BILL ANALYSIS

S.B. 1239 By: Lucio Public Health Committee Report (Unamended)

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 ancanthosis nigricans (AN) screening program in certain elementary schools. S.B. 1239 seeks to expand both the geography and scope of the program by altering the screening program.

This encourages The University of Texas-Pan American to expand the program statewide; currently the program serves a limited number of regional education service centers. Instead of just screening for AN, school nurses would first assess students for body mass index (BMI); students with a high BMI will then be assessed for AN and high blood pressure.

The bill creates an advisory council to assist with the program, chaired by the Texas Diabetes Institute. Members would include representatives from the Department of State Health Services (DSHS), the Texas Education Agency (TEA), the Texas Medical Association (TMA), a representative from an institute of higher learning, the Texas Pediatric Society, school nurses, the American Heart Association, and the Texas Diabetes Council.

S.B. 1239 requires the University of Texas-Pan American to track the assessment data and make it available on an aggregate level to schools so that schools and communities can use the data as a way to track student health.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas-Mexico Border Health Coordination Office of The University of Texas-Pan American in SECTION 3 of this bill.

ANALYSIS

The bill requires the Texas-Mexico Border Health Coordination Office of The University of Texas-Pan American (office) to administer a risk assessment program for Type 2 diabetes, rather than AN screening program. The chapter expires on September 1, 2007. The bill expands the risk assessment for Type 2 Diabetes of individuals who attend public or private schools located in specific Texas Education Agency Regional Education Service Centers to include other regional education service centers as funding is available.

The bill requires a risk assessment for Type 2 diabetes to be performed at the same time as certain hearing, vision, and spinal screenings. The bill states that the risk assessment should identify students with a body mass index above the normal range and further assess students identified for AN and elevated blood pressure. The bill also requires the office 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 bill also requires the

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office to periodically provide information on obesity, Type 2 diabetes, and its related conditions to physicians.

The bill requires the chief administrator of each school to maintain 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 office.

This bill require that a risk assessment report that indicates that an individual may be at risk for developing Type 2 diabetes contain an explanation of: the process for assessing risk; the risk factors associated; and the reasons the individual was identified in the risk assessment process as being at risk for developing Type 2 diabetes; the body mass index. The bill requires an annual report to be compiled from the information entered into the surveillance software and makes conforming changes. The bill requires the office 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, as well as submitting to the governor, the legislature and the advisory committee a report on the effectiveness of the program.

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

The bill requires the Texas Diabetes Council (council) to establish the Type 2 Diabetes Risk Assessment Program Advisory Committee (advisory committee) to advise the office on the program. The bill sets forth the composition of the advisory council to include: one representative of the council; one representative of the department; one representative of TEA; one representative from The University of Texas-Pan American; one representative of TMA, one representative of the Texas Pediatric Society; one representative of the American Heart Association; one representative from a school district selected by the council; one school nurse representative from a rural school selected by the council; one school nurse representative from an urban school selected by the council; one parent or guardian of a child in this state with Type 2 diabetes. The bill also includes language to prohibit conflict of interest on the advisory committee and requires the representative from the council to serve as the presiding officer of the advisory committee.

The bill requires the advisory committee to recommend the person responsible for conducting risk assessment activities for schools that do not employ a school nurse, advise the office on the age groups that would benefit most from the risk assessment activities, recommend methods to record and report the number of children who are identified in the risk assessment as being at risk for having or developing Type 2 diabetes and who qualify for the national free or reduced-price lunch program, and recommend a timeline for the office to implement the advisory committee's recommended risk assessment activities, surveillance methods, reports, and quality improvements and contribute to the state plan for diabetes treatment developed by the council.

The bill requires, as early as possible after the effective date of this bill, the executive head of: the council, DSHS, TEA, TMA, the Texas Pediatric Society, the American Heart Association, the American Diabetes Association, the University of Texas-Pan American, and the schools and school district selected by the council for this purpose.

The bill requires, as early as possible after the effective date of this bill, the head of the council to appoint a parent or guardian of a child in this state with Type 2 diabetes to serve on the advisory committee as created by this bill.

The bill repeals the definition of "screening test."

The bill provides for technical and conforming changes.

EFFECTIVE DATE

September 1, 2005.

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