By: Hull, Noble, Rose, Klick, Manuel

H.B. No. 475

## A BILL TO BE ENTITLED

- 1 AN ACT
- 2 relating to certain policies and procedures for health care
- 3 specialty consultations in certain child abuse or neglect
- 4 investigations and assessments.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 6 SECTION 1. Section 261.3017, Family Code, is amended by
- 7 amending Subsections (c-1) and (d) and adding Subsections (c-3) and
- 8 (e-1) to read as follows:
- 9 (c-1) For a case in which a specialty consultation is
- 10 required by Subsection (c), the department shall refer the case to a
- 11 physician who:
- 12 (1) is licensed to practice medicine in this state
- 13 under Subtitle B, Title 3, Occupations Code;
- 14 (2) is board certified in a field or specialty
- 15 relevant to diagnosing and treating the conditions described by
- 16 Subsection (b); [and]
- 17 (3) was not involved with the report of suspected
- 18 abuse or neglect; and
- 19 (4) was not involved in reviewing the case, including
- 20 as a member of a review team under Section 261.312 or a
- 21 multidisciplinary team under Subchapter E, Chapter 264.
- 22 (c-3) Before referring a child's case under Subsection (c),
- 23 the department shall provide to the child's parent or legal
- 24 guardian or, if represented by an attorney, the attorney of the

- 1 parent or legal guardian all medical records, including
- 2 radiographs, images, and other documents used by the department and
- 3 the network during the abuse or neglect investigation.
- 4 (d) In providing assessments to the department as provided
- 5 by Subsection (b), the network and the system must use a blind peer
- 6 review process to resolve cases where physicians in the network or
- 7 system disagree in the assessment of the causes of a child's
- 8 injuries or in the presence of a condition listed under Subsection
- 9 (b). The department shall provide to the child's parent or legal
- 10 guardian or, if represented by an attorney, the attorney of the
- 11 parent or legal guardian the information used to resolve a case
- 12 described by this subsection, including the names of the
- 13 physicians, the physicians' opinions, the possible conflicting
- 14 conditions, all assessments conducted on the child who is the
- 15 <u>subject of the case</u>, and all medical records related to the child.
- 16 <u>(e-1)</u> The department, a referring provider, including a
- 17 hospital, and the network may not obstruct, prevent, or inhibit a
- 18 child's parent or legal guardian or, if represented by an attorney,
- 19 the attorney of the parent or legal guardian from obtaining all
- 20 medical records and documentation necessary to request an
- 21 alternative opinion, including access to the child for that purpose
- 22 by a health care professional providing an alternative or second
- 23 opinion or performing diagnostic testing.
- 24 SECTION 2. Sections 261.30175(b), (c), and (d), Family
- 25 Code, are amended to read as follows:
- 26 (b) A health care practitioner who reports suspected abuse
- 27 or neglect of a child or was involved in reviewing the case,

- 1 including as a member of a review team under Section 261.312 or a
- 2 multidisciplinary team under Subchapter E, Chapter 264, may not
- 3 provide forensic assessment services in connection with an
- 4 investigation resulting from the report. This subsection applies
- 5 regardless of whether the practitioner is a member of the network or
- 6 system.
- 7 (c) When referring a case for forensic assessment, the
- 8 department shall refer the case to a physician authorized to
- 9 practice medicine in this state under Subtitle B, Title 3,
- 10 Occupations Code, who was not involved:
- 11 (1) with the report of suspected abuse or neglect; or
- 12 (2) in reviewing the case, including as a member of a
- 13 <u>review team under Section 261.312 or a multidisciplinary team under</u>
- 14 Subchapter E, Chapter 264.
- 15 (d) This section may not be construed to:
- 16 (1) prohibit the department from interviewing the
- 17 health care practitioner in the practitioner's capacity as a
- 18 principal or collateral source; [or]
- 19 (2) otherwise restrict the department's ability to
- 20 conduct an investigation as provided by this subchapter; or
- 21 (3) restrict the ability of the child's parent or legal
- 22 guardian or, if represented by an attorney, the attorney of the
- 23 parent or legal guardian to receive all medical records and
- 24 documentation relating to a case in which the network is consulted.
- 25 SECTION 3. This Act takes effect September 1, 2023.