

SUBJECT: Creating the health literacy advisory committee

COMMITTEE: Public Health — committee substitute recommended

VOTE: 9 ayes — S. Thompson, Wray, Allison, Coleman, Guerra, Ortega, Price,  
Sheffield, Zedler

1 nay — Frank

1 absent — Lucio

WITNESSES: For — Caroline D. Bergeron, Bexar County Community Health Collaborative; Oralia Bazaldua; (*Registered, but did not testify*: Anne Dunkelberg, Center for Public Policy Priorities; Matt Moore, Children's Health; Maggie Stern, Children's Defense Fund; Chase Bearden, Coalition of Texans with Disabilities; Priscilla Camacho, Dallas Regional Chamber; Jacob Smith, Doctors for Texans; Erika Ramirez, Healthy Futures of Texas; Christine Yanas, Methodist Healthcare Ministries of South Texas, Inc.; Alissa Sughrue, National Alliance on Mental Illness-Texas; Will Francis, National Association of Social Workers-Texas Chapter; Adriana Kohler, Texans Care for Children; Mimi Garcia, Texas Association of Community Health Centers; Jamie Dudensing, Texas Association of Health Plans; Jess Calvert, Texas Dental Association; Joel Ballew, Texas Health Resources; Sara Gonzalez, Texas Hospital Association; Troy Alexander, Texas Medical Association; Andrew Cates, Texas Nurses Association; Evelyn Delgado, Texas Women's Healthcare Coalition; Deneen Robinson, The Afiya Center; Rekha Lakshmanan, The Immunization Partnership; Andrew Smith, University Health System)

Against — None

On — Angela Morris, Parkland Health and Hospital System; Teresa Wagner, University of North Texas Health Science Center and SaferCare Texas; (*Registered, but did not testify*: Lisa Wyman, Department of State Health Services)

**BACKGROUND:** Health and Safety Code ch. 104 governs the Statewide Health Coordinating Council, which is charged with adopting rules governing the development and implementation of the state health plan. In accordance with rules adopted by the council, the Department of State Health Services prepares and reviews the state health plan every six years and updates the plan biennially.

**DIGEST:** CSHB 2032 would require the Statewide Health Coordinating Council to form an advisory committee on health literacy to develop a long-range plan for increasing health literacy in Texas. The bill would define "health literacy" as the degree to which individuals have the capacity to obtain, process, and understand basic health information and health services needed to make appropriate health decisions.

**Members.** The advisory committee would consist of representatives from interested parties, including the academic community, consumer groups, health plans, pharmacies, and associations of physicians, dentists, hospitals, and nurses. The committee would elect a presiding member. Members of the committee would serve without compensation but would be entitled to compensation for travel expenses.

**Duties.** In developing the long-range health literacy plan, the committee would be required to study the economic impact of low health literacy on state health care programs and insurance coverage for Texas residents.

As part of its study, the committee would:

- identify key risk factors for low health literacy;
- examine methods for addressing health literacy with patients and the public;
- examine the effectiveness of using quality measures in state health programs to improve health literacy;
- identify ways to expand the use of plain language instructions for patients; and
- identify the ways that increasing health literacy could improve patient safety, reduce preventable health events, and increase

medication adherence to attain greater cost-effectiveness and better patient outcomes in health care.

The committee would be required to update the plan for increasing health literacy every two years. By December 1 of each even-numbered year, the committee would have to submit the developed or updated long-range plan to the governor, lieutenant governor, House speaker, and each member of the Legislature.

**Meetings and limitations.** Meetings of the advisory committee would be subject to the Texas Open Meetings Act. Certain statutes governing the size and composition of advisory committees, the selection of committees' presiding officers, and the duration of advisory committees would not apply to the advisory committee established by the bill.

**State health plan.** The prevalence of low health literacy of health care consumers in Texas would be included among the major statewide health concerns required to be identified in the state health plan developed by the Department of State Health Services. The state health plan also would be required to propose strategies for increasing health literacy to attain greater cost-effectiveness and better patient outcomes in health care.

The bill would take effect September 1, 2019.

**SUPPORTERS  
SAY:**

CSHB 2032 would create an advisory committee focused on studying and improving health literacy in the state. By requiring the state to focus on this issue, the bill would help improve health outcomes for Texans, lower health care costs, and improve patients' experiences.

Poor health literacy can prevent individuals from accessing affordable health care. However, the state currently lacks a law or body dedicated to improving health literacy, leaving this serious problem unaddressed. The 2019-2020 state health plan's first recommendation was to create an advisory committee to develop a plan for promoting health literacy in Texas, and the bill would accomplish this.

Government action to improve health literacy is necessary to bring together stakeholders, including those in the private sector, to make policy recommendations. The approach to addressing the problem of health literacy outlined in the bill is similar to the way Alabama, Arkansas, and Kentucky have addressed the issue.

**OPPONENTS  
SAY:**

CSHB 2032 would unnecessarily involve the state government in an issue best addressed by the private sector. Universities, hospitals, and insurance companies could improve health literacy in the state without requiring government involvement.