

## **BILL ANALYSIS**

Senate Research Center  
86R7922 EAS-F

S.B. 436  
By: Nelson  
Health & Human Services  
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As Filed

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

Drug overdose is a leading cause of maternal deaths in Texas; most of these deaths are attributed to opioid abuse.

S.B. 436 directs the Department of State Health Services to work with the Maternal Mortality and Morbidity Task Force to develop tools and best practices necessary to assess and treat opioid use disorders among pregnant women and to prevent opioid-related overdose among pregnant and post-partum women.

As proposed, S.B. 436 amends current law relating to statewide initiatives to improve maternal and newborn health for women with opioid use disorder.

### **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 Chapter 34, Health and Safety Code, by adding Section 34.0158, as follows:

Sec. 34.0158. OPIOID USE DISORDER MATERNAL AND NEWBORN HEALTH INITIATIVES. (a) Requires the Department of State Health Services (DSHS), in collaboration with the Maternal Mortality and Morbidity Task Force (task force), to develop and implement initiatives to:

- (1) improve screening procedures to better identify and care for women with opioid use disorder;
- (2) improve continuity of care for women with opioid use disorder by ensuring that health care providers refer the women to appropriate treatment and verify the women receive the treatment;
- (3) optimize health care provided to pregnant women with opioid use disorder;
- (4) optimize health care provided to newborns with neonatal abstinence syndrome by encouraging maternal engagement;
- (5) increase access to medication-assisted treatment for women with opioid use disorder during pregnancy and the postpartum period; and
- (6) prevent opioid use disorder by reducing the number of opioid drugs prescribed before, during, and following a delivery.

(b) Authorizes DSHS, before implementing the initiatives described by Subsection (a), to conduct a limited pilot program in one or more geographic

areas of this state to implement the initiatives at hospitals licensed under Chapter 241 (Hospitals) with expertise in caring for newborns with neonatal abstinence syndrome or related conditions. Requires the pilot program to conclude not later than March 1, 2020. Provides that this subsection expires September 1, 2021.

(c) Requires DSHS, using existing resources and in collaboration with the task force, to promote and facilitate the use, among health care providers in this state, of maternal health informational materials, including tools and procedures related to best practices in maternal health to improve obstetrical care for women with opioid use disorder.

SECTION 2. Requires DSHS, not later than December 1, 2020, to prepare and submit to the presiding officers of the standing committees of each house of the legislature with primary jurisdiction over public health a written report that evaluates the success of the initiatives developed and implemented under Section 34.0158, Health and Safety Code, as added by this Act, and, if applicable, the pilot program conducted under that section. Provides that the report submitted under this section is authorized to be submitted with the report required under Section 34.0156 (Maternal Health and Safety Initiative), Health and Safety Code.

SECTION 3. Effective date: upon passage or September 1, 2019.