement System of Texas, and Teacher Retirement System of Texas.

The statute requires the TDC to assess existing diabetes prevention and treatment programs at DSHS and HHSC. The assessment is in conjunction with a state plan for treatment, education, and training developed by the TDC. For more detailed information, see the 2025 State Plan for Diabetes and Obesity Treatment, located on the DSHS legislative reports page.

Per the statute, the assessment must include:

- The number of individuals served by the programs
- The areas where services to prevent diabetes and treat individuals with diabetes is unavailable
- The number of health care providers treating individuals with diabetes under the programs

The prevalence of diabetes among adults in Texas has increased over the past decade, from 10.9 percent in 2013 to 12.7 percent in 2023.¹ Today, more than 2.9 million (12.7 percent) Texas adults have been diagnosed with diabetes, and nearly 7.1 million (34 percent) Texas adults have prediabetes.² Prediabetes increases the likelihood of developing type 2 diabetes, heart disease, and stroke.³

¹ Texas Department of State Health Services. TDC 2024 State Plan, 2023 Behavioral Risk Factor Surveillance System and Texas Health Care Information Collection Tables. <https://www.dshs.texas.gov/sites/default/files/CHI-Diabetes/Docs/Reports/2025-tdc-state-plan-brfss-thcic-data.pdf>. Published September 2025.

² American Diabetes Association. The Burden of Diabetes in Texas. https://diabetes.org/sites/default/files/2023-09/ADV_2023_State_Fact_sheets_all_rev_Texas.pdf. Published March 2023. Accessed July 29, 2025.

³ Center for Disease Control and Prevention. The Surprising Truth About Prediabetes. Diabetes. <https://www.cdc.gov/diabetes/prevention-type-2/truth-about-prediabetes.html#:~:text=Prediabetes%20is%20a%20big%20deal,%2C%20heart%20disease%2C%20and%20stroke>. Published May 15, 2024. Accessed July 29, 2025.

According to the Texas Demographic Center, the number of persons with diabetes is projected to increase to nearly 8 million people by 2040, while the prevalence may rise to 23.8 percent.⁴ The annual financial toll on Texas due to diabetes is nearly \$26 billion, including \$18.9 billion in direct medical costs and \$6.7 billion in indirect costs.^{5, 6}

The mission of the TDC is to address current issues affecting the prevention, detection, management, and treatment of diabetes and obesity in the state. The TDC advises state agencies and the Legislature on these matters and may establish priorities and make recommendations.

The TDC surveyed applicable divisions within DSHS and HHSC to collect data regarding programs and services for people with diabetes.

⁴ Texas Demographic Center. Summary Report on Diabetes Projections in Texas, 2007 to 2040.

https://www.demographics.texas.gov/Resources/TDC/Publications/2008/2455/20080101_SummaryReportDiabetesProjectionsTexas.pdf. Accessed July 29, 2025.

⁵ American Diabetes Association. The Burden of Diabetes in Texas.

https://diabetes.org/sites/default/files/2023-09/ADV_2023_State_Fact_sheets_all_rev_Texas.pdf. Published March 2023. Accessed July 29, 2025.

⁶ Dall TM, Yang W, Gillespie K, et al. The Economic Burden of Elevated Blood Glucose Levels in 2017: Diagnosed and Undiagnosed Diabetes, Gestational Diabetes Mellitus, and Prediabetes. *Diabetes Care*. 2019;42(9):1661-1668. doi: <https://doi.org/10.2337/dc18-1226>

DSHS Diabetes Programs

The DSHS mission is to improve the health, safety, and well-being of all Texans.

Three DSHS programs contributed information for this assessment:

- Diabetes Prevention and Control Program (DPCP)
- Obesity Prevention Program (OPP)
- Office of Border Public Health (OBPH)

Please note that the figures provided below are estimates. In many cases, the exact number of individuals with diabetes served and the number of providers treating individuals with diabetes could not be determined.

Diabetes Prevention and Control Program

Eligibility/Population Served: The DSHS DPCP works extensively with statewide stakeholders (including local health departments (LHDs), community-based organizations, and health care partners) to implement programs for the prevention and self-management of diabetes.

