

## **BILL ANALYSIS**

Senate Research Center

H.B. 2848  
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Health & Human Services  
7/31/2017  
Enrolled

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Interested parties note that certain medical conditions produce symptoms that might lead a physician to believe erroneously that a child with such a condition has been abused or neglected. The goal of H.B. 2848 is to raise awareness of certain metabolic bone diseases or connective tissue disorders to prevent families from having to face false allegations of abuse or neglect.

H.B. 2848 amends the Family Code to require any agreement between the Department of Family and Protective Services (DFPS) and the Forensic Assessment Center Network or between DFPS and the system, defined by the bill as the entities that receive grants under the Texas Medical Child Abuse Resources and Education System, to provide assistance in connection with abuse and neglect investigations conducted by DFPS to require the network and the system to have the ability to obtain consultations with physicians who specialize in identifying unique health conditions, including rickets, Ehlers-Danlos Syndrome, osteogenesis imperfecta, vitamin D deficiency, and other similar metabolic bone diseases or connective tissue disorders. The bill requires the network and the system, in providing assessments to DFPS, to use a peer review process to resolve cases where physicians in the network or system disagree in the assessment of the causes of a child's injuries or in the presence of such a condition. The bill requires DFPS to include the requirements added by the bill's provisions in an agreement with the network or system only if DFPS receives an appropriation to enter such an agreement. (Original Author's / Sponsor's Statement of Intent)

H.B. 2848 amends current law relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect.

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter D, Chapter 261, Family Code, by adding Section 261.3017, as follows:

Sec. 261.3017. CONSULTATION WITH PHYSICIAN NETWORKS AND SYSTEMS REGARDING CERTAIN MEDICAL CONDITIONS. (a) Defines "network" and "system."

(b) Requires that any agreement between the Department of Family and Protective Services (DFPS) and the Forensic Assessment Center Network (network) or between the Department of State Health Services and the entities that receive grants under the Texas Medical Child Abuse Resources and Education System (system) to provide assistance in connection with abuse and neglect investigations conducted by DFPS require the network and the system to have the ability to obtain consultations with physicians, including radiologists, geneticists, and endocrinologists, who specialize in identifying unique health conditions, including rickets, Ehlers-Danlos Syndrome, osteogenesis imperfecta, vitamin D

deficiency, and other similar metabolic bone diseases or connective tissue disorders.

(c) Requires DFPS or the physician, if, during an abuse or neglect investigation or an assessment provided under Subsection (b), DFPS or a physician in the network determines that a child requires a specialty consultation with a physician, to refer the child's case to the system for the consultation, if the system has available capacity to take the child's case.

(d) Requires the network and the system, in providing assessments to DFPS as provided by Subsection (b), to use a blind peer review process to resolve cases where physicians in the network or system disagree in the assessment of the causes of a child's injuries or in the presence of a condition listed under Subsection (b).

SECTION 2. Makes application of this Act prospective.

SECTION 3. Effective date: September 1, 2017.