



# Texas Children and the 2025 Legislative Session

What the Texas Legislature accomplished  
for children and where it fell short

June 25, 2025



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# Introduction

As children's advocates look back on the 2025 legislative session, we have a lot to celebrate, a number of disappointments, and plenty of unfinished business that will require our focus and dedication during the months ahead.

We're excited about some of the steps state lawmakers took to support children, particularly through the financial investments they made. They made a historic \$100 million commitment to child care scholarships, giving thousands of low-income parents an opportunity to go to work or school while their children attend a high-quality child care program. Legislators passed a badly-needed \$8.5 billion public school funding bill. Additionally, the Legislature invested in overhauling outdated technology in the state's application system for SNAP nutrition assistance and Medicaid health insurance; improved funding for mobile youth crisis teams and other children's mental health services; and, for the first time, devoted state funding to continue the Texas Family First pilot program to keep kids safely out of foster care.

Legislators also passed a suite of bills to support older youth in foster care, legislation to improve support for breastfeeding, a bill for newborn babies' health coverage, and key child care proposals, including legislation to boost access to child care for child care educators.

Other important initiatives passed the House but came up short in the Senate, including proposals to extend pre-k eligibility to kids with disabilities, establish a Medicaid pilot program to cover doula services, and notify parents if their SNAP applications show their children are also eligible for Medicaid health insurance. While these bills did not win final approval, we are gratified that they passed the House and hopeful we can take that momentum into the next legislative session.

In addition to these disappointments, we're concerned that some bills that did pass, such as pre-k legislation, will pose new challenges for families or the providers who serve them.

These successes and disappointments, as well as many others, are explained in greater detail in the following pages.

The results of the session are a mixed bag for Texas kids and families, but I am so grateful to our staff, our partners, and the Texas families who shared their stories with legislators. Working together, we helped pass legislation, build momentum for policies we can get over the finish line next session, influence bills through committee testimony and one-on-one conversations, and, in a few cases, keep potentially harmful policy ideas from moving forward. We're also thankful to the lawmakers and staffers who worked tirelessly throughout the legislative session and championed good bills in bipartisan ways.

As we catch our breath after the session, we are already pivoting to the next steps. There's no time to lose. While the Legislature may fade from the headlines until the next session in 2027, we know the challenges facing Texas families won't fade away for two years. During the interim, the opportunities to improve children's lives may not get as much attention as a major vote in the Legislature, but there's critical work for us to do outside of the spotlight.

So in the coming weeks and months, our team will keep fighting for Texas kids by shaping the implementation of bills that passed, building on the momentum from this session, and developing fresh ideas as we collaborate with our partners and listen to Texas families. We will also continue to oppose the disturbing Medicaid and SNAP cuts that Congress is considering.

We appreciate your partnership on this difficult journey to ensure that Texas children from every zip code thrive and reach their full potential.

Onward!

***Stephanie Rubin***  
**CEO**

## Review of Policy Progress During the 2025 Texas Legislative Session:

# Early Learning

This was a busy session for early learning issues, with the Legislature making a historic investment in child care, passing several strategic child care bills, and approving an \$8.5 billion school finance bill that includes investments in early learning. Unfortunately, lawmakers also took steps this session that could pose new challenges in pre-k.

We are thrilled that the Legislature approved an additional \$100 million for more child care scholarships — a policy priority that our staff has tirelessly championed. These scholarships, provided by the Texas Workforce Commission, have proven to be very effective in helping low-income Texas parents go to work and find high-quality child care for their kids, but approximately 95,000 families are on the waiting list for a scholarship. The new funding, drawn from unexpended TANF dollars, means thousands of additional families will now get a scholarship. We are particularly thankful to Speaker Dustin Burrows, Chair Greg Bonnen, Chair Armando Walle, and Chair Joan Huffman for their leadership on this issue. We also appreciate all the organizations from across Texas who joined with us in advocating for this investment. This vital investment means more parents can work and more kids can thrive — but it can't be a one-time fix. We look forward to working with legislative leaders and partners on a sustainable, long-term funding approach that builds on this investment.

We're also excited that lawmakers passed a package of other important bills to improve access to high-quality child care:

- SB 462 by Sen. Kolkhorst will enable child care programs to recruit and retain staff and improve the supply of child care by helping child care educators secure care for their own kids.
- SB 599 by Sen. West will remove local barriers to licensed and registered child care homes.

- HB 2294 by Rep. Thompson will provide a new tool in the toolbox for local communities to support and incentivize child care programs that participate in the Child Care Services program.

With so many bills supporting child care this session, we were fortunate to partner with many other groups from across the state who helped champion these reforms.

One of the big themes this session was improving and streamlining the state's governance and oversight of early childhood education programs. Lawmakers passed several bills to assess ways state agencies can provide better support for families and providers:

- HB 2310 by Rep. Ordaz will bring together key state agencies to develop a plan to improve early learning opportunities for young children with disabilities.
- HB 117 by Rep. Schoolcraft establishes the Governor's Task Force on Governance of Early Childhood Education and Care.
- HB 3963 by Rep. Capriglione codifies the creation of an Early Childhood Integrated Data System to better assess program capacity and effectiveness.
- HB 4903 by Rep. Harris Davila establishes a Quad-Agency Child Care Initiative to review and streamline state regulations that impact child care programs.





Our team will be busy engaging with these initiatives to ensure they are improving supports for children and families. Additionally, they pose an opportunity to identify new, innovative policy solutions for future legislative sessions.

