

2025 PRISM HEALTH NORTH TEXAS STATE LEGISLATIVE PRIORITIES

Ensure Funding for HIV/STI Treatment and Prevention Services

- Fully fund the Texas HIV Medication Program (THMP) for FY 2025-27
- Fully fund HIV state prevention services for FY 2026-27
- Fully fund the Exceptional Item to address the statewide congenital syphilis epidemic

Include an HIV Test in Routine STI Testing

- Include an HIV test as part of a routine medical screening, unless the patient chooses to opt out verbally or in written form

Create a Syringe Exchange Pilot Program

- Establish infectious disease control syringe exchange pilot programs in Bexar, Harris, Travis, Dallas, Webb, El Paso, and Nueces counties

Remove HIV as a Deadly Weapon from the Penal Code

- Amend Sections 22.02 and 22.021 of the Penal Code by stating “The use of a deadly weapon does not include the transmission of bodily fluid by an individual infected with Human Immunodeficiency Virus (HIV).”

In conjunction with the Texas Association of Community Health Centers (TACHC)

Invest in Primary Care and Coverage

- Fund the FQHC Incubator Program

Strengthen the Behavioral Health Workforce

- Allow behavioral health associates (LMFT-A, LPC-A, and LMSW) to be reimbursed for Medicaid services while completing their supervised clinical hours
- Invest in training and education pipelines to increase behavioral health professionals ready to work in FQHCs

Improve Efficiencies in Medicaid

- Add FQHCs as providers eligible for expedited credentialing from Medicaid MCOs and private payers
- Remove the FQHC three-visit limit in the Healthy Texas Women program

Protect 340B for Health Center Patients

- Require drug manufacturers to allow the use of contract pharmacies in the 340B program
- Protect FQHCs from discriminatory contracting and other efforts by PBMs to take 340B savings from health centers

PRISM HEALTH NORTH TEXAS 89TH TEXAS LEGISLATIVE SESSION RECAP

Every odd-numbered year, the Texas Legislature meets in a regular session that lasts for 140 days. During this time, lawmakers propose, debate, and pass legislation that affects the entire state. During the 89th legislative session, we achieved both clear, decisive victories and smaller, step-by-step gains that will continue to move our priority issues forward.

This summary highlights both our outright wins and incremental progress, reflecting the strategic efforts made to advance our agenda and lay the groundwork for future success.

<p>8,719 Bills filed</p>	<p>2,765 Resolutions filed</p>	<p>1,189 Bills sent to Governor Abbott for his signature</p>
<p>7,530 (86.4%) Bills that died</p>	<p>Sept. 1, 2025 All approved bills go into effect</p>	<p>3 Bills PHNTX staff provided testimony for</p>
<p>60+ Attended HIV Advocacy Day at the Capitol and scheduled office visits</p>	<p>40+ PHNTX staff visits with legislators and staff</p>	<p>10 Educational presentations given to a variety of groups</p>

PHNTX staff attended the Texas Association of Community Health Centers Policy & Issues conference and the corresponding advocacy day, as well as the mini-advocacy day, highlighting policy that supports CHCs

PHNTX Legislative Priorities Analysis

Ensure Funding for HIV/STI Treatment and Prevention Services

SB 1 - BUDGET

HIV advocates secured a small portion of the \$338 billion state budget, and a long-sought- after win! After four years of attending numerous Medication Advisory Committee meetings, engaging in direct discussions with DSHS leadership, providing testimony, making phone calls, sending emails, and utilizing every available advocacy method, Long-Acting Injectables (LAIs) have finally received a budget allocation. \$600,000 has been allocated, \$300,000 for FY26 and \$300,000 for FY27.

The Texas HIV Medication Program (THMP) also received \$1 million per year, which can be used towards LAIs, if necessary. Department of State Health Services (DSHS) Exceptional Item 7 \$8.4 million/year to improve child mortality and morbidity due to Congenital Syphilis by establishing rapid response regional nurse teams, increasing provider education, developing a hotline, and creating a public awareness campaign.

Include an HIV Test in Routine STI Testing

HB 50 – REPRESENTATIVE VENTON JONES (HD 100) *

Include an HIV test as part of a routine STI screening, unless the patient chooses to opt out verbally or in written form. Voted off the House floor, heard in the Senate Health & Human Services committee, where it was left pending. Thanks to the leadership of Representative Jones, this bill moved further than it ever has before. We look forward to crossing the finish line in 2027!