The primary target populations for community-based activities are individuals and families disproportionately affected by prediabetes and type 2 diabetes, as well as those with limited access to health care.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served:

- 164 individuals participated in DPCP-supported Diabetes Prevention Program (DPP) classes.
- 213 individuals participated in DPCP-supported Diabetes Self-Management Education and Support (DSMES) classes.

Fiscal Year 2024 Services/Activities: The DPCP partnered with five LHDs and five academic/research institutions to provide diabetes self-management education and support, diabetes prevention services, pilot family healthy weight programs,

incorporate community health workers into diabetes care teams, and support the development of multi-directional e-referral systems:⁷

- Dallas-Fort Worth Hospital Council Education and Research Foundation
- El Paso Department of Public Health
- Houston Health Department
- Laredo Health Department
- Northeast Texas Public Health District
- San Antonio Metropolitan Health District
- Texas A&M University Health Science Center
- University of Texas Health Science Center at Houston
- University of Texas Health Science Center at Tyler
- University of Texas Medical Branch

Fiscal Year 2024 Geographic Reach: Public Health Regions 2/3 (North Texas), 4/5N (Northeast Texas), 6/5S (Southeast Texas), 8 (Southwest Texas), 9/10 (West Texas), and 11 (South Texas).⁸

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The DPCP does not provide direct medical services. Participants of DSHS-funded programs are referred to health care providers and connected with resources in their respective communities.

Obesity Prevention Program

Eligibility/Population Served: The OPP works with contracted LHDs to enhance coordinated integration of public health, healthcare, and community-based efforts. The OPP implements the Community and Clinical Health Bridge (CCHB) project, which supports LHDs as they engage community partners and healthcare systems to improve the management and treatment of obesity and related chronic diseases, as well as promote nutrition and physical activity.

⁷ Multi-directional e-referrals allow healthcare and service providers to send, receive, and track digital referrals both to and from one another, creating a more connected and coordinated system of care.

⁸ A map of the public health regions is available on the [DSHS website](#).

The CCHB project aims to improve obesity-related comorbid conditions and population impacts (access to preventive care, access to physical activity, and food security), particularly for under-resourced and low-income populations.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 214

Fiscal Year 2024 Services/Activities: Under the CCHB project, the OPP contracted with 14 LHDs to improve linkages between community organizations and healthcare systems and provide community health education. In fiscal year 2024, the CCHB project offered 15 health education interventions to the community specifically for people with diabetes and prediabetes.

Fiscal Year 2024 Geographic Reach: Public Health Regions 2/3 (North Texas), 4/5N (Northeast Texas), 7 (Central Texas), and 11 (South Texas).

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The OPP and its CCHD project does not provide direct medical services.

Office of Border Public Health

Eligibility/Population Served: The DSHS OBPH works with organizations along the Texas-Mexico border to develop and implement chronic disease prevention initiatives that promote healthy eating habits and increase physical activity among elementary school-aged children and individuals with pre-hypertension and hypertension.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: Unable to determine because the program is prevention based and serves all participants regardless of diabetes status.

Fiscal Year 2024 Services/Activities: The OBPH in Public Health Region 8 (Southwest Texas) partnered with Eagle Pass Independent School District to implement Coordinated Approach to Child Health ([CATCH](#)) with third and fourth grade students at participating schools as part of the Supplemental Nutrition Assistance Program Education (SNAP-Ed). As part of the SNAP Ed program, OBPH also implemented the Teen Battle Chef program aimed at teaching students ages 11-17 years about preparing healthy foods. Additionally, DSHS OBPH partnered with Federally Qualified Health Centers to provide education on heart disease prevention and management to individuals with pre-hypertension and hypertension.

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The OBPH does not provide direct medical services.

HHSC Diabetes Programs

HHSC's mission is to serve Texas.

Ten HHSC programs contributed information for this assessment:

- Area Agencies on Aging (AAA)
- Children with Special Health Care Needs Services Program (CSHCN)
- Children's Health Insurance Program (CHIP)
- County Indigent Health Care Program (CIHCP)
- Family Planning Program (FPP)
- Healthy Texas Women Program (HTW)
- Kidney Health Care Program (KHC)
- Medicaid
- Primary Health Care (PHC) Program
- Title V Maternal & Child Health Fee-for-Service Program (Title V MCH FFS)

Please note that the figures provided in the following sections are estimates. In many cases, the exact numbers of individuals with diabetes served and the number of providers treating individuals with diabetes could not be determined.