Some of the biggest debates of the legislative session were about sweeping, contentious education bills. The Legislature created a new Education Savings Account program for private schools, child care programs, and homeschooling, which includes children eligible for public pre-k. They also passed a major public school funding bill to provide a much-needed \$8.5 billion investment in public education. The bill primarily directs new funding to teacher pay while also boosting the state's investment in special education, school safety, and other priorities.

The school funding bill, HB 2 by Rep. Buckley, tackles longstanding special education challenges and begins to address bilingual teacher shortages. It enacts recommendations of the Texas Commission on Special Education Funding that restructure special education funding to reflect the intensity of services provided. For example, a student who receives public education services in a hospital or homebound environment will

now generate more funding to help cover the cost of those services than a student who receives periodic support in a general education classroom. The bill also waives fees for special education and bilingual education certification exams and applications, an important step to ease teacher shortages in these areas.

HB 2 also includes several provisions that focus on early learning. The bill expands access to pre-k by ensuring children of public school teachers are eligible for public pre-k in the school district where they work. HB 2 also increases the Early Education Allotment (EEA) by an estimated \$90 million by adding a small weight to all kindergarten through third-grade students in Average Daily Attendance (ADA). In the 2024-2025 school year, the EEA provided approximately \$800 million to school districts across the state. Districts can use EEA funding for pre-k as well as the increasing costs of early literacy and numeracy requirements. Additionally, lawmakers considered multiple proposals to address the pre-k funding gap. Currently, the state directly funds only half of the full day of pre-k that school districts are required to provide to eligible four-year-olds. Ultimately, the bill changes the distribution of existing EEA funding, but it does not correct the half-day funding formula. Previously, the EEA was calculated and disbursed to

schools based on the ADA of low-income or emergent bilingual students in kindergarten through third grade. Now, under HB 2, the state will distribute EEA funds to districts largely based on their pre-k attendance. We will be monitoring how this change impacts the funding available for pre-k programs for districts.

Unfortunately, HB 2 also creates potential roadblocks for tuition-based pre-k and the construction of new pre-k classrooms. School districts currently have the option to offer tuition-based pre-k to families outside of eligibility for free pre-k if they have space available. Under HB 2, starting in the 2027-2028 school year, schools may not be able to offer tuition-based pre-k unless one of four new intermediary organizations designated by the Texas Education Agency (TEA) verifies that an eligible private child care provider is unavailable to serve the families who are seeking to enroll. These intermediary organizations would also verify the availability of private child care providers before a school district could repurpose, lease, or build a classroom for pre-k students, who they are required by law to serve. TEA will have to determine how the intermediaries carry out these two new roles. We will closely monitor the implementation of these provisions.

We also need to keep an eye on a concerning provision in HB 6 that allows for expanded use of out-of-school suspensions in pre-k through second grade. In 2017, the Legislature took a bipartisan step to limit out-of-school suspensions in these grades and encourage more effective behavioral supports for children in these early grades. HB 6 expands the circumstances in which out-of-school suspension is allowed in pre-k through second grade, including for disruption. As a result, school districts can now remove four- and five-year-olds from school for behaviors common for their age, causing them to miss essential foundational learning.

Finally, there were important proposals that passed the House — thanks to hardworking legislators as well as our own staff — but did not make it through the Senate:

- The House version of HB 2 would have extended public school pre-k eligibility to include three- and four-year-olds with disabilities. We're disappointed that legislators ultimately removed that provision from the bill. Currently, pre-k eligibility is limited to three- and four-year-olds who meet income eligibility, are learning English, or meet one of the other eligibility criteria.

**The House version of HB 2 would have extended public school pre-k eligibility to include three- and four-year-olds with disabilities. We're disappointed that legislators ultimately removed that provision from the bill.**

- Similarly, the House passed HB 1581 by Rep. Guerra, but the Senate did not take it up. The bill would have enabled TEA to monitor the effectiveness of bilingual and ESL programs, provide timely technical assistance, and improve literacy outcomes. Lawmakers should revive and pass these two proposals next session.

This legislative session brought important progress for early childhood education policy, but there is significant work left to do. Families need access to early learning support — whether they opt to keep their young children at home, sign them up for pre-k, or enroll them in child care. To accomplish that goal, stakeholders must collaborate to develop a cohesive, long-term strategy. Policymakers must commit to sustaining their investment in child care scholarships and work with community partners and external stakeholders to thoughtfully implement the bills passed this session. Furthermore, rather than introducing new pre-k barriers, state leaders should return to the decade-long trend of harnessing the power of pre-k so that more children start school ready to thrive in kindergarten and beyond.

# OUTCOMES FOR KEY EARLY LEARNING LEGISLATION

**PASSED**

## Support Children

### **HB 2294 by Rep. Thompson**

Similar to SB 972 by Sen. Zaffirini

Allows local communities to provide reimbursement rates to child care programs at the state's established reimbursement rate to incentivize child care programs to enroll more eligible families.

### **HB 2310 by Rep. Ordaz**

Develops a strategic plan to improve early learning opportunities for young children with disabilities.

### **HB 3963 by Rep. Capriglione**

Similar to SB 2194 by Sen. Paxton

Codifies the creation of an Early Childhood Integrated Data System to better assess the effectiveness of current policies and better understand where families are enrolling and gaps in supply.

### **SB 462 by Sen. Kolkhorst**

Similar to HB 3807 by Rep. Harris Davila

Improves access to child care for child care educators by including them in the priority category for child care scholarships if they are eligible.

### **SB 599 by Sen. West**

Similar to HB 4127 by Rep. A. Davis

Removes local barriers to licensed and registered child care homes.

