

Children's Hospital Association of Texas
An Association for the Advancement of Children's Healthcare in Texas

84TH LEGISLATURE: ENROLLED BILLS RELATED TO CHILDREN'S HEALTH

SUNSET REVIEW
<p>HB 2463 by Raymond: Functions of the Department of Assistive and Rehabilitative Services (DARS) Abolishes and transfers the functions of DARS that are not transferred in other legislation to HHSC by 9/1/16. Integrates independent living services for the blind and for those with other disabilities.</p>
<p>SB 200 by Nelson: Health and Human Services Commission (HHSC) Consolidates portions of the 5 health and human services agencies into a single agency. Abolishes and transfers the functions of DARS by 9/1/2016 and the Department of Aging and Disability Services (DADS) by 9/1/17. Moves prevention programs to the Department of Family and Protective Services (DFPS) by 9/1/16. Directs HHSC to consolidate administrative support functions if feasible and contribute to the system's effective performance. Requires HHSC to develop a transition plan by 3/1/16. Creates the Transition Legislative Oversight Committee to facilitate and report on the transfer of functions. Directs HHSC to study the need to continue DFPS and DSHS and directs the Oversight Committee to make recommendations regarding their continuation by 12/1/18. Requires the Sunset Advisory Commission to conduct a limited-scope review of HHSC during the 2022-23 biennium. Continues HHSC for 12 years (until 9/1/27) and DFPS and DSHS for 8 years (until 9/1/23).</p>
<p>SB 202 by Nelson: Department of State Health Services (DSHS)/Occupational Regulatory Programs Transfers 13 regulatory programs (in two phases) from DSHS to the Texas Department of Licensing and Regulation (TDLR) and reconstitutes current independent boards as advisory committees at TDLR. Transfers 4 regulatory programs from DSHS to the Texas Medical Board, creates associated advisory committees and boards, and requires fingerprint-based background checks. Discontinues 8 programs currently under DSHS' purview. Takes effect 9/1/15, except for 6 programs to TDLR effective 9/1/17.</p>
<p>SB 206 by Schwertner: Department of Family and Protective Services (DFPS) Requires DFPS to implement an annual business planning process for child protective services; develop a foster care redesign implementation plan; develop a strategic plan for prevention and intervention services; implement a child care license and renewal process; remove current child care regulatory fee caps and set fees by rule; and modify child care licensing enforcement and penalty provisions. Allows education of foster children in a home setting under certain circumstances.</p>
<p>SB 207 by Hinojosa: Office of Inspector General Requires the OIG to establish priorities to guide its investigation processes; change the timelines for different phases of the investigation process; and conduct quality assurance reviews. Streamlines the the credible allegation of fraud hold hearing process, clarifies good cause exceptions, and requires the OIG to pay all costs for hearings at the State Office of Administrative Hearings. Directs OIG and HHSC to coordinate audit and oversight activities of managed care organizations. Requires OIG to undergo special review by the Sunset Advisory Commission in 6 years.</p>
<p>SB 219 by Schwertner: Health and Human Services Clean-up Amends provisions of the Family Code, Government Code, Health and Safety Code, Human Resources Code and Occupations Code to reflect current agency functions and practices; repeal obsolete, duplicative or superseded provisions; replace references to abolished agencies; and incorporate existing rule-making procedures.</p>

SB 277 by Schwertner: Abolition of Task Forces, Work Groups and Advisory Committees

Abolishes certain health-related task forces, advisory committees and workgroups and establishes the issue areas that advisory committees may be created to support. Combines the Pharmaceutical and Therapeutics Committee and the Drug Utilization Review Board.

CHILDREN'S HEALTH

HB 1515 by Zerwas: Administration of Epinephrine by Pharmacists

Allows pharmacists to administer epinephrine through an auto-injector in emergency situations. Requires pharmacists to report the use to the patient's primary care physician. Provides immunity from civil damages. Allows pharmacists to seek reimbursement for the auto-injector (not administration).