Create a Syringe Exchange Pilot Program

HB 3174 – REPRESENTATIVE TONI ROSE (HD 110) *

Establish infectious disease control syringe exchange pilot programs in Bexar, Harris, Travis, Dallas, Webb, El Paso, and Nueces counties Voted out of the House, never heard in the Senate.

Remove HIV as a Deadly Weapon from the Penal Code

HB 1459 – REPRESENTATIVE VENTON JONES (HD 100)

Amend Sections 22.02 and 22.021 of the Penal Code by stating “The use of a deadly weapon does not include the transmission of bodily fluid by an individual infected with Human Immunodeficiency Virus (HIV).” Referred to the House Criminal Jurisprudence Committee, never heard.

Eliminate PrEP Prior Authorizations

HB 1680 – REPRESENTATIVE VENTON JONES (HD 100) *

Eliminate prior authorizations for prescription drug benefits related to the prevention of HIV. Voted out of the Insurance committee, died in Calendars before being heard on the House floor.

Invest in Primary Care and Coverage

Fully fund the FQHC Incubator program, which provides funding to enhance staffing, expand services, support capital projects, and provide technical assistance for new and existing Community Health Centers (CHCs). Fully funded in the final budget at \$40 million.

Strengthen the Behavioral Health Workforce

HB 1716 – REPRESENTATIVE DREW DARBY (HD 72)

Would add licensed master social workers (LMSWs) completing LCSW licensure, licensed professional counselor associates (LPC-As), and licensed marriage and family therapist associates (LMFT-As) as reimbursable Medicaid Providers. Passed out of the House but did not receive a hearing in the Senate.

SB 646 – SENATOR ROYCE WEST (SD 23)

Adds LMSWs, LPC-As, LMFT-As, and school counselors with master’s degrees as mental health professionals who allow them to receive education loan repayment assistance. Increases the amount of loan repayment assistance by \$20k for different professions, as well as additional opportunities for those currently eligible. This bill has been signed by the Governor and goes into effect on September 1st.

Improve Efficiencies in Medicaid

HB 3151 – REPRESENTATIVE LACY HULL (HD 138)

Would allow health centers to be eligible for expedited credentialing by Medicaid managed care plans. With expedited credentialing, an MCO must process provider claims as if you are an in-network provider, and the decision process is shortened from 90 to 30 days. This bill has been signed by the Governor and goes into effect on September 1st.

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SB 1266 – SENATOR CAROL ALVARADO (SD 6)

Requires HHS to create a support team to help complete the Medicaid provider enrollment and credentialing processes. Requires an annual evaluation on the timeliness of assistance and an online portal to submit complaints and feedback regarding the credentialing process. Requires HHS to send out paper notices prior to the revalidation period. This bill has been signed by the Governor and goes into effect on September 1st.

Protect 340B for Health Center Patients

HB 3265 – REPRESENTATIVE DREW DARBY (HD 72)

Prohibits limiting the use of contract pharmacies for 340B covered entities and prohibits discriminatory contracting practices by PBMs. This bill was passed out of committee in the House but did not receive a House floor vote.

LGBTQ+ Focused

HB 229 – REPRESENTATIVE ELLEN TROXCLAIR (HD 19)

Codifies the August 2024 DPS and Vital Statistics policies prohibiting trans and gender expansive Texans from making gender marker amendments on driver's licenses, state IDs, and Texas birth certificates. This bill has been signed by the Governor and goes into effect on September 1st.

SB 1257 – SENATOR BRYAN HUGHES (SD 1)

Mandates that any healthcare plan that covers care for trans patients must also cover any possible "adverse consequences" and costs related to detransitioning. This bill has been signed by the Governor and goes into effect on September 1st.

SB 1188 – SENATOR LOIS KOLKHORST (SD 18)

Requires that electronic health records (EHRs) include a space in a person's record for "biological sex at birth", regardless of their gender identity or the status of their legal documents. This bill has been signed by the Governor and goes into effect on September 1st.

If you have any questions, please contact Januari Fox,
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