### **SB 1265 by Sen. Alvarado**

Similar to HB 5122 by Rep. Harris Davila

Directs the Texas Workforce Commission to prominently publish resources on its website to help employers better support their employees' child care needs.

## Impact Children

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### HB 2 by Rep. Buckley

Contains provisions of HB 123 by Rep. Dutton, SB 568 by Sen. Bettencourt, and SB 2252 by Sen. Creighton

Increases school funding by \$8.5 billion, redistributes existing Early Education Allotment funding in an amount equal to half average daily attendance (ADA) for eligible pre-k students, restructures special education funding to reflect the actual services provided, adds new restrictions to tuition-based pre-k for children in public schools, requires districts to seek verification from an outside intermediary to build new pre-k classrooms, waives fees for special education or bilingual education certification, and takes other steps on early learning and school finance.

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### HB 117 by Rep. Schoolcraft

Establishes the Governor's Task Force on Governance of Early Childhood Education and Care under the Texas Education Agency to address governance challenges impacting early childhood education in Texas.

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### HB 4903 by Rep. Harris Davila

Similar to SB 2049 by Sen. Birdwell

Establishes a Quad-Agency Child Care Initiative that brings the TWC, HHSC, DFPS, and TEA together to review and streamline state regulations that impact child care programs.

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### SB 2 by Sen. Creighton

Creates an Education Savings Account (ESA) program, sometimes referred to as vouchers. Includes 3- and 4-year-old children who are eligible for Texas public pre-k based on their income, home language, or other criteria. High-quality child care providers are able to participate if they are accredited through the Texas Private School Accreditation Commission or if they meet other quality benchmarks.

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### SB 568 by Rep. Bettencourt

Revises special education funding and policies.

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## Raise Concerns

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### HB 6 by Rep. Leach

Expands the ability to issue out-of-school suspensions to students in pre-k through second grade and makes other school discipline changes — such as extending limits on in-school suspensions and authorizing a virtual disciplinary alternative education program — that could result in more students removed from the classroom without adequate support for their behavioral or academic needs.



## DID NOT PASS

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### Support Children

**HB 175 by Rep. M. González**

Would have created an optional certification for child care providers who provide exemplary services for children with disabilities and their families and enabled the Texas Workforce Commission to establish and administer a grant program to support these providers.

**HB 1581 by Rep. Guerra**

Similar to SB 152 by Sen. Menéndez

Would have enabled TEA to monitor the effectiveness of bilingual and ESL programs, provide timely technical assistance, and improve literacy outcomes.

**HB 1996 by Rep. Hernandez**

Similar to SB 2526 by Sen. Zaffirini and House version of HB 2 by Rep. Buckle

Would have added children with disabilities to Texas pre-k eligibility.

**HB 2271 by Rep. Walle**

Would have required child care providers to report their capacity and enrollment information to the Texas Workforce Commission so families can more easily find available child care slots, programs can advertise availability, and policymakers can assess supply in the state.

**HB 3191 by Rep. Button**

Would have created an employer child care contribution partnership program, a child care innovation pilot program, and a franchise tax credit for certain employer child care contributions.

**HB 4024 by Rep. Walle**

Similar to SB 1739 by Sen. West

Would have established a state fund for additional child care scholarships.

**HB 5086 by Rep. Ordaz**

Similar to SB 3007 by Sen. Blanco

Would have provided innovation grants that address pressing local child care needs, shortages of infant care, care for children with disabilities, and nighttime care.

### Impact Children

**HB 4 by Rep. Buckley**

Would have replaced STAAR tests and revised the accountability system for Texas public schools.

## Review of Policy Progress During the 2025 Texas Legislative Session:

# Healthy Families

While lawmakers passed a few important health care bills, they fell short of getting key maternal and child health policies across the finish line this session. They did, however, include important investments in the state budget. In particular, we are grateful that lawmakers approved two of the top budget recommendations that our staff and partners have pushed since the start of the budget development process last year: funding to upgrade the Medicaid and SNAP application system and funding for Early Childhood Intervention for infants and toddlers with disabilities.

This session, the Legislature made the following investments, taking important steps toward improving maternal health and advancing access to care across Texas.

- Legislators invested \$139 million in General Revenue (\$386 million in All Funds) in strategies to improve the Medicaid and SNAP eligibility system, including overhauling outdated technology so the system functions properly for families and hiring additional staff. The agency had originally requested \$300 million in General Revenue. For years, the state has used a clunky, inefficient, outdated system to process applications and renewals for SNAP and Medicaid health insurance, creating a backlog of more than 200,000 unprocessed Medicaid applications for most of 2024 and leaving parents waiting an average of 41 days for a Medicaid eligibility determination — with some waiting over 160 days.
- They approved HHSC's request for an additional \$18 million for the biennium for the Early Childhood Intervention program, which is a crucial step to ensure providers can meet the anticipated increase in infants and toddlers with disabilities needing services across Texas. In addition to funding for rising enrollment, we will continue to urge the Legislature to raise per-child funding to account for providers' rising costs and ensure every child receives the full range of services they need to thrive during a critical time in their development.
- The Texas Legislature maintained funding for women's preventive safety-net programs — Healthy Texas Women, Family Planning Program, and Breast and Cervical Cancer Services — with total funding at \$460 million over the biennium. While the session began with concerns, particularly the significant underfunding of these programs in the first draft of the budget, the final budget ultimately restored these key funding streams to preserve access to preventive and reproductive health care for low-income Texans. Within that investment, lawmakers doubled funding for the state's Women's Preventative Mobile Health Units (MHUs), providing \$20 million for the biennium with a focus on reaching underserved and unserved rural communities. These mobile clinics play a critical role in delivering prenatal care, screenings, and health education to Texans who might otherwise have no access to nearby providers.
- The budget also strengthened the state's maternal safety and quality improvement infrastructure. TexasAIM, a key program aimed at reducing preventable maternal complications in hospitals, received a 50% increase in funding compared to

the last biennium, bringing its total to \$3.5 million and adding 8 new full-time staff. Additionally, \$5.6 million in general revenue, secured through the supplemental budget bill (HB 500), will support improvements to the state's Maternal Mortality Review System and the Maternal and Child Health Quality Improvement System. While this fell short of advocates' original \$9.9 million recommendation, the dedicated funding marks meaningful progress toward building a more responsive, data-driven approach to maternal health challenges.

