

BILL ANALYSIS

Senate Research Center
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C.S.H.B. 1697
By: Price et al. (Nelson)
Health & Human Services
5/3/2017
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Interested parties express concern that access to pediatric subspecialists, such as neonatologists and pediatric trauma and emergency department specialists, is severely limited in some areas of the state and is possible only by medical transport over long distances, which is disruptive to families and potentially expensive. The goal of H.B. 1697 is to improve access to pediatric subspecialist care, connect rural hospitals to the state's advanced pediatric specialists, and reduce the number of fragile infants who must be transferred to large urban centers for specialty care through the establishment of a grant program. (Original Author's / Sponsor's Statement of Intent)

C.S.H.B. 1697 amends current law relating to the establishment of a pediatric health tele-connectivity resource program for rural Texas.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Section 541.008, Government Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subtitle I, Title 4, Government Code, by adding Chapter 541, as follows:

CHAPTER 541. PEDIATRIC TELE-CONNECTIVITY RESOURCE PROGRAM FOR RURAL TEXAS

Sec. 541.001. DEFINITIONS. Defines "nonurban health care facility," "pediatric specialist," "pediatric subspecialist," "pediatric tele-specialty provider," "physician," "program," and "telemedicine medical services."

Sec. 541.002. PEDIATRIC TELE-CONNECTIVITY RESOURCE PROGRAM FOR RURAL TEXAS. Requires the Texas Health and Human Services Commission (HHSC) with any necessary assistance of pediatric tele-specialty providers to establish a pediatric tele-connectivity resource program for rural Texas to award grants to nonurban health care facilities to connect the facilities with pediatric specialists and pediatric subspecialists who provide telemedicine medical services.

Sec. 541.003. USE OF GRANT. Authorizes a nonurban health care facility awarded a grant under this chapter to use grant money for certain purposes.

Sec. 541.004. SELECTION OF GRANT RECIPIENTS. (a) Authorizes HHSC with any necessary assistance of pediatric tele-specialty providers to select an eligible nonurban health care facility to receive a grant under this chapter.

(b) Requires a health care facility, to be eligible for a grant under this chapter, to have:

(1) a quality assurance program that measures the compliance of the facility's health care providers with the facility's medical protocols;

(2) on staff at least one full-time equivalent physician who has training and experience in pediatrics and one person who is responsible for ongoing nursery and neonatal support and care;

(3) a designated neonatal intensive care unit or an emergency department;

(4) a commitment to obtaining neonatal or pediatric education from a tertiary facility to expand the facility's depth and breadth of telemedicine medical service capabilities; and

(5) the capability of maintaining records and producing reports that measure the effectiveness of a grant received by the facility under this chapter.

Sec. 541.005. GIFTS, GRANTS, AND DONATIONS. (a) Authorizes HHSC to solicit and accept gifts, grants, and donations from any public or private source for the purposes of this chapter.

(b) Authorizes a political subdivision that participates in the program to pay part of the costs of the program.

Sec. 541.006. WORK GROUP. (a) Authorizes HHSC to establish a program work group to assist HHSC with developing, implementing, or evaluating the program and prepare a report on the results and outcomes of the grants awarded under this chapter.

(b) Provides that a member of a program work group established under this section is not entitled to compensation for serving on the program work group and is prohibited from being reimbursed for travel or other expenses incurred while conducting the business of the program work group.

(c) Provides that a program work group established under this section is not subject to Chapter 2110 (State Agency Advisory Committees), Government Code.

Sec. 541.007. REPORT TO GOVERNOR AND LEGISLATURE. Requires HHSC, not later than December 1 of each even-numbered year, to submit a report to the governor and members of the legislature regarding the activities of the program and grant recipients, including the results and outcomes of grants awarded under this chapter.

Sec. 541.008. RULES. Requires the executive commissioner of HHSC to adopt rules necessary to implement this chapter.

Sec. 541.009. SPECIFIC APPROPRIATION REQUIRED. Prohibits HHSC from spending state funds to accomplish the purposes of this chapter and provides that HHSC is not required to award a grant under this chapter unless money is appropriated for the purposes of this chapter.

SECTION 2. Requires HHSC, not later than December 1, 2017, to establish and implement the pediatric tele-connectivity resource program for rural Texas authorized by Chapter 541, Government Code, as added by this Act.

SECTION 3. Requires HHSC, not later than December 1, 2018, to provide the initial report to the governor and the legislature as required by Section 541.007, Government Code, as added by this Act.

SECTION 4. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such a waiver or authorization is granted.

SECTION 5. Effective date: September 1, 2017.