HB 2171 by Sheffield: Maintaining Information in the Immunization Registry as an Adult

Allows retention of immunization records in the registry until age 26, rather than age 18. Directs DSHS to make reasonable efforts to inform individuals that further consent is required beyond age 26.

HB 2340 by Sheffield: Pediatric Extended Care Centers (PECCs)

Creates a new temporary license for PPECs that allows applicants to provide nonresidential basic services to no more than 6 minors for 90 days (with one extension allowed). Provides that an initial or renewal license expires in 2 years. Requires that nursing services be a one-to-one replacement of private duty nursing or other skilled nursing unless additional nursing services are medically necessary and that reimbursement rates--when converted to an hourly rate--be not more than 70% of the average hourly unit rate for private duty nursing. Directs HHSC to adopt rules by 9/1/16.

HB 2574 by Johnson: Danger of Leaving Children in Cars

Requires that materials currently distributed to parents by providers of childbirth services include information on the danger of heat stroke to a child left unattended in a vehicle.

HB 3781 by Crossover: Texas Health Improvement Network

Creates the Texas Health Improvement Network (THIN), administratively attached to the UT System, composed of experts from related fields of study, and designed to improve the health of Texans and reduce the costs of health care. Establishes an advisory council.

SB 66 by Hinojosa: Epinephrine Auto-injectors in School

Requires school districts to implement a policy requiring the maintenance, administration and disposal of epinephrine auto-injectors at each campus. Requires districts to have one or more school personnel or volunteers trained to administer auto-injectors present during all hours campus is open. Sets out requirements for storage of and access to the supply of epinephrine. Requires school districts to report incidents to the prescribing physician and Commissioners within 10 days. Authorizes physicians and pharmacists to provide non-patient-specific standing orders. Requires compliance with all provisions only if sufficient funds are available. Provides immunity from civil and criminal liability or disciplinary action resulting from actions or failure to act.

SB 97 by Hinojosa: Use of E-cigarettes by Youth

Treats e-cigarettes in a similar manner as cigarettes as it relates to use by minors, distribution, and prevention. Prohibits the sale of a container of nicotine liquid unless the container satisfies federal child-resistant standards.

SB 265 by Ellis: Sunscreen Products in Schools

Allows students to use sunscreen products while on school property or at a school-related event. Does not create any liability for or a cause of action against a school district.

SB 339 by Eltife: Medical Use of Low-THC Cannabis

Allows qualified physicians to prescribe low-THC cannabis to Texas residents with intractable epilepsy if a second qualified physician concurs with the treatment. Requires the Texas Department of Public Safety to establish a compassionate-use registry and to issue licenses to operate as a dispensing organization by 9/1/17. Exempts licensed dispensing organizations, patients and guardians from offenses for possessing or distributing controlled substances.

PRENATAL/INFANT CARE

HB 606 by Davis: Study on Benefits of Prenatal Surgical Procedures to Treat Birth Defects

Requires HHSC to conduct a study to evaluate the benefits of prenatal surgical procedures to treat birth defects, including fetoscopic placental laser ablation, maternal-fetal surgery, and any other type of prenatal surgical procedure that becomes the standard of practice (by 12/1/16). Directs HHSC to include a cost comparison (across payors) between prenatal and postnatal procedures, survival rates, long-term outcomes and quality of life for children with birth defects.

HB 2131 by Davis: Centers of Excellence for Fetal Care

Requires DSHS, in consultation with the Perinatal Advisory Council, to designate one or more centers of excellence for fetal diagnosis and therapy. Directs the Council to appoint a subcommittee for this purpose and establishes priority consideration for entities affiliated with a medical school, having commitments to related research, offering advanced training programs, and integrating an advanced fetal care program with a program that provides long-term monitoring and follow-up care.

HB 3374 by Morrison: Down Syndrome Information

Requires DSHS to make information available on Down syndrome, including physical, developmental, educational and psychosocial outcomes; treatment options; life expectancy; and resource contacts. Requires health care providers to make the information available to parents when diagnosing children with Down syndrome or delivering prenatal test results with a probability of Down syndrome.

