

Amend Floor Amendment No.1 to CSSB 22 as follows:

(1) In the recital to the section of the bill adding Section 1702.005, Occupations Code, strike "Section 1702.005" and substitute "Sections 1702.005 and 1702.006".

(2) In the section of the bill adding Section 1702.005, Occupations Code, following that proposed section, insert the following:

Sec. 1702.006. TEXAS DEPARTMENT OF HEALTH. (a) In this section, "personal emergency response system" means an alarm system that is:

(1) installed in the residence of a person;
(2) monitored by an alarm systems company; and
(3) designed to permit the person to signal the occurrence of a medical emergency on the part of the person so that the company may dispatch appropriate aid.

(b) Notwithstanding the other provisions of this chapter, the Texas Department of Health shall administer the provisions of this chapter that are applicable to the following persons who provide services subject to regulation under this chapter only in connection with personal emergency response systems:

(1) an alarm systems company;
(2) an alarm systems installer;
(3) an alarm systems monitor;
(4) a manager or branch office manager; and
(5) a security salesperson.

(c) A reference in this chapter or another law to the Texas Commission on Private Security in connection with a person described by Subsection (b) means the Texas Department of Health.

(3) In the nonamendatory section of the bill relating to the transfer of functions, activities, and other matters from the Texas Commission on Private Security to the Texas Private Security Board of the Department of Public Safety of the State of Texas, strike Subsections (a) and (b) of the section and substitute the following:

(a) On January 1, 2004:

(1) all functions and activities performed by the Texas Commission on Private Security immediately before that date

are transferred to the Texas Private Security Board of the Department of Public Safety of the State of Texas or the Texas Department of Health, as applicable;

(2) a rule or form adopted by the Texas Commission on Private Security is a rule or form of the Texas Private Security Board or the Texas Department of Health, as applicable, and remains in effect until amended or replaced by that board or department;

(3) a reference in law or an administrative rule to the Texas Commission on Private Security means the Texas Private Security Board or the Texas Department of Health, as applicable;

(4) a complaint, investigation, or other proceeding before the Texas Commission on Private Security is transferred without change in status to the Texas Private Security Board or the Texas Department of Health, as determined by a memorandum of understanding between the Department of Public Safety of the State of Texas and the Texas Department of Health, and the Texas Private Security Board or the Texas Department of Health, as applicable, assumes, as appropriate and without a change in status, the position of the Texas Commission on Private Security in an action or proceeding to which the Texas Commission on Private Security is a party;

(5) all property in the custody of the Texas Commission on Private Security is transferred to the Texas Private Security Board or the Texas Department of Health, as determined by a memorandum of understanding between the Department of Public Safety of the State of Texas and the Texas Department of Health; and

(6) the unexpended and unobligated balance of any money appropriated by the legislature for the Texas Commission on Private Security is transferred to the Texas Private Security Board or the Texas Department of Health, as determined by a memorandum of understanding between the Department of Public Safety of the State of Texas and the Texas Department of Health.

(b) Before January 1, 2004, the Texas Commission on Private Security may agree with the Department of Public Safety of the State of Texas and the Texas Department of Health to transfer any property of the Texas Commission on Private Security to the Department of Public Safety of the State of Texas or the Texas Department of

Health to implement the transfer required by this article.