- In response to the state's rising rates of congenital syphilis, the Legislature allocated funding within the DSHS HIV/STD prevention strategy for a comprehensive effort to reduce related child mortality and morbidity. The funds will be used for provider education, the development of a statewide hotline, deployment of rapid response regional nurse teams, a public awareness campaign, and improvements to IT systems.
- To support the health care safety net, the Legislature allotted \$40 million in state funds to replace expiring federal funds for the Federally Qualified Health Center (FQHC) Incubator Program. This initiative helps nonprofit organizations grow their capacity to deliver comprehensive care, including maternal, behavioral, and preventive services, to uninsured and underserved Texans.
- To address the shortage of OB-trained physicians in rural and high-need communities, the state allocated \$5 million over the biennium to support the Family Medicine Obstetrics Program. These funds will support postgraduate training, salaries, and expansion of programs aimed at equipping family medicine doctors with the skills to safely deliver babies and care for mothers in areas that lack access to OB specialists.
- Lawmakers allocated more than \$200 million to HHSC for the rural hospital grant programs created this session under HB 18 by Rep. Van Deaver. These grants will support workforce recruitment and retention — particularly for OB-GYNs, emergency physicians, and nurses — and improve access to maternal care through expanded services, innovative care delivery models (such as telehealth), and enhanced critical care transport systems.



In addition to these investments, the Legislature passed Rider 76, giving HHSC the authority to implement a short-form application for the Healthy Texas Women program. This change eliminates the need for a burdensome thirty-page Medicaid application, streamlining enrollment and ensuring that eligible women can receive timely care without facing unnecessary administrative delays.

Beyond the state budget, lawmakers passed a handful of important health care bills:

- HB 136 by Rep. Hull will improve support for breastfeeding by covering lactation services under Medicaid health insurance.
- Nearly 1 in 5 Texas newborns eligible for automatic enrollment in Medicaid health insurance are not being enrolled on time, leaving them uninsured and missing critical early checkups. HB 3940 by Rep. Johnson will now begin to address that challenge by providing additional information to parents and health care providers to ensure that newborns can go to the doctor while waiting to be manually enrolled into health coverage.
- HB 713 by Rep. Howard will allow the state's Maternal Mortality and Morbidity Review Committee to study maternal deaths in a more timely manner, which should lead to more effective interventions.



- HB 26 by Rep. Hull authorizes Medicaid to pay for nutrition counseling and instruction services and authorizes a pilot program that will provide medically tailored meals to high-risk pregnant women on Medicaid.
- SB 25 by Sen. Kolkhorst requires additional nutrition curriculum and prohibits schools from withholding PE or recess for academic or behavioral reasons through grade eight. SB 25 also added advisory committees to advise state agencies on nutrition and health. It will be important for health experts to engage with these committees to ensure that health agencies continue to make recommendations based on scientific data.

Unfortunately, other critical health care bills that passed the Texas House, including HB 321 and HB 1201, did not pass the Senate.

- Under HB 321 by Rep. Bucy, the state would have notified parents if their uninsured kids were confirmed eligible for Medicaid health insurance based on a SNAP application. By providing these parents with timely, targeted information, the bill would have reduced the state's sky-high uninsured children's rate. Approximately half of the Texas children going without health insurance are eligible for coverage through Medicaid or CHIP.
- HB 1201 by Rep. Manuel would have created a pilot program to cover doula services under Medicaid. A doula is a non-medical health professional who provides physical, emotional, and educational support for women and their families throughout the prenatal, birth, and postpartum periods. Studies continue to link doulas with reduced rates of preterm births, low birth weight babies, postpartum depression, and cesarean delivery, as well as increased rates of breastfeeding.

We're concerned that the Governor vetoed Summer EBT funding appropriated by the Legislature to draw down federal funds for feeding hungry children during the summer.

We're also disappointed that the Legislature continues to reject federal Medicaid expansion funding. While state leaders continue to emphasize that Medicaid should serve the "neediest" Texans, lawmakers did not even hold a hearing on legislation to draw down these funds to provide a health insurance option to working adults who live in poverty.

Finally, beyond the Legislature, we're deeply concerned about Congressional efforts to pass Medicaid and SNAP cuts that would take needed health care and food away from Texans. The budget reconciliation bill that passed the US House in May would knock an estimated 200,000 Texans off their Medicaid health insurance through red tape (according to analysis by KFF). It would prohibit new "provider taxes," making it harder for hospitals to fund new services, such as labor and delivery, as the state population grows. The bill also puts 800,000 Texans at risk of losing all or some of their SNAP food benefits (according to analysis by the Center on Budget and Policy Priorities). The new red tape proposed in the bill also has the potential to undermine the Medicaid and SNAP technology upgrades that the Legislature just invested in.