HB 3433 by Sheffield: Level of Care Designations for NICU and Maternal Care

Changes the date hospitals must have neonatal level of care designations for Medicaid reimbursement from 9/1/17 to 9/1/18 and the date hospitals must have maternal level of care designation from 9/1/19 to 9/1/20. Increases rural representation on the Perinatal Advisory Council by adding a second family practice physician providing obstetrical care in a rural community and a second representative from a rural hospital.

SB 791 by Kolkhorst: Education about Congenital Cytomegalovirus (CMV) in Infants

Requires DSHS to publish informational materials regarding the incidence, transmission, related birth defects, and preventive measures for CMV and by 1/1/16 to revise the resource pamphlet provided to adult caregivers of infants by hospitals, birthing centers, physicians, nurse midwives, or midwives that provide prenatal care to pregnant women. Directs DSHS to establish an outreach program to educate women and raise awareness among health care providers.

SB 1128 by Zaffirini: Diagnostic Testing during Pregnancy

Requires a test for syphilis be performed during the third trimester of pregnancy and removes the requirement for the test at the time of labor and delivery if records indicate the test was performed during the third trimester.

MENTAL HEALTH

HB 2186 by Cook: Suicide Prevention Training for School Districts

Requires that staff development for educators in public schools include in-service training on suicide prevention annually.

<p>SB 133 by Schwertner: Mental Health First Aid Training for School Districts</p> <p>Extends training for responding to children developing mental health problems or experiencing crises to other employees besides teachers (e.g., bus drivers, cafeteria workers and school resource officers). Authorizes DSHS to award supplemental grants to local mental health authorities for this purpose.</p>
<p>SB 239 by Schwertner: Loan Assistance Program for Mental Health Professionals</p> <p>Requires the Higher Education Coordinating Board to establish a student loan repayment assistance program for mental health professionals. Eligible individuals must practice in a shortage area and provide care in Texas to Medicaid or CHIP recipients or persons confined in correctional facilities.</p>
<p>GUNS</p>
<p>HB 910 by Phillips: Concealed Handguns</p> <p>Authorizes individuals to obtain a license to openly carry a holstered handgun in all the places that allow the licensed carrying of a concealed handgun.</p>
<p>SB 11 by Birdwell: Campus Carry</p> <p>Allows license holders to carry concealed weapons into classrooms, dorms and buildings of colleges and universities. Allows public institutions to establish limited gun-free campus zones. Allows private institutions to prohibit license holders from carrying handguns on campus after consultation with students, staff and faculty.</p>
<p>SB 273 by Campbell: Concealed Handguns on Government Property</p> <p>Prohibits a state agency or a political subdivision from providing erroneous communication related to the offense of trespass by a concealed handgun license holder and creates monetary penalties.</p>
<p>CHILD PROTECTIVE SERVICES</p>
<p>HB 679 by Turner: Study on Homeless Youth</p> <p>Directs the Department of Housing and Community Affairs, in conjunction with the Texas Interagency Council for the Homeless, to conduct a study on homeless youth.</p>
<p>HB 1217 by Thompson: Information on Children in Foster Care/Missing or Victim of Sex Trafficking</p> <p>Requires DFPS to prepare an annual report that includes statistics by county such as the number of children who died while in the managing conservatorship of the state, timeliness of investigations, staffing and caseloads, stability and proximity of foster care placements, number of children suffering from a severe emotional disturbance, and whether children are missing or victims of sex trafficking.</p>
<p>HB 1309 by Turner: Notification of Significant Events for Children in Foster Care</p> <p>Requires DFPS to notify the parent or guardian of a child in its conservatorship of a significant change in medical condition, participation in a drug research program, or an initial prescription of a psychotropic medication within 24 hours. Requires prior notification within 48 hours of a change in a residential child-care facility. Requires notification of a death of a child to legislators within 5 days.</p>
<p>HB 2053 by Farney: Child Safety Check Alert List</p> <p>Requires DFPS to notify the Department of Public Safety (DPS) if unable to locate a child within 20 days who is the subject of a Priority 1 report. Stipulates information that must be included on the Child Safety Check Alert List (e.g., sex, race, vehicles, etc.). Requires DPS to place the child on the Child Safety Check Alert List--without a court order--and investigate the location of the child and/or the child's family. Prescribes law enforcement procedures upon location of a child on the list. Directs the Texas Commission on Law Enforcement to establish a related training program. Requires DPS to submit annual progress reports on use of the Child Safety Check Alert List.</p>
<p>HB 2630 by Thompson: Parenting Education for Children at Risk for Abuse</p> <p>Requires DFPS to implement a 5-year strategic plan for prevention and early intervention services (due 9/1/16) and submit a biennial report on state-funded parenting education programs (beginning 1/1/16).</p>

