

1-1 By: Nelson, et al. S.B. No. 1877
1-2 (In the Senate - Filed March 11, 2009; March 24, 2009, read
1-3 first time and referred to Committee on Health and Human Services;
1-4 April 15, 2009, reported adversely, with favorable Committee
1-5 Substitute by the following vote: Yeas 9, Nays 0; April 15, 2009,
1-6 sent to printer.)

1-7 COMMITTEE SUBSTITUTE FOR S.B. No. 1877 By: Nelson

1-8 A BILL TO BE ENTITLED
1-9 AN ACT

1-10 relating to the creation of the Texas Medical Child Abuse Resources
1-11 and Education System grant program.

1-12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-13 SECTION 1. Chapter 1001, Health and Safety Code, is amended
1-14 by adding Subchapter F to read as follows:

1-15 SUBCHAPTER F. TEXAS MEDICAL CHILD ABUSE RESOURCES AND EDUCATION
1-16 SYSTEM (MEDCARES)

1-17 Sec. 1001.151. TEXAS MEDICAL CHILD ABUSE RESOURCES AND
1-18 EDUCATION SYSTEM GRANT PROGRAM. (a) The department shall
1-19 establish the Texas Medical Child Abuse Resources and Education
1-20 System (MEDCARES) grant program to award grants for the purpose of
1-21 developing and supporting regional programs to improve the
1-22 assessment, diagnosis, and treatment of child abuse and neglect as
1-23 described by the report submitted to the 80th Legislature by the
1-24 committee on pediatric centers of excellence relating to abuse and
1-25 neglect in accordance with Section 266.0031, Family Code, as added
1-26 by Chapter 1406 (S.B. 758), Acts of the 80th Legislature, Regular
1-27 Session, 2007.

1-28 (b) The department may award grants to hospitals or academic
1-29 health centers with expertise in pediatric health care and a
1-30 demonstrated commitment to developing basic and advanced programs
1-31 and centers of excellence for the assessment, diagnosis, and
1-32 treatment of child abuse and neglect.

1-33 (c) The department shall encourage collaboration among
1-34 grant recipients in the development of program services and
1-35 activities.

1-36 Sec. 1001.152. USE OF GRANT. A grant awarded under this
1-37 subchapter may be used to support:

1-38 (1) comprehensive medical evaluations, psychosocial
1-39 assessments, treatment services, and written and photographic
1-40 documentation of abuse;

1-41 (2) education and training for health professionals,
1-42 including physicians, medical students, resident physicians, child
1-43 abuse fellows, and nurses, relating to the assessment, diagnosis,
1-44 and treatment of child abuse and neglect;

1-45 (3) education and training for community agencies
1-46 involved with child abuse and neglect, law enforcement officials,
1-47 child protective services staff, and children's advocacy centers
1-48 involved with child abuse and neglect;

1-49 (4) medical case reviews and consultations and
1-50 testimony regarding those reviews and consultations;

1-51 (5) research, data collection, and quality assurance
1-52 activities, including the development of evidence-based guidelines
1-53 and protocols for the prevention, evaluation, and treatment of
1-54 child abuse and neglect;

1-55 (6) the use of telemedicine and other means to extend
1-56 services from regional programs into underserved areas; and

1-57 (7) other necessary activities, services, supplies,
1-58 facilities, and equipment as determined by the department.

1-59 Sec. 1001.153. MEDCARES ADVISORY COMMITTEE. The executive
1-60 commissioner shall establish an advisory committee to advise the
1-61 department and the executive commissioner in establishing rules and
1-62 priorities for the use of grant funds awarded through the program.
1-63 The advisory committee is composed of the following nine members:

- 2-1 (1) the state Medicaid director or the state Medicaid
- 2-2 director's designee;
- 2-3 (2) the medical director for the Department of Family
- 2-4 and Protective Services or the medical director's designee; and
- 2-5 (3) as appointed by the executive commissioner:
- 2-6 (A) two pediatricians with expertise in child
- 2-7 abuse or neglect;
- 2-8 (B) a nurse with expertise in child abuse or
- 2-9 neglect;
- 2-10 (C) a representative of a pediatric residency
- 2-11 training program;
- 2-12 (D) a representative of a children's hospital;
- 2-13 (E) a representative of a children's advocacy
- 2-14 center; and
- 2-15 (F) a member of the Governor's EMS and Trauma
- 2-16 Advisory Council.

2-17 Sec. 1001.154. GIFTS AND GRANTS. The department may
 2-18 solicit and accept gifts, grants, and donations from any public or
 2-19 private source for the purposes of this subchapter.

2-20 Sec. 1001.155. REQUIRED REPORT. Not later than December 1
 2-21 of each even-numbered year, the department, with the assistance of
 2-22 the advisory committee established under this subchapter, shall
 2-23 submit a report to the governor and the legislature regarding the
 2-24 grant activities of the program and grant recipients, including the
 2-25 results and outcomes of grants provided under this subchapter.

2-26 Sec. 1001.156. RULES. The executive commissioner may adopt
 2-27 rules as necessary to implement this subchapter.

2-28 Sec. 1001.157. APPROPRIATION REQUIRED. The department is
 2-29 not required to award a grant under this subchapter unless the
 2-30 department is specifically appropriated money for purposes of this
 2-31 subchapter.

2-32 SECTION 2. (a) Not later than November 1, 2009, the
 2-33 executive commissioner of the Health and Human Services Commission
 2-34 shall appoint the members of the advisory committee as required by
 2-35 Section 1001.153, Health and Safety Code, as added by this Act.

2-36 (b) Not later than January 1, 2010, the Department of State
 2-37 Health Services shall establish and implement a grant program as
 2-38 described by Subchapter F, Chapter 1001, Health and Safety Code, as
 2-39 added by this Act.

2-40 (c) Not later than December 1, 2010, the Department of State
 2-41 Health Services shall provide the initial report to the governor
 2-42 and the legislature as required by Section 1001.155, Health and
 2-43 Safety Code, as added by this Act.

2-44 SECTION 3. If before implementing any provision of this Act
 2-45 a state agency determines that a waiver or authorization from a
 2-46 federal agency is necessary for implementation of that provision,
 2-47 the agency affected by the provision shall request the waiver or
 2-48 authorization and may delay implementing that provision until the
 2-49 waiver or authorization is granted.

2-50 SECTION 4. This Act takes effect September 1, 2009.

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