As we look ahead, three clear priorities are emerging. First, Texans need to defend — and bolster — the safety net system. We need members of Congress to oppose the proposed cuts to Medicaid and SNAP. We urge state leaders to strengthen Medicaid by increasing provider rates, improving enrollment and renewal procedures for eligible Texans, and covering key services for youth with mental health challenges, pregnant women, and others. Second, Texas leaders need to make sure uninsured Texans have health care options, such as community clinics, telehealth networks, FQHCs, and faith-based providers. Third, we welcome the Legislature's current interest in nutrition and physical activity, but they need to pair it with access to timely, consistent health care that health insurance helps provide.

# OUTCOMES FOR KEY HEALTHY FAMILIES LEGISLATION



## PASSED

### Support Children

**HB 26 by Rep. Hull**

Similar to SB 3001 by Sen. Kolkhorst

Creates a pilot program to allow Medicaid coverage of medically-tailored meals for pregnant women.

**HB 136 by Rep. Hull**

Adds lactation support services to Medicaid coverage.

**HB 713 by Rep. Howard**

Streamlines the review of death data for the Texas Maternal Mortality and Morbidity Review Committee.

**HB 3940 by Rep. Johnson**

Similar to SB 2728 by Sen. Cook

Improves health coverage of newborn babies by providing additional information to parents and health care providers.

**SB 25 by Sen. Kolkhorst**

Similar to HB 25 by Rep. Hull

Establishes recess requirements for middle and elementary schools, nutrition curriculum for health-related degrees, and an advisory council to provide nutrition guidelines for Texans, among other provisions.

**SB 31 by Sen. Hughes**

Similar to HB 44 by Rep. Geren

Clarifies medical emergency exceptions to Texas abortion ban laws that will help ensure women with pregnancy complications such as ectopic pregnancies get the timely care they need.

### Raise Concerns

**HB 138 by Rep. Dean**

Similar to HB 1906 by Rep. Paul and SB 818 by Sen. Bettencourt

Requires a cumbersome process for consideration of any legislation that adds health benefits to insurance.

**HB 1586 by Rep. Hull**

Makes it easier to request an exemption from vaccines required for school enrollment.

<b>HB 4076 by Rep. Leach</b>	Prohibits health care providers from considering the vaccine status of patients when determining an organ transplant list.
<b>SB 379 by Sen. Middleton</b> Similar to HB 3188 by Rep. Raymond, HB 4970 by Rep. Cain, and HB 5243 by Rep. Gerdes	Prohibits the use of SNAP to purchase soda and candy despite studies showing that restrictions are not effective tools for improving health.

## DID NOT PASS

### Support Children

<b>HB 38 by Rep. Bucy</b>	Would have improved the Texas Information and Referral Network, which helps families find food, health care, and other family supports in their local area.
<b>HB 220 by Rep. Ordaz</b> Similar to SB 1899 by Sen. Huffman	Would have allowed hospitals to offer Plan B emergency contraception to sexual assault survivors.
<b>HB 321 by Rep. Bucy</b> Similar to SB 238 by Sen. Johnson	Would have notified families that their children are eligible for Medicaid health insurance if they are confirmed eligible following a SNAP application.
<b>HB 514 by Rep. Lalani</b> Similar to SB 1330 by Sen. Perry	Would have created a public outreach campaign aimed at increasing the number of trained maternal health professionals across Texas.
<b>HB 1201 by Rep. Manuel</b> Similar to statewide bills HB 5583 by Rep. Shofner and HB 2573 by Rep. Walle	Would have created a pilot program to add doula services to Medicaid coverage.
<b>HB 2117 by Rep. Walle</b>	Would have ensured the Texas Maternal Mortality and Morbidity Review Committee reviews data from each year.
<b>HB 2140 by Rep. Simmons</b>	Would have included doulas on the Texas Maternal Mortality and Morbidity Review Committee.
<b>HB 2159 by Rep. Gámez</b>	Would have allowed minors who are parents to consent to their own health care.
<b>HB 2477 by Rep. Simmons</b>	Would have added doula services to health insurance for state employees.



<b>HB 3735 by Rep. Shofner</b>	<p>Would have added midwife services and other prenatal, birthing, and postpartum health services to private health insurance.</p>
<b>HB 3917 by Rep. Rose</b> Similar to SB 2483 by Sen. Alvarado	<p>Would have added up to four maternal depression screenings to children's Medicaid coverage.</p>
<b>HB 4093 by Rep. Allen</b> Similar to SB 2552 by Sen. West	<p>Would have required school districts to provide health coverage enrollment information to families during student enrollment.</p>
<b>SB 232 by Sen. Johnson</b> Similar to multiple bills	<p>Would have drawn down federal Medicaid expansion funding to offer health insurance to low-income adults.</p>
<b>SB 1031 Sen. Blanco</b> Similar to HB 2202 by Rep. Guillen	<p>Would have streamlined eligibility determinations and renewals for SNAP benefits.</p>
<b>SB 1102 by Sen. Paxton</b>	<p>Would have allowed midwives to administer certain medications.</p>

## Impact Children

<b>HB 4273 by Rep. Oliverson</b> Similar to SB 961 by Sen. Kolkhorst	<p>Would have codified current state policies for periodic income checks and self-attestation in Medicaid/CHIP applications.</p>
<b>SB 921 by Sen. Sparks</b> Similar to HB 2865 by Rep. Noble	<p>Would have changed administrative renewals in Medicaid and CHIP.</p>

## Raise Concerns

<b>HB 139 by Rep. Dean</b>	<p>Would have allowed employers with more than 50 employees to offer “junk” insurance plans — with very limited benefits — to their employees.</p>
<b>SB 407 by Sen. Middleton</b> Similar to HB 1468 by Rep. Leo Wilson	<p>Would have prohibited hospitals from requiring vaccines for employees.</p>

## Review of Policy Progress During the 2025 Texas Legislative Session:

# Child Protection and Children's Mental Health

This session, the legislature took action to continue and moderately expand the Texas Family First pilot program, an important step towards our goal of reducing the number of children who enter foster care because of their unmet mental health needs. They also passed modest funding increases for children's mental health and bills to support older youth in foster care. However, they failed to pass other critical proposals, such as covering additional children's mental health services under Medicaid health insurance, adequately funding YES Waiver mental health services, and investing in legal representation for families in Child Protective Services (CPS) cases.