<p>SB 125 by West: Trauma Screenings for Foster Children</p> <p>Directs DFPS to provide children a comprehensive assessment that includes a screening for trauma within 45 days of entering the conservatorship of the department.</p>
<p>SB 1406 by Schwertner: Child Safety Check Alert List</p> <p>Requires DFPS to notify the Department of Public Safety (DPS) if unable to locate a child who is the subject of a Priority 1 report for no more than 20 days. Stipulates information that must be included on the Child Safety Check Alert List (e.g., sex, race, vehicles, etc.). Requires DPS to place the child on the Child Safety Check Alert List, without a court order.</p>
<p>SB 1889 by Zaffirini: Use of Information in Registry of Child Abuse</p> <p>Prohibits DFPS from making a finding of abuse or neglect when a parent or guardian relinquishes custody if the child has a severe emotional disturbance and mental health services necessary to protect the safety and well-being of the child are not available. Requires DFPS to report information related to children in conservatorship with severe emotional disturbances.</p>
<p>INSURANCE COVERAGE</p>
<p>HB 574 by Bonnen: Health Care Providers in Managed Care Plans</p> <p>Prohibits health maintenance organizations (HMOs) from terminating participation of a provider, solely based on the provider informing an enrollee of the full range of providers available to the enrollee (including out-of-network providers); barring providers--as a condition of a contract--from informing patients about the availability of in- or out-of-network facilities; and from requiring providers to provide notification to patients of the providers' out-of-network status as a condition of payment. Prohibits insurers from terminating or threatening to terminate an insured's participation in a preferred provider plan solely based on use of out-of-network providers. Prohibits insurers from terminating, restricting or penalizing a preferred provider from communicating about the availability of out-of-network providers.</p>
<p>HB 1514 by Sheffield: Identification of Qualified Health Plans on Insurance Cards</p> <p>Requires qualified health plans issued through the federal exchange to display "QHP" on identification cards. Directs the Texas Department of Insurance (TDI) Commissioner to report effects on health care.</p>
<p>HB 1624 by Smithee: Health Benefit Plan Transparency</p> <p>Requires health plans to post drug formulary information on Internet, including cost-sharing amounts, and requirements related to prior authorization, step therapy, tier pricing or other protocols. Requires plan directories to be accessible without a password or user name, updated monthly and indicate whether providers are accepting new patients (not applicable to Medicaid and CHIP).</p>
<p>SB 481 by Hancock: Mediation for Balance Billing</p> <p>Lowers the threshold amount that allows a person to seek remediation of a settlement with a facility-based physician for an out-of-network claim from \$1,000 to \$500 (after copays and deductibles).</p>
<p>MEDICAID AND CHIP</p>
<p>HB 839 by Naishtat: Eligibility for Medicaid and CHIP</p> <p>Requires juvenile facilities to notify HHSC within 30 days after a child's release. Requires HHSC to reinstate Medicaid and CHIP benefits of a child released from a juvenile facility within 48 hours of notification of the child's release.</p>

HB 3523 by Raymond: Delivery and Quality of Medicaid Services

Delays the transition of persons enrolled in the Texas Home Living Waiver into managed care from 9/1/17 to 9/1/18 and the transition of individuals with intellectual and developmental disabilities who live in intermediate care facilities other than a state supported living center from 9/1/20 to 9/1/21. Postpones the deadline for implementation of pilot programs to improve service delivery from 9/1/16 to 9/1/17. Requires HHSC to conduct assessments on access to long-term services and the quality of acute care services. Allows managed care organizations to set rates paid to nursing homes.

