

BILL ANALYSIS

Senate Research Center
86R12089 LED-D

S.B. 1119
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Health & Human Services
3/21/2019
As Filed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Over the years, the obesity burden in border counties has been higher than the rest of the state. In 2015, for example, the obesity burden was at 35.1 percent prevalence compared to 31.9 percent in non-border counties. Since obesity leads to increased morbidity and mortality in cardiovascular diseases, chronic diseases of childhood, asthma, and some forms of cancer that are prevalent along the Texas-Mexico border region, the Department of State Health Services Task Force of Border Health Officials (DSHS; task force) recommended in 2018 that the state improve its efforts to address obesity-related illnesses in a concerted manner in border counties.

S.B. 1119 codifies the recommendations of the task force by directing DSHS to collaborate with other health and human services agencies, the appropriate state and federal agencies, health science centers and medical schools, and public and private health care providers and hospitals to develop a border public health initiative to reduce the adverse health impacts of diabetes, hypertension, and obesity for adults and children in border counties.

Building on best practices, border health officials have recommended that the initiative include educational resources designed to prevent those conditions, screenings of persons at risk for those conditions, and referrals to and treatment by health care providers for those conditions. To the extent funding is available, S.B. 1119 directs DSHS to undertake outreach campaigns and to use local resources like promotoras, non-profit organizations, and other border local entities.

As proposed, S.B. 1119 amends current law relating to the establishment of a border public health initiative by the Department of State Health Services.

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 Subtitle C, Title 2, Health and Safety Code, by adding Chapter 65, as follows:

CHAPTER 65. BORDER PUBLIC HEALTH INITIATIVE

Sec. 65.0001. DEFINITIONS. Defines "border county," "promotora," and "community health worker."

Sec. 65.0002. BORDER PUBLIC HEALTH INITIATIVE. (a) Requires the Department of State Health Services (DSHS), to the extent funding is available, to develop an initiative to reduce the adverse health impacts of diabetes, hypertension, and obesity for adults and children in border counties. Requires the initiative to promote educational resources designed to prevent those conditions, screenings of persons at risk for those conditions, and referrals to and treatment by health care providers for those conditions.

(b) Authorizes DSHS, in developing the border public health initiative, to consult and collaborate with other health and human services agencies, other appropriate

state or federal agencies, health science centers and medical schools, and public and private health care providers and hospitals.

Sec. 65.0003. OUTREACH CAMPAIGNS. Requires DSHS to, subject to available funding, conduct bilingual, culturally appropriate outreach campaigns in consultation and collaboration with appropriate individuals and entities that are authorized to include: promotoras and community health workers, academic centers located in border counties, nonprofit organizations, public schools, public and private health care providers and hospitals, worksite wellness programs, local business and health care providers that provide early detection of prediabetes, prehypertension, and obesity, and other local entities, as DSHS determines appropriate.

SECTION 2. Effective date: September 1, 2019.