Area Agencies on Aging

Eligibility/Population Served:

- Age: Older Americans Act (OAA) funding requires an individual be 60 years of age or older. Family members and informal caregivers of individuals 60 years of age or older are also eligible for services.
- Income: There is no income limit.
- Resources: There are no resource limits.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served:

Fiscal Year 2024 Services/Activities:

- Diabetes Self-Management Program (In Person, Toolkit, and Virtual)

Fiscal Year 2024 Geographic Reach: Public Health Regions 4/5N (North Texas), 6/5S (Southeast Texas), and 8 (Southwest Texas).

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: HHSC Office of AAA does not provide direct medical services.

Children with Special Health Care Needs Services Program

Eligibility/Population Served: The HHSC CSHCN program serves individuals 20 years or younger who have special health care needs and individuals of any age with cystic fibrosis. The program is available to anyone who also:

- Lives in Texas;
- Has a medical condition that is expected to last at least 12 months, will limit one or more major life activities, requires a higher level of health care, and has physical symptoms; and
- Has an income level at or below 200 percent of the federal poverty level (FPL).

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 77

Fiscal Year 2024 Services/Activities: The CSHCN program supports family-centered, community-based strategies for improving the quality of life for children with special health care needs and their families. Available services include:

- Primary, preventive, and specialist care
- Medical equipment and supplies
- Medical transportation
- Medications and immunizations
- Case management
- Insurance premium payment assistance

- Family support services

Fiscal Year 2024 Geographic Reach: Statewide

DSHS supports the HHSC CSHCN Program by improving community-based services for children with special health care needs. Specifically, DSHS regional staff:

- Provide case management services to eligible individuals (both active and waitlisted); and
- Process incoming program eligibility applications.

Table 1 below outlines the distribution of fiscal year 2024 (FY24) CSHCN clients diagnosed with diabetes or pre-diabetes by public health region.

Table 1: FY24 CSHCN Clients Diagnosed with Diabetes or Pre-Diabetes Public Health Region

Public Health Region	Number of CSHCN Clients Eligible for Services	Number of CSHCN Clients Served
1 (Panhandle)	5	4
2/3 (North Texas)	31	29
4/5N (Northeast Texas)	2	2
6/5S (Southeast Texas)	16	14
7 (Central Texas)	13	11
8 (Southwest Texas)	6	5
9/10 (West Texas)	4	4
11 (South Texas)	8	8
Total Statewide	85	77

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The CSHCN program cannot determine the number of providers treating individuals with diabetes.

Children’s Health Insurance Plan

Eligibility/Population Served: CHIP offers low-cost health coverage for children from birth through age 18 years. CHIP is available to children who are:

- Not eligible for Medicaid or Medicare;
- A U.S. citizen or a lawfully residing non-citizen with a valid proof of immigration status;

- A Texas resident;
- Under age 19 years; and
- Uninsured for at least 90 days, with some exceptions, and living in a family with a household income that is above the Medicaid income threshold for their age and at or below 201 percent of the federal poverty level (FPL).⁹

CHIP covers children in families who have too much income or too many assets to qualify for Medicaid but cannot afford to buy private insurance. Most families in CHIP pay an annual enrollment fee to cover all children in the family. CHIP families also pay co-payments for doctor visits, prescription drugs, inpatient hospital care, and non-emergent care provided in an emergency room setting. The CHIP annual enrollment fee and co-payments vary based on family income. In addition, the total amount a family is required to contribute out-of-pocket toward the cost of health care services is capped at five percent of the family's income.¹⁰

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 14,077
(includes medical services only)

Fiscal Year 2024 Services/Activities: CHIP covers low-cost acute care services, behavioral health services, and prescription drugs to eligible children. Fifteen CHIP managed care organizations (MCOs) have contracted with a total of six pharmacy benefits managers (PBMs). The Texas Medicaid/CHIP Vendor Drug Program (VDP) website includes information on diabetes medications covered by CHIP and PBMs serving CHIP MCOs (txvendordrug.com). The following services are covered under CHIP:

- Inpatient general acute and inpatient rehabilitation hospital services
- Transplants
- Skilled nursing facilities (including rehabilitation hospitals)
- Outpatient hospital, comprehensive outpatient rehabilitation hospital, clinic (including health center), and ambulatory health care center services

⁹ If the child is living in a family below 133 percent of the federal poverty level, the child might be eligible for Medicaid instead.

