

- SUBJECT:** Identification requirements for health care providers at a hospital
- COMMITTEE:** Public Health — committee substitute recommended
- VOTE:** 10 ayes — Crossover, Naishtat, Blanco, Coleman, Collier, S. Davis, Guerra, Sheffield, Zedler, Zerwas
- 1 nay — R. Miller
- WITNESSES:** For — David Gloyna, Texas Society of Anesthesiologists; (*Registered, but did not testify*: Stephen Hoang, Anesthesiologists for Children, Children’s Health Dallas; Eric Woomer, Federation of Texas Psychiatry; Kulvinder Bajwa, Harris County Medical Society; Lisa Hughes, Texas Academy of Nutrition and Dietetics; Jaime Capelo, Texas Chapter American College of Cardiology; Dan Finch, Texas Medical Association; Rachael Reed, Texas Ophthalmological Association; Bobby Hillert, Texas Orthopaedic Association; David Reynolds, Texas Osteopathic Medical Association; Harrison Bowes; Larry Driver; Daniel Leeman)
- Against — Elizabeth Sjoberg, Texas Hospital Association; (*Registered, but did not testify*: Joel Ballew, Texas Health Resources)
- On — James Willmann, Texas Nurses Association; (*Registered, but did not testify*: Allison Hughes, Department of State Health Services; Shine John, Texas Podiatric Medical Association)
- BACKGROUND:** Health and Safety Code, sec. 241.009 requires a hospital to adopt a policy requiring a health care provider who provides direct patient care at the hospital to wear a photo identification badge during all patient encounters, unless precluded by isolation and sterilization protocols. The badge must be of sufficient size and worn in a manner to be visible and must clearly state, in addition to other information, the type of license held by the provider under Title 3, Occupations Code, which regulates health professions and provides licensing requirements.
- DIGEST:** CSHB 2897 would require the identification badge of a health care

provider licensed under Title 3, Occupations Code to use specific titles to describe a person licensed under subtitles of that code. Under the bill, the badge of a provider licensed under Title 3, Occupations Code would read:

- physician, if the provider held a license under subtitle B;
- chiropractor, podiatrist, midwife, physician assistant, acupuncturist, or surgical assistant, as applicable, if the provider held a license under subtitle C;
- dentist or dental hygienist, as applicable, if the provider held a license under subtitle D;
- licensed vocational nurse, registered nurse, nurse practitioner, nurse midwife, nurse anaesthetist, or clinical nurse specialist, as applicable, if the provider held a license under subtitle E;
- optometrist, or therapeutic optometrist, as applicable if the provider held a license under subtitle F;
- speech-language pathologist or audiologist, as applicable, if the provider held a license under subtitle G;
- physical therapist, occupational therapist, or massage therapist, as applicable, if the provider held a license under subtitle H;
- medical radiologic technologist, medical physicist, perfusionist, respiratory care practitioner, orthotist, or prosthetist, as applicable, if the provider held a license or certificate under subtitle K; and
- dietitian, if the provider held a license under subtitle M.

A hospital licensed under the Texas Hospital Licensing Law in Health and Safety Code, ch. 241 would not be required to list the type of license held by a provider on a health care provider's photo identification badge until September 1, 2017. This provision would expire September 1, 2018.

The bill would take effect September 1, 2015.

**SUPPORTERS
SAY:**

CSHB 2897 would improve transparency and patient safety by requiring hospital staff to be clearly identified by license type using a title that is understandable to patients. After the passage of SB 945 by Nelson last session, which created the requirement for health providers in hospitals to wear a photo identification badge with their license type, there was some

confusion over whether a provider's license type could be identified by an abbreviation. This bill would clarify the Legislature's intent for SB 945 by specifying the exact language that must be on the badge for each health care provider practicing in a hospital to ensure that patients would know the unabbreviated title of the person treating them. The bill also would allow health providers working in a fast-paced environment to quickly identify the titles of their fellow staff.

The cost of implementing the bill would be minimal for hospitals. The two-year implementation period for the bill would allow hospitals to spread the cost of the new badges over more than a year.

The bill would use titles for health care providers on the required badges that were consistent with the term for a provider's license type in Title 3, Occupations Code. For this reason, the bill would require a person licensed as a podiatrist under Occupations Code to be identified as such on their required badge.

**OPPONENTS
SAY:**

CSHB 2897 would be overly expensive for hospitals. Hospitals recently created new badges for health providers in response to SB 945 enacted last session and would have to spend at least several thousand dollars to create new badges once more. The bill also would be inconsistent with the Texas Board of Nursing's Nursing Practice Act, which allows nurses to use the abbreviations RN, LVN, or VN as appropriate. The bill also would identify a person licensed as a podiatrist under Title 3, Occupations Code as a podiatrist when their full title is doctor of podiatric medicine.