HOUSE RESEARCH ORGANIZATION 1	bill analysis	3/30/2009	HB 1240 Villarreal, Naishtat (CSHB 1240 by Naishtat)
SUBJECT:	Providing additional health information for certain parents of newborns		
COMMITTEE:	Public Health — committee substitute recommended		
VOTE:	8 ayes — Kolkhorst, Naishtat, Coleman, J. Davis, Gonzales, Hopson, McReynolds, Zerwas		Davis, Gonzales, Hopson,
	0 nays		
	3 absent — S. King, Laubenberg, Truitt		
WITNESSES:	For — Susan Craven, Texas Association for Infant Mental Health; Kara Johnson, Texas Early Childhood Education Coalition (TECEC); Judy Willgren; ( <i>Registered, but did not testify:</i> Valerie Bauhofer, Texas Association of Child Care Resource and Referral Agencies (TACCRRA); Kathryn Lewis, Advocacy, Incorporated; Diana Martinez, Texas Association for the Protection of Children (TexProtects); Jason Sabo, United Ways of Texas; Josette Saxton, Texans Care for Children; Gyl Wadge, Mental Health America of Texas)		
	Against — None		
	•	e, Texas Health and Huma exas Department of State F	
BACKGROUND:	The 79th Legislature in 2005 created guidelines for providing information to parents of newborn children in Chapter T, Health and Safety Code. Health and Safety Code, sec. 161.501 requires doctors, hospitals, or midwives who provide prenatal care or deliver a baby in the state of Texas to provide a resource pamphlet to the new parents. The pamphlet is required to present information about immunizations, postpartum depression, the dangers of shaken baby syndrome, anger management techniques, as well as a list of organizations that provide postpartum counseling and assistance. Receipt of the resource pamphlet must be recorded in the woman's medical records.		
	State Health Service	Safety Code, sec. 161.502, ces (DSHS) must create the vailable online, update it q	e resource pamphlet, make a

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distribution available to doctors, hospitals, birthing centers, and midwives. In addition, DSHS is required to coordinate funding for the development, publication and distribution of the pamphlet by means other than appropriations, such as donations, grants, sponsors, or advertising.

DIGEST: HB 1240 would amend the Health and Safety Code to require that a separate resource guide be provided to certain parents of newborns in addition to the resource pamphlet they currently receive. Under the bill, if the mother of a Texas newborn was a Medicaid recipient, the resource guide would be provided to the mother and the father of the infant, if possible, or another adult caregiver, and receipt of the information would be documented in the woman's records. The guide would contain information, in both English and Spanish, concerning the developmental stages, health, and safety of a child from birth to age 5. Specifically, the guide would address:

- expected developmental milestones;
- effective parenting;
- the importance of selecting a primary care practitioner and establishing a "medical home";
- child safety;
- the importance of reading to a child;
- selecting appropriate child care;
- dental care; and
- health care and other resources available in the state.

The bill would require DSHS to make a printable version of the resource guide available online and make distribution available to doctors, hospitals, birthing centers, and midwives. In addition, DSHS would be required to coordinate funding for the development, publication, and distribution of the pamphlet by means other than appropriations, such as donations, grants, sponsors, or advertising.

HB 1240 would require the Health and Human Services Commission (HHSC) to develop specific performance measures to evaluate the resource guide in terms of reducing costs to the state and improving outcomes for children. HHSC would submit its findings in a report to the Legislature every two years. Included in the report would be the effectiveness of the resource guide and any legislative recommendations concerning the guide.

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	The bill would take effect September 1, 2009.		
SUPPORTERS SAY:	The 79th Legislature required that certain information, primarily regarding the immediate safety and health of children and mothers, that the state deems vital be provided to the parents of newborn children. CSHB 1240 simply would build upon the current guidelines to include a wider set of issues and information fundamental to the ongoing success of children.		
	The resource guide required by the bill would provide a more holistic approach to parenting and the developmental stages of a child between birth and five years, as opposed to the individual topics covered in the resource pamphlet. Research has shown that early childhood development is critical for a child's future success in school and in life.		
	The guide would be available in both English and Spanish and would be designed in a user friendly calendar-style format narrated in the voice of the child. The quick reference topics that would be covered are all essential to the social, emotional, cognitive and physical development of a child.		
	CSHB 1240 for now would target only the most vulnerable — Medicaid recipients. The Legislature last session appropriated additional funds to benefit children being served under Medicaid to help satisfy the state's obligations under the <i>Frew v. Hawkins</i> lawsuit settlement. The Frew Advisory Committee already has approved program funding for fiscal 2009 under the <i>Raising Texas</i> initiative, so there would be no additional cost to the state for this program, and Frew funding could be expected to continue in the future. In the fiscal note, the LBB projects only a minimal cost to the implement the bill, and its effectiveness in saving future costs would be measured biennially and reported to the Legislature.		
OPPONENTS SAY:	HB 1240 should require that all parents of newborns in the state receive the resource guide. The information contained in the guide is important to the success of all children, so all new parents should receive the guide rather than only Medicaid recipients.		
NOTES:	The committee substitute modified the bill as filed to require that only pregnant women who are recipients of Medicaid be given the resource guide upon birth rather than all women, require that medical records be documented to show that the woman received the resource guide in		

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addition to the resource pamphlet, if applicable, and added the performance measures to be implemented by HHSC.