The Texas Family First pilots are designed to safely prevent children from entering foster care when the right support and court supervision can help them remain with their families. This is a significant challenge in Texas. In 2024, 530 children (6% of removals) entered foster care due to unmet mental health needs — not because of abuse or neglect. An additional 224 entered care when parents shared custody with the state so their child could access treatment. Under the Texas Family First pilots, when there are serious concerns about a child's safety, a judge can order the family to participate in research-backed services — like intensive mental health treatment, substance use recovery programs, or in-home behavioral support — and oversee the family's progress and the child's well-being. We appreciate that lawmakers appropriated \$23 million in state funding to continue the pilot program. Without the new state funding, the program would have shut down as federal funding expires this year. Legislators also approved thoughtful, incremental expansions to the pilot programs. The pilots will now be able to serve children who are at risk of entering foster care because of serious behavioral health needs, not because they are experiencing abuse or neglect. Now they can also use funding to enhance family engagement and offer additional support to families after reunification.

Legislators modestly increased funding for children's mental health, including an additional \$40 million for mobile youth crisis outreach teams. They nearly doubled their investment in the Children's Mental Health Innovation Grant since the last biennium from \$15 million to \$29 million. Lawmakers also passed HB 5342 by Rep. Landgraf — in part thanks to strong advocacy by our partners at NAMI Texas — to create a trust fund supporting both mobile crisis and the state's 988 Suicide & Crisis Lifeline, which offer support to children and adults. Youth with high needs in foster care also received attention as legislators approved a funding increase in the Department of Family and Protective Services (DFPS) budget to enhance behavioral health services and provided \$2.6 million to create a new youth peer support program.

One major disappointment this session was that legislators decreased funding for the Youth Empowerment Services (YES) Waiver, which provides mental health support for children. The YES Waiver funds a wraparound team that provides support at home and in the community — offering caregiver respite, therapy for the child, and connections to specialized treatments. Unfortunately, the program cannot serve all the children who need it due to a provider shortage. According to data from the

Statewide Behavioral Health Coordinating Council, the YES Waiver lost 386 providers between 2020 and 2023, with numbers continuing to decline even as more and more families seek its support each year. That provider shortage is driven, in part, by low payment rates and years of underinvestment.

We are also disappointed that the Legislature did not pass HB 5030 by Rep. Johnson, one of the top priorities this session for our team and our partners. It was a comprehensive bill to improve children's access to several critical mental health services, particularly those that are more intensive than therapy but less intensive than full hospitalization, by covering them through Medicaid health insurance. The bill also aimed to grow the mental health workforce by allowing clinicians working toward licensure to provide care and bill Medicaid. Many of the core strategies in the bill were also filed as stand-alone bills or budget riders. While they did not pass, many of them made progress in the legislative process that should provide momentum for the future. For example, the House passed HB 1716 to address the workforce challenge; HB 475 to cover Multisystemic Therapy under Medicaid; funding for Intensive Outpatient Programs and Partial Hospitalization Programs; and funding for a Psychiatric Residential Treatment Facility, which provide high-quality 24/7 non-hospital mental health care. While these initiatives did not pass the Senate, the strong hearings and bipartisan support showed a clear appetite for addressing the gaps in access to care for children with more serious mental health needs.

### **In addition to working on access to services, legislators also took steps to address foster care and the broader child protection system.**

For the last several years, lawmakers have expanded Community-Based Care (CBC), which transfers foster care duties from the state to local nonprofits. This session, the focus shifted to fixing what isn't working through better oversight, stronger contracts, and more accountability. The Legislature passed SB 1398 by Sen. Kolkhorst to expand the responsibilities of CBC contractors to include assisting families before foster care and after reunification, while also tightening rules for emergency placements, increasing transparency, and requiring regular performance reviews. Other bills passed by Sen. Paxton, Sen. Hancock, and Rep. Aicha Davis give the state more power to intervene when



contractors underperform, including reclaiming cases DFPS has transferred to the contractor, requiring earlier notice before terminating contracts, incorporating community feedback, and allowing courts to place failing contractors under state control. Additionally, SB 513 by Sen. Sparks creates a rural CBC pilot program to help underserved areas, such as West Texas, build a model that best fits their communities.

To further address the foster care system, lawmakers provided \$59.5 million through HB 500 for a long-overdue overhaul of the state's foster care data and case management system. The funding aims to boost child safety and address concerns raised in the federal lawsuit.

The Legislature also passed three key bills to support older youth in foster care:

- As originally filed, HB 1211 by Rep. Lujan would have removed the age cap for youth who age out of foster care to lock in their free college tuition — a benefit already available for life to youth who are adopted. The final version extended the cutoff from age 25 to 27. While this gives young adults who aged out of foster care more time to pursue college and address the unique challenges they face, it still falls short of the long-term support provided to their adopted peers.