SB 760 by Schwertner: Medicaid Provider Access Requirements

Requires HHSC to establish Medicaid provider access standards that--to the extent feasible--distinguish between urban and rural standards and that consider provider numbers and geographic distribution. Requires MCOs to report data on timeframes related to prior authorization. Requires HHSC to ensure that network directories are updated monthly. Directs HHSC to submit a biennial public report on recipient access that includes provider-to-recipient ratios for primary care and specialty providers in MCO networks. Requires HHSC to directly monitor provider networks for compliance with access standards. Authorizes HHSC to not renew contracts and/or require payment of liquidated damages for failure to comply with access standards. Requires HHSC to suspend default enrollment for at least one quarter if noncompliance occurs for two consecutive quarters. Directs MCOs to implement an expedited credentialing process for members of an established provider group, allowing services to be billed on a provisional basis. Directs HHSC to meet the support and information needs of managed care recipients, provide sufficient staff training, and ensure ombudsman services are sufficiently independent to resolve issues in the best interest of recipients.

EMERGENCY SERVICES

HB 479 by Bell: Regional Emergency Medical Dispatch Resource Centers

Transfers the regional emergency medical dispatch resource centers program from the UT Medical Branch at Galveston to the Commission on State Emergency Communications. Requires the Commission and the Texas Tech University Health Science Center to pilot a project to provide emergency medical services instruction through a telemedicine service provided by regional trauma centers.

HB 2020 by Martinez: Scope of Duties of Emergency Medical Personnel

Allows a certified emergency medical technician-paramedic or a licensed paramedic, acting under direct supervision of a licensed physician, to provide advanced life support in the facility's emergency or urgent care clinical setting, if authorized by the health care facility.

HB 2498 by Zerwas: Compact related to Emergency Medical Services

Enacts the EMS Personnel Licensure Interstate Compact under which states agree to honor other jurisdictions' licenses to facilitate movement across state boundaries. Sets out conditions for practicing in other member states and provides for development of a coordinated database.

SB 425 by Schwertner: Freestanding Emergency Medical Care Facilities

Requires freestanding emergency medical care facilities to post notice that the facility charges rates comparable to a hospital emergency room and may charge a facility fee, and that a physician providing care may not participate in the patient's health plan network and may bill separately. Makes free-standing facilities subject to provisions related to consumer access to health care information.

SB 1462 by West: Suspected Opioid Overdoses

Allows opioid antagonists to be dispensed to people at risk of overdosing, as well as their family members and friends. Protects first responders from civil, criminal and professional liability.

INFECTIOUS DISEASE

HB 2055 by Davis: Surveillance for Emerging Tropical Diseases

Directs HHSC to establish a sentinel surveillance program, limited to carefully selected sites reporting data on certain emerging and neglected tropical diseases, at DSHS. Authorizes DSHS to maintain a central database of information and make available educational material on the diseases. Allows release of medical, epidemiological or toxicological information to medical personnel, appropriate state agencies, health authorities, etc., as well as appropriate federal agencies.

HB 2646 by Giddings: Communicable Disease Information to First Responders

Authorizes the release of medical or epidemiological information to governmental entities and local health departments, who are required to provide the address to first responders of persons being monitored for a communicable disease.

HB 2950 by Klick: Task Force on Infectious Disease Preparedness and Response

Establishes the Task Force on Infectious Disease Preparedness and Response as an advisory board to DSHS. Allows HHSC to reimburse health care-related institutions to assist in the establishment of infectious disease emergency preparedness facilities.