¹⁰ In response to the American Rescue Plan Act of 2021, HHSC waived CHIP co-payments for COVID-19 vaccines, treatment, and testing services on March 11, 2021. HHSC reinstated co-payments for COVID-19 vaccines, treatment and testing services on October 1, 2024.

- Physician and physician extender professional services (including well-child exams and preventive health services such as immunizations)
- Durable medical equipment, prosthetic devices, and disposable medical supplies
- Home and community health services
- Inpatient and outpatient mental health services
- Inpatient, outpatient, and residential substance abuse treatment services
- Rehabilitation and habilitation services (including physical, occupational, and speech therapy, and developmental assessments)
- Hospice care services
- Emergency services (including emergency hospitals, physicians, and ambulance services)
- Case management and care coordination services
- Prescription drugs
- Dental services (provided through a separate program)
- Vision
- Chiropractic services
- Tobacco cessation
- Prenatal care and pre-pregnancy family services and supplies
- Birthing center services
- Services rendered by a certified nurse midwife or physician in a licensed birthing center

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: 1,804 (includes medical services only)

County Indigent Health Care Program

Eligibility/Population Served: The CIHCP provides health care services to eligible residents through the counties, hospital districts, and public hospitals in Texas. To qualify, an individual or household must:

- Have income at or below 21 percent of the FPL;
- Have resources that do not exceed \$3,000 when a person is aged or disabled and who meets the relationship requirements for a one-person or group CIHCP household and lives in the home, or \$2,000 for all other households;
- Live in a household, including a person living alone or together, where legal responsibility for support exists, excluding disqualified persons (a disqualified person is one who receives or is categorically eligible to receive Medicaid); and
- Live in the county in which they apply and intend to remain.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: Unable to determine because there is no available mechanism to collect client-level data from CIHCP providers.

Fiscal Year 2024 Services/Activities:

Basic services include:

- Primary and preventive services designed to meet the needs of the community, including immunizations, medical screening services, and annual physical examinations
- Inpatient and outpatient hospital services
- Rural health clinic services
- Laboratory and X-ray services
- Family planning services
- Physician services
- Payment for not more than three prescription drugs a month
- Skilled nursing facility services, regardless of the patient's age

Additional optional services may also be provided.

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: There are 302 programs that administer the CIHCP in the state. The CIHCP is unable to determine the number of providers treating individuals with diabetes.

Family Planning Program

Eligibility/Population Served:

- Men and women;
- Texas residents;
- Ages 64 years or younger;
- Are younger than 18 years and have parental consent, unless the circumstances of Texas Family Code, Chapter [32](#), apply;
- Have income at or below 250 percent of the FPL; and
- Do not have private health insurance or Medicaid, or their insurance does not cover family planning services

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 6,923

Fiscal Year 2024 Services/Activities:

The FPP provides a variety of services, including the following:

- Well-woman visits
- Contraception
- Family-planning and preventive health care
- Pregnancy testing and counseling
- Breast and cervical cancer screenings
- General health screenings

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: FPP services are provided by 49 contracted providers. The FPP is unable to determine the number of providers treating individuals with diabetes.

Healthy Texas Women Program

Eligibility/Population Served: The HTW program offers women's health and family planning services at no cost to eligible women. The HTW program is available to anyone who:

- Is a woman aged 15 through 44 years (women aged 15 through 17 years must have parental or legal guardian consent to apply and receive services);
- Is a U.S. citizen or eligible immigrant;
- Has an income at or below 204.2 percent of the FPL;
- Resides in Texas;
- Does not have health insurance, Medicaid, or CHIP; and
- Is not pregnant.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 3,960
(includes both medical and pharmacy services)

Fiscal Year 2024 Services/Activities: The HTW program covers women's health and family planning services at no cost to eligible women. The HTW program also provides treatment for diabetes.