- HB 4655 by Rep. Hull strengthens the Preparation for Adult Living program by requiring more comprehensive life skills training, including financial literacy, housing readiness, and access to public benefits, to support individuals in transitioning to adulthood.
- SB 2165 by Sen. Parker ensures courts do not dismiss foster care cases when a child is missing or in juvenile custody, so they don't fall through the cracks while the state is responsible for their care.

Additionally, lawmakers passed legislation to improve how the state interacts with families in CPS cases:

- HB 140 by Rep. Noble requires the DFPS Commissioner to establish an advisory council to review how CPS handles investigations. The council will study past cases and seek to improve fairness and consistency in the application of investigations policies across the state.
- HB 116 by Rep. Dutton repealed "O grounds," a controversial provision that allowed courts to take away parents' rights solely because they didn't complete a service plan even if a judge or jury determines it would be safe to send their child home. Repealing O grounds is a welcome step toward a fairer CPS system.

We're disappointed that the Governor vetoed two bills that Sen. Zaffirini passed to improve legal representation for families in CPS cases — and disappointed that the Legislature did not pass critical funding to support this goal. SB 1838 would have helped counties set fair pay for court-appointed attorneys in CPS cases, and SB 2501 would have allowed parents to choose their attorney from a qualified list. While those two bills would have taken good steps, the Legislature failed to pass funding needed to address the shortage of attorneys for these cases and ensure parents get legal help earlier in the process, when it matters most. Specifically, we're concerned the Legislature did not pass the \$47.5 million request from the Texas Indigent Defense Commission to fund the Family Protection Representation Program. Lawmakers created this program in 2023 to improve legal support for families involved with CPS, but they failed to fund it last session, and once again, it went unfunded. Until the state invests in legal representation, too many families will continue to be at a disadvantage as they try to advocate against removal of their children from their home.

## State leaders need to renew efforts to fund legal assistance for families in the CPS system.

Other significant proposals did not pass — but we expect continued discussion in future sessions:

- HB 2216 by Rep. Hull would have required CPS caseworkers to do more to help families stay together before removing a child or terminating a parent's rights. It would have required stronger efforts to connect families to housing, substance use treatment, mental health care, domestic violence services, and more. It also would have raised the standard of evidence needed to remove a child. We supported the goal of better support for families, but the bill did not pass. And without funding or staff to carry out the heightened expectations, the bill could have had the unintended consequence of leaving more children stuck in long-term foster care and overburdening an already overloaded workforce.
- Other bills aimed to change how and when the state can terminate a parent's rights. We agree it's time to revisit this part of the law, especially to better support family reunification while still protecting children. But we had serious concerns about two bills that did not pass, HB 3281 and 3282. We hope future proposed changes to the state's termination laws focus on safely bringing families back together when possible and preventing children from spending unnecessary years in foster care.

Moving forward, Texas must build on this session's progress to address critical gaps in children's mental health services. We'll be watching how Community Based Care contractors take on new family preservation duties and how the Texas Family First Pilots evolve. To treat parents fairly while also ensuring the safety of children, state leaders also need to renew efforts to fund legal assistance for families in the CPS system and revisit how and when the state terminates parental rights.

# OUTCOMES FOR KEY CHILD PROTECTION AND CHILDREN'S MENTAL HEALTH LEGISLATION

**PASSED**

## Support Children

<b>HB 116 by Rep. Dutton</b>	Ensures parental rights can't be terminated solely for not completing a service plan, unless there's clear evidence the child is in danger.
<b>HB 140 by Rep. Noble</b> Similar to SB 425 by Sen. Kolkhorst	Creates an advisory board to monitor and recommend improvements for child protection investigations.
<b>HB 1211 by Rep. Lujan</b> Similar to SB 166 by Sen. Menéndez	Raises the age limit on Texas's college tuition waiver for youth who age out of foster care.
<b>HB 2789 by Rep. Frank</b> Similar to SB 1149 by Sen. Sparks	Streamlines foster care regulations as recommended by a safety audit completed over the interim.
<b>HB 2809 by Rep. Rose</b> Similar to SB 640 by Sen. Johnson	Tracks youth suicide attempts in Child Protective Services.
<b>HB 4129 by Rep. A. Davis</b> Similar to SB 2033 by Sen. Paxton	Improves DFPS contract enforcement for Community-Based Care providers.
<b>HB 4655 by Rep. Hull</b> Similar to SB 602 by Sen. West	Improves Preparation for Adult Living Program curriculum related to financial literacy, car ownership, housing, and benefits.
<b>HB 5342 by Rep. Landgraf</b>	Establishes a dedicated 988 Suicide & Crisis Lifeline Trust Fund and supports youth-specific mobile crisis outreach teams.
<b>SB 207 by Sen. Paxton</b> Similar to HB 5251 by Rep. Leo Wilson	Requires school districts to excuse certain absences resulting from an appointment with a mental health care professional.
<b>SB 513 by Sen. Sparks</b> Similar to HB 1536 by Rep. Craddick	Creates a rural Community-Based Care pilot program.