TELEMEDICINE/HEALTH INFORMATION EXCHANGE

HB 1878 by Laubenberg: Telemedicine in a School-based Setting under Medicaid

Requires HHSC to reimburse physicians for telemedicine medical services provided in a school-based setting--even if the physician is not the primary care physician. Requires the presence of a health care professional, parental consent, a summary of the service to the primary care physician (or parents as appropriate), and a list of primary care physicians to the parents if the patient has none.

HB 3519 by Guerra: Home Telemonitoring Services under Medicaid

Extends Medicaid reimbursement for home telemonitoring services from 9/1/2015 to 9/1/2019.

HB 2641 by Zerwas: Health Information Exchange

Directs HHSC to ensure that agencies' information systems are compliant with standards set by an organization accredited by the American National Standards Institute. Allows HHSC to reimburse Medicaid providers for transmission of electronic health information if cost-effective. Extends Medicaid reimbursement for home telemonitoring services from 9/1/2015 to 9/1/2019.

PALLIATIVE CARE

HB 1874 by Zerwas: Palliative Care Interdisciplinary Council

Establishes a Palliative Care Interdisciplinary Council to assess the availability of patient-centered and family-focused care in Texas, including analysis of barriers to access and practices and protocols related to patient rights, consent and disclosure, and discussions between palliative care team members and patients on life-sustaining treatment or advance directives decisions. Directs HHSC to establish a statewide palliative care consumer and professional information and education program.

HB 3074 by Springer: Life-sustaining Treatments

Requires that artificial nutrition and hydration be provided to a patient unless it hastens the patient's death; exacerbates life-threatening medical problems (not outweighed by benefits); causes substantial irremediable pain that cannot be relieved (not outweighed by benefits); is medically ineffective in prolonging life; or is in conflict with a patient's documented wishes. Requires continual provision of life-sustaining treatment for up to 10 days from the time the patient is given both the ethics committee's written decision that treatment is not appropriate and the patient's medical record.

HOSPITAL OPERATIONS

HB 2557 by Zerwas: Charitable Organization formed by a Hospital District

Clarifies that--although charitable organizations created by a hospital district are considered units of local government for tort claims, they are not political subdivisions or corporations under other law. Allows a hospital district to establish a captive insurance company to insure the operational risks of the district and its affiliates.

HB 2696 by Howard: Reducing Workplace Violence against Nurses

Directs DSHS to conduct a study and publish results on workplace violence against nurses in hospitals, freestanding emergency medical facilities, nursing facilities and home health agencies.

SB 373 by West: Oversight of Hospitals that Commit Violations

Requires hospitals found to have committed a potentially preventable adverse event to implement a plan to address the deficiency, to be approved by DSHS. Requires DSHS to monitor adherence.

SB 1753 by Campbell: Identification Requirements for Hospital Staff

Prescribes the specific occupational designations required to be clearly stated on hospital ID badges of direct health care providers, effective 9/1/2019.

GRADUATE MEDICAL EDUCATION

SB 18 by Nelson: Support for Graduate Medical Education (GME)

Expands the GME Planning Grants Program to provide partnership grants to hospitals, medical schools, and community-based, ambulatory patient care centers. Makes funds available to entities to develop new GME programs with first-year residency positions, regardless of whether the entity had offered a GME program with first-year residency positions previously. Modifies Grants for Unfilled Residency Positions to specify that grants could be made available for first-year positions that were unfilled as of July 1, 2013. Allows the Higher Education Coordinating Board (HECB) to award grants for the duration of residencies (rather than for two consecutive years). Directs HECB to prioritize grants for medical specialties at critical shortage levels. Directs DSHS to conduct research on the supply of physicians in Texas and the ability of the state's GME system to meet the state's health care needs. Requires HECB to award additional grants to fund GME programs awarded grants in 2015, provided they continue to meet requirements. Creates the Permanent Fund Supporting GME outside the state treasury. Requires TDI to complete an actuarial study of the Texas Medical Liability Joint Underwriting Association; determine the amount of assets necessary for claims and administrative expenses; transfer excess amounts to the Permanent Fund Supporting GME; and determine whether a necessity exists to suspend the Association's ability to issue new policies.