HTW Plus is a set of additional physical health, mental health, and substance use disorder benefits that are available to HTW clients during the first 12 months of their eligibility following a pregnancy in addition to all standard HTW benefits. For HTW Plus clients with diabetes, the program provides laboratory studies, additional injectable insulin options, blood glucose testing supplies, glucose monitoring supplies, and voice-integrated glucometers for women with diabetes who are visually impaired.

Guidance regarding HTW and HTW Plus services can be found in the [Texas Medicaid Provider Procedures Manual \(TMPPM\)](#).

Providers should assist patients to meet all identified health care needs either directly or by referral. Pharmaceutical treatment for diabetes is also available through HTW. Coverage of certain outpatient prescription drugs is a benefit of HTW. The Texas VDP website includes information on diabetes medications covered by HTW (txvendordrug.com).

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: 1,489 (includes both medical and pharmacy services)

Kidney Healthcare Program

Eligibility/Population Served:

- Has a diagnosis of end-stage renal disease (ESRD) from a licensed physician;
- Gets regular dialysis treatments or has received a kidney transplant;
- Lives in Texas;
- Has an income of less than \$60,000 per year; and
- Is not eligible for medical or drug Medicaid benefits.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 1,612

Fiscal Year 2024 Services/Activities: The KHC program assists people with ESRD to obtain health care services. The KHC program helps clients with their dialysis treatments, access to surgery, prescription drugs, travel to health care visits, and Medicare premiums. ESRD is usually the result of years of chronic kidney disease (CKD) caused by inherited conditions, medical conditions (such as diabetes or hypertension), or an injury to the kidneys.

Due to client comorbidities, the KHC program recognizes the importance of covering certain medications unrelated to direct kidney care. This includes a range of diabetes-related products.

Fiscal Year 2024 Geographic Reach: KHC is a statewide program. It does not require a diagnosis code for clients with ESRD, and only individuals who reported a diagnosis of diabetes on their application are included in the count of individuals served with diabetes. Table 2 below outlines the distribution of FY24 KHC clients diagnosed with diabetes or pre-diabetes by public health region.

Table 2: FY24 KHC Clients Diagnosed with Diabetes or Pre-Diabetes Public Health Region

Public Health Region	Number of KHC Clients Eligible for Services	Number of KHC Clients Served
1 (Panhandle)	71	50
2/3 (North Texas)	654	443
4/5N (Northeast Texas)	124	90
6/5S (Southeast Texas)	518	335
7 (Central Texas)	241	155
8 (Southwest Texas)	393	239
9/10 (West Texas)	167	107
11 (South Texas)	310	193
Total Statewide	2,478	1,612

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The KHC program cannot determine the specific number of providers treating individuals with diabetes.

Medicaid

Eligibility/Population Served: Medicaid is a jointly funded state-federal health care program administered by HHSC. The program covers federally mandatory eligibility groups and some optional eligibility groups.

Individuals with income or resources above predefined limits are ineligible for Medicaid. The Texas Medicaid program covers a limited number of optional groups, which are eligibility categories that states are allowed, but not required, to cover under their Medicaid programs. For example, Texas chooses to extend Medicaid eligibility to pregnant women and infants up to 198 percent of the FPL (the federal requirement for pregnant women and infants is 133 percent of the FPL).

Another optional group that Texas covers is known as the “medically needy” group. This group consists of individuals whose income exceeds Medicaid eligibility limits but who do not have the resources required to meet their medical expenses. A “spend down” amount is calculated for these individuals by subtracting their incomes from the medically needy income limit for their household sizes. If their medical expenses exceed the “spend down” amount, they become Medicaid eligible. Medicaid then pays for those unpaid medical expenses and any Medicaid services provided after they are determined to be medically needy. Individuals with income

or resources above predefined limits are ineligible for Medicaid. Children with family income or resources above Medicaid thresholds may be eligible for CHIP.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: 251,273

Fiscal Year 2024 Services/Activities: Medicaid covers acute health care and long-term services and supports (LTSS) for people aged 65 years and older and persons with disabilities that meet income requirements. LTSS include home- and community-based services, nursing facility services, and services provided in intermediate care facilities for individuals with an intellectual disability or related conditions.