<b>SB 646 by Sen. West</b>	Adds more mental health professionals to loan repayment programs.
<b>SB 1398 by Sen. Kolkhorst</b>	Integrates family preservation services, including those eligible under the Family First Prevention Services Act, into the Community-Based Care system and strengthens accountability for contractors.
<b>SB 1401 by Sen. West</b>	Directs the Texas Higher Education Coordinating Board to create the Texas Mental Health Profession Pipeline Program.
<b>SB 1589 by Sen. Hancock</b> Similar to HB 5415 by Rep. Orr	Allows the state to take back or transfer case management for any cases in a region from one Community-Based Care contractor to another.
<b>SB 2032 by Sen. Paxton</b> Similar to HB 4130 by Rep. A. Davis and HB 5361 by Rep. Shaheen	Authorizes DFPS to terminate a contract with a Community-Based Care provider.
<b>SB 2034 by Sen. Paxton</b> Similar to HB 4131 by Rep. A. Davis and HB 5364 by Rep. Shaheen	Allows courts to place Community-Based Care contractors under state-led emergency management and oversight (i.e., receivership).
<b>SB 2165 by Sen. Parker</b> Similar to HB 4805 by Rep. Johnson	Prohibits DFPS from dismissing CPS cases when a child has run away and is missing.

## Impact Children

<b>HB 109 by Rep. Rose</b>	Allows HHSC to establish a residential facility for Children Without Placement for behavioral health and residential services.
<b>SB 400 by Sen. Kolkhorst</b> Provisions passed as part of SB 12 by Sen. Creighton	Requires parental consent for psychological or psychiatric examination, testing, or treatment conducted by a school district employee and clarifies that the bill does not require consent before school employees verbally ask students about their general well-being.
<b>SB 1558 by Sen. Perry</b> Similar to HB 3453 by Rep. Bonnen	Expands liability protection for foster care providers to reduce the cost of their required insurance.



## VETOED BY THE GOVERNOR

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### Support Children

**SB 1838 by Sen. Zaffirini**

Similar to HB 5551 by Rep. Moody

Would have improved legal representation in CPS cases, added accountability measures for appointed counsel, and required counties to post a fee schedule for legal services.

**SB 2501 by Sen. Zaffirini**

Would have allowed parents in CPS cases to choose their attorney from a qualified list.

## DID NOT PASS

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### Support Children

**HB 38 by Rep. Bucy**

Would have improved the Texas Information and Referral Network, which helps families find food, health care, and other family supports in their local area.

**HB 330 by Rep. Meza**

Would have supported new moms seeking substance use treatment during pregnancy or after giving birth.

**HB 475 by Rep. Johnson**

Would have added Multisystemic Therapy (MST) to Medicaid coverage. MST is a proven family and community-based treatment for at-risk youth with intensive needs and their families.

**HB 488 by Rep. Johnson**

Would have added Functional Family Therapy (FFT) to Medicaid coverage. FFT is an intensive, short-term therapeutic model that offers in-home family counseling.

**HB 1155 by Rep. Hull**

Would have provided monetary assistance to families during a monitored return to support family reunification.

**HB 1716 by Rep. Darby**

Similar to SB 469 by Sen. Sparks

Would have added mental health services provided by a master's level practitioner to Medicaid coverage.

**HB 1955 by Rep. Thompson**

Would have established a new early childhood mental health home visiting grant program.

**HB 2036 by Rep. Oliverson**

Would have added Intensive Outpatient Programs (IOP) and Partial Hospitalization Programs (PHP) to Medicaid coverage.

<b>HB 2216 by Rep. Hull</b> Similar to SB 620 by Sparks	Would have required DFPS to work harder to help families overcome challenges before removing children; ensured more children stay with relatives if they do need to be removed from their parents; and required DFPS to work harder to reunify children with their families throughout a CPS case.
<b>HB 2234 by Rep. Dutton</b> Similar to SB 1306 by Sen. Cook	Would have raised the age of criminal responsibility from 17 to 18, giving judges the option to hold 17-year-olds accountable in the juvenile justice system.
<b>HB 3941 by Rep. Hunter</b>	Would have extended foster care to age 23 and reaffirmed that young adults who age out of foster care have health care coverage until age 26.
<b>HB 4116 by Rep. A. Davis</b> Similar to SB 576 by Sen. West	Would have required DFPS to provide kinship caregivers with written information regarding available resources.
<b>HB 4870 by Rep. A. Davis</b> Similar to SB 1918 by Sen. West	Would have created a grant program for legal representation for kinship caregivers.
<b>HB 5030 by Rep. Johnson</b>	Would have added key children's mental health services — MST, FFT, IOP, and PHP — to Medicaid coverage.
<b>HB 5561 by Rep. Money</b> Similar to SB 194 by Sen. Menéndez	Would have diverted youth in foster care away from the juvenile justice system.
<b>SB 837 by Sen. Kolkhorst</b>	Would have strengthened efforts to keep kids safely with their families and out of foster care by making the Texas Family First Pilots a permanent, statewide program.
<b>SB 1342 by Sen. Johnson</b>	Would have added services in psychiatric residential treatment facilities to Medicaid coverage and improved standards.

## Raise Concerns

<b>HB 497 by Rep. Patterson</b>	Would have required a school district employee to receive the consent of a child's parent before providing a student with behavioral or mental health treatment. Parental consent requirements can hinder mental health treatment due to stigma, fear of parental judgment, or financial concerns or could prevent or delay treatment for youth in abusive situations.
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**HB 3281 by Rep. Dutton**

Similar to SB 1987 by Sen. Hall

Would have only allowed the state to terminate a parent's rights if the child is seriously injured or nearly dies as a result of something the parent did. As a result, in certain cases, such as sexual abuse, children could not be adopted and would remain in foster care until they become adults.

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**HB 3282 by Rep. Dutton**

Would have extended the timeline for CPS cases, delaying the opportunity for a child in foster care to either return home or get adopted.

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**SB 1727 by Sen. Perry**

Similar to HB 3360 by Rep. Cook

Would have prescribed harsher consequences, such as incarceration in an adult prison, for juveniles accused of committing more than one felony offense.

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