

BILL ANALYSIS

C.S.H.B. 3099
By: McReynolds
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

There is a growing epidemic of children as young as elementary and middle school ages, developing risk factors for Type 2 diabetes. The Institute of Medicine of the National Academies reports that individuals born in the United States in 2000 face a lifetime risk of being diagnosed with diabetes at some point in their lives, estimated at 30 percent for boys and 40 percent for girls at current obesity level rates. The risk is even higher among ethnic minority groups; of Hispanic children born in 2000, about 50 percent are expected to become diabetic.

Currently, The University of Texas-Pan American administers the acanthosis nigricans (AN) screening program in certain elementary schools. The substitute seeks to expand both the geography and scope of the program by transferring the program to the Department of State Health Services (DSHS) and altering the screening program.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Department of State Health Services in SECTION 3 of this bill.

ANALYSIS

The substitute requires the Department of State Health Services (DSHS), rather than the Texas-Mexico Border Health Coordination Office of The University of Texas-Pan American, to administer a risk assessment program for Type 2 diabetes, rather than an acanthosis nigricans screening program. The substitute authorizes DSHS to contract with one or more institutions of higher education, such as the Texas-Mexico Border Health Coordination Office of The University of Texas-Pan American or the Texas Tech University Health Science Center.

The substitute requires DSHS to coordinate the risk assessment for Type 2 diabetes, and expands the screening of individuals who attend public or private schools located in specific Texas Education Agency Regional Education Service Centers to other regional education service centers as funding is available.

The substitute requires DSHS to establish procedures necessary to administer the risk assessment program, including procedures that require DSHS and each school to record and track the information collected during risk assessment activities using certain methods. Makes a conforming change. The substitute requires DSHS to require a risk assessment for Type 2 diabetes to be performed at the same time as certain hearing and vision screenings. Sets forth certain requirements for the risk assessment. The substitute requires DSHS to consult with the Board of Nurse Examiners to determine the training requirements necessary for a nurse or other person to conduct risk assessment activities under this chapter. The substitute requires DSHS to periodically provide information on obesity, Type 2 diabetes, and related conditions to physicians.

The substitute requires the chief administrator of each school to maintain, on a form prescribed by DSHS, risk assessment records for each individual in attendance and enter the risk assessment information for each individual on the Centers for Disease Control and Prevention's Epi Info or similar surveillance software selected by the department.

The substitute requires sets forth certain requirements for the report indicating that an individual may be at risk for developing Type 2 diabetes. Requires the required annual report to be

compiled from the information entered into the surveillance software and to be on a form prescribed by DSHS. Makes conforming changes. Requires DSHS to analyze and compile a summary of the reports submitted by schools, and to make the summary available to schools and the public on request. The DSHS shall submit to the governor and legislature a report on the program.

The substitute authorizes DSHS to accept gifts, grants, and donations to support the Type 2 diabetes risk assessment program conducted under this chapter.

The substitute requires the Texas Diabetes Council (council) to establish the Type 2 Diabetes Risk Assessment Program Advisory Committee (advisory committee) to advise DSHS on the program. The nurses selected to serve on the committee are selected jointly by the Texas School of Nurses Organization and the Texas School Nurse Administrators Association. The substitute sets forth the composition of the advisory committee. Prohibits a person from being a member of the advisory committee if the person is required to register as a lobbyist because of the person's activities for compensation on behalf of a health care profession, related business, or another profession related to the operation of the council. Requires the representative of the council appointed to serve as the presiding officer of the advisory committee. Requires the advisory committee to perform certain functions including recommending, advising, and contributing to Type 2 diabetes state plans.

The substitute requires that the executive head of the following agencies to appoint a representative to the committee.

- The Texas Diabetes Council,
- The Department of State Health Services,
- The Texas Education Agency,
- The Texas Medical Association,
- The Texas Pediatric Society,
- The American Heart Association,
- The American Diabetes Association,
- an institution of higher education involved in type 2 diabetes research as selected by the Texas Diabetes Council,
- the school and school district as selected by the Texas Diabetes Council.

The substitute provides for technical and conforming changes

EFFECTIVE DATE

September 1, 2005.

COMPARISON OF ORIGINAL TO SUBSTITUTE

The substitute keeps the program in the current Education Service Centers and allows the Department to geographically expand the program as funding is available. Under the substitute, The Risk Assessment for Type 2 Diabetes program will be administered by the department with the assistance of an advisory committee. The provision that requires the Department to go through the formal rule making process is removed. The screening has been simplified by performing the AN and BP screenings at the same time. There are also a few terminology changes in the substitute. This substitute omits the provision for school districts to intervene. Instead, they will only be required to perform evaluations. Finally, the substitute adds a school district administrator to the advisory committee and states that the nurses serving on the committee shall be selected jointly by the Texas School Nurses Organization and the Texas School Nurse Administrators Association.