BILL ANALYSIS

Senate Research Center 79R2776 CME-D

H.C.R. 37 By: Delisi (Nelson) Health & Human Services 4/30/2005 Engrossed

AUTHOR'S/SPONSOR'S STATEMENT OF INTENT

Federally funded health centers play a critical role in the delivery of health care and related services to residents who are not covered by health insurance or who reside in communities that lack traditional medical resources; the importance of these federal centers to the health of Texans cannot be overestimated.

More than six million Texans reside in federally designated health professional shortage areas and the federal government has identified 359 medically underserved areas and populations in the Lone Star State; these areas and groups are characterized by a high percentage of elderly residents, high rates of poverty, high infant mortality, and a lower ratio of primary care providers than the national average.

The scarcity of medical care across so much of Texas and particularly in areas of such great need is compounded by the fact that, according to the United States Census Bureau, 24.6 percent of the state's population is not covered by health insurance; consequently, many Texans are forced to seek preventive and primary care in hospital emergency rooms, straining already limited health care resources.

Further complicating the effective delivery of health care in Texas are the unique challenges stemming from the 1,254 mile international border with the United Mexican States; the 32 county border region contains three of the 10 fastest growing metropolitan areas in the nation; currently home to more than two million Texans, estimates indicate that the population in the border region is growing at twice the rate of the state as a whole.

This incredible rate of population and accompanying industrial growth has occurred despite a severely limited municipal infrastructure; many border communities are plagued by inadequate drinking water and wastewater systems, unmanaged and illegal solid and hazardous waste sites, and poor air quality; as a result, the rate of waterborne diseases such as hepatitis A and amebiasis in the Texas counties bordering Mexico has been reported to be two to three times greater than the statewide average; in 2003, the rate of tuberculosis incidence per 100,000 in population was nearly twice that of non-border counties.

The condition of public health along the border is critical to that of the entire country; Mexico is the United States' second-largest trading partner and, according to the Center for Transportation Research at The University of Texas at Austin, 76 percent of all U.S. trade with Mexico passes through Texas; in addition, as the second-leading agricultural producing state, Texas is a key component of the nation's food supply.

With more than 22 million residents, Texas also faces a number of other alarming public health issues, such as obesity, cardiovascular disease, and diabetes; in 2003, the Texas Department of Health reported that 39 percent of Texas fourth graders, 38 percent of eighth graders, and 61 percent of Texas adults were overweight or obese.

Obesity-related medical conditions include birth defects, cancer, gallbladder disease, hypertension, cardiovascular disease, and type II diabetes, and overweight and obese individuals cost Texans \$10.5 billion in medical care and related costs in 2001; futhermore, cardiovascular disease is the number one killer in Texas, accounting for two out of every five deaths, and the Texas Diabetes Council estimates that more than one million adults in Texas have been diagnosed with diabetes and more than 500,000 adults are believed to have undiagnosed diabetes.

Facilities such as federally qualified health centers and federally qualified health center lookalikes as well as programs operated by the Health Resources Services Administration and the Centers for Disease Control and Prevention are specifically designed to provide primary and preventive care to underserved areas and to meet many of the distinct public health needs facing Texas; better interagency coordination and increased federal resources would greatly enhance ongoing prevention, detection, and treatment efforts by the State of Texas.

Texas' growing population, demographic diversity, and a border with the United Mexican States present unique challenges to providing quality health care to its citizens; as a buffer to the remainder of the United States against infectious disease and contamination of the country's food supply, the State of Texas merits additional resources to provide for the health of its residents and, ultimately, to safeguard the health of the entire United States;

RESOLVED

That the 79th Legislature of the State of Texas hereby respectfully urge the United States Congress, the Centers for Disease Control and Prevention, and the Health Resources and Services Administration to increase the presence of federal health and human services agencies in Texas, improve coordination of federal programs in Texas, and increase the amount of federal resources available to Texas.

That the Texas secretary of state forward official copies of this resolution to the president of the United States, the speaker of the house of representatives and the president of the senate of the United States Congress, and all members of the Texas delegation to the congress with the request that this resolution be officially entered in the Congressional Record as a memorial to the Congress of the United States of America and that copies also be forwarded to the secretary of the United States Department of Health and Human Services, the director of the Centers for Disease Control and Prevention, and the administrator of the Health Resources and Services Administration.