Guidance regarding coverage of equipment and supplies for persons with diabetes (such as insulin pumps, syringes, testing strips, etc.) is found in the TMPPM.

Since 2012, most Medicaid clients have obtained their prescription drug benefits through an MCO. Outpatient prescription drugs are a benefit of each Medicaid managed care program. Across the state, 16 Medicaid MCOs have contracted with a total of six different PBMs. Some PBMs contract with multiple MCOs. The Texas VDP website includes information on diabetes medications covered by Medicaid and PBMs serving Medicaid MCOs (txvendordrug.com).

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: 15,072

Primary Health Care Program

Eligibility/Population Served: For an individual to receive PHC program services, three criteria must be met:

- Gross family income must be at or below 200 percent of the FPL;
- Texas resident; and
- Not eligible for other programs/benefits providing the same services.

HHSC PHC has no age requirement.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: Unable to determine because there is no available mechanism to collect client-level data for the PHC program.

Fiscal Year 2024 Services/Activities: PHC providers are required to offer, at minimum, the following six priority primary health care services:

- Diagnosis and treatment
- Emergency services
- Family planning services
- Preventive health services, including immunizations
- Health education
- Diagnostic testing, such as X-rays and lab services

Some HHSC PHC contractors also provide the following services:

- Nutrition services
- Health screening
- Home health care
- Dental care
- Transportation
- Prescription drugs and devices, and durable supplies
- Environmental health services
- Podiatry services
- Social services

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The PHC program awarded funds to 52 grantees. The PHC program is unable to determine the number of providers treating individuals with diabetes because there is no available mechanism to collect client-level data.

Title V Maternal & Child Health Fee-for-Service Program

Eligibility/Population Served: The Title V MCH FFS program serves pregnant women of any age and children between the ages of 0 and 21 years. To qualify, individuals must:

- Have incomes at or below 185 percent of the FPL;
- Be Texas residents; and
- Not be eligible for other health care plans that provide the same services.

Fiscal Year 2024 Individuals with Diabetes or Prediabetes Served: Unable to determine.

Fiscal Year 2024 Services/Activities: Prenatal services for pregnant women are provided for up to 60 days while the applicant is awaiting CHIP Perinatal or Medicaid assistance. These services include:

- Complete history
- Physical examination and clinical assessment
- Family planning services
- Counseling and education services
- Referrals as indicated by medical history, physical exams, or clinical assessment
- Routine prenatal laboratory and diagnostic testing

Preventive and primary health services are provided for youth 21 years and younger. These services include:

- Well-child checkups
- Laboratory, vaccines, and minimal sick care
- Case management for high-risk infants up to 1 year old

Dental services are provided for children and pregnant women up to three months after they have given birth.

Fiscal Year 2024 Geographic Reach: Statewide

Number of Health Care Providers Treating Individuals with Diabetes Under the Program: The Title V MCH FFS program awarded funds to 57 grantees. The Title V MCH FFS program is unable to determine the number of providers treating individuals with diabetes because there is no available mechanism to collect client-level diagnostic data.

Conclusion

This assessment demonstrates that Texas state agencies provide numerous programs that actively support the prevention, screening, and treatment of diabetes for all Texans from birth through older adulthood, particularly populations that are at greater risk from prediabetes and diabetes. This includes those who experience barriers in access to preventive care services, experience food insecurity, have an income near the poverty level, or who experience comorbidities that place them at greater risk of complications from diabetes.

Given that diabetes prevalence is projected to significantly increase over the next 20 years, the activities outlined in this assessment are vital to improve data, service delivery, and health outcomes while identifying specific priorities to address in future activities. The recommendations outlined in the [TDC state plan](#) also serve as a crucial resource in improving health outcomes from diabetes and meeting the goals of the TDC. The TDC is dedicated to continuing to identify ways to simultaneously reduce overall expenditures while improving the delivery of evidence-based, cost-effective prevention and health services that improve population health.