

STATE FACT SHEET

Texas

State of Access: A Contraceptive Policy Scorecard assesses policy environments in each U.S. state and the District of Columbia, illuminating where access to contraception is protected or restricted through laws affecting affordability, availability, and environment of care. For this work, we define contraception as medicines, devices, and behaviors that are used to prevent pregnancy and to manage other health conditions.



Affordability Policies

- Medicaid Expansion
- Family Planning Medicaid Expansion
- Contraceptive Coverage



Availability Policies

- Prescriptive Authority
- Extended Supply of Contraceptives
- Emergency Contraception



Environment of Care Policies

- Minor Consent
- Sex Education
- Refusal Clauses

Texas Policy Environment

OVERALL RATING: RESTRICTIVE

Texas's policy environment for contraceptive access is restrictive. While the state chose not to expand Medicaid under the ACA, it has taken some protections by expanding Medicaid coverage of family planning services with some contingencies and partial contraceptive coverage. Texas expanded and restricted access to emergency contraception and partially extended contraceptive supplies, reflecting some attempts to protect contraceptive availability. However, the state restricts pharmacists' and nurses' authority to prescribe contraceptives, implements a restrictive approach to sex education, and restricts minors from independently consenting to contraceptive services. Despite attempts to expand access to contraceptives, there is much more to do to ensure equitable and comprehensive contraceptive care, particularly for young people and residents with low incomes.



Affordability Policies

Medicaid Expansion

RATING: RESTRICTIVE

Texas has not adopted Medicaid expansion under the Affordable Care Act, which would extend eligibility for Medicaid's free or low-cost services, including contraceptives, to adults earning up to 138% of the federal poverty level. This decision restricts many low-income residents from coverage and leaves them in a health insurance coverage gap, severely limiting their access to contraceptive care and services and reinforcing health inequities. Because it has not adopted Medicaid expansion, Texas scores as restrictive.

Family Planning Medicaid Expansion

RATING: SOME PROTECTIONS AND/OR SOME RESTRICTIONS

Texas has expanded Medicaid coverage for family planning services through a waiver, Healthy Texas Women, which expires June 30, 2030. The waiver broadens eligibility to include individuals with incomes up to 204.2% of the federal poverty level and women who lose Medicaid coverage postpartum; however, it does not include men or individuals younger than 18 (those under 15 are included with parental consent). While this legislation supports broader access to contraceptive services for many Texans with low income, including adults without dependent children, it limits access for men and young people without parental consent. Because state policy expands Medicaid coverage for family planning services—but excludes men and young people—Texas scores as some protections and/or some restrictions.

Contraceptive Coverage

RATING: SOME PROTECTIONS AND/OR SOME RESTRICTIONS

Texas policy requires insurers to cover prescription contraceptives (if they cover prescription drugs), promoting affordability among policyholders. However, it does not prohibit them from sharing these costs with policyholders, potentially limiting access to prescription products among those who cannot afford to pay out of pocket and worsening income-based inequities in reproductive health. In addition, insurers are not mandated to cover any over-the-counter contraceptives, meaning that many individuals may pay full cost for these products—again, potentially reinforcing cost as a barrier to equity. Because it requires insurers to cover prescription but not over-the-counter contraceptives and allows cost sharing, Texas scores as some protections and/or some restrictions.



Availability Policies

Prescriptive Authority

RATING: RESTRICTIVE

Texas policies do not allow nurse midwives or nurse practitioners to prescribe contraceptives independently, and they do not allow pharmacists to prescribe contraceptives at all. Nurse midwives and nurse practitioners are required to have a relationship with a collaborating physician for practice and prescriptive authority. This policy environment limits the ability of non-physicians to prescribe contraceptives, hindering access for patients receiving care in settings like clinics and pharmacies and in areas with physician shortages. Because it restricts access around the authority to prescribe, Texas scores as restrictive.

Extended Supply of Contraceptives

RATING: SOME PROTECTIONS AND/OR SOME RESTRICTIONS

Texas policy requires private health insurers and Medicaid to cover a 12-month extended supply of prescription contraceptives but mandates that patients first receive an initial smaller dispensation of three months. While this policy generally facilitates consistent contraceptive use and helps prevent gaps for Texans, it may limit access for those who cannot make repeated pharmacy or provider visits. Because state policy extends supplies of contraceptives but requires initial smaller disbursements, Texas scores as some protections and/or some restrictions.

Emergency Contraception

RATING: SOME PROTECTIONS AND/OR SOME RESTRICTIONS

While there is guidance from the Texas Attorney General to provide emergency contraception (EC) in emergency rooms, no codified Texas policy requires emergency rooms to provide EC, potentially limiting timely access by patients in critical situations, such as survivors of sexual assault. In addition, state policy includes EC in the state's family planning program coverage, promoting access among residents who have low income or are uninsured. Because Texas has not enacted policies requiring EC provision in emergency rooms but does cover EC in the state family planning program, Texas scores as some protections and/or some restrictions.



Environment of Care Policies

Minor Consent

RATING: RESTRICTIVE

Texas policy does not allow minors to consent to contraceptive services except in cases where the minor is married or other narrow circumstances. Under state law, married minors are treated as adults and allowed to independently consent to contraceptive services. State law also prohibits state funds from being used to provide confidential contraceptive care to minors. This policy environment limits autonomy and restricts access for most young people in Texas, who are unmarried and may still need confidential reproductive health care. Because state policies prohibit most minors from independently accessing contraceptives, Texas scores as restrictive.

Sex Education

RATING: RESTRICTIVE

Texas does not require sex education in schools, leaving schools to decide whether to offer sex education to their students. While abstinence-only education is not compulsory, schools that offer sex education must attain parental consent for student participation and are not required to provide medically accurate curricula. This landscape jeopardizes broad, equitable access to high-quality sex education, including contraceptive information, among students. Because of its opt-in policy, Texas scores as restrictive.

Refusal Clauses

RATING: SOME PROTECTIONS AND/OR SOME RESTRICTIONS

No Texas policy governs the right of individual providers or health facilities to refuse to provide contraceptive services for religious or moral reasons, potentially broadening access in these settings. However, while state board guidelines prohibit pharmacists from obstructing access to medications (by, for example, requiring prescription transfers or referrals), pharmacists may refuse to provide services on religious or moral grounds, jeopardizing access for individuals seeking contraceptive care in pharmacies. This constraint could negatively impact access among people who rely on pharmacies for care or who cannot afford to visit an alternative provider. Because it does not explicitly permit refusal by individual providers and health facilities but does permit refusal by pharmacists, Texas scores as some protections and/or some restrictions.