By: Kolkhorst H.B. No. 1875 Substitute the following for H.B. No. 1875: C.S.H.B. No. 1875 By: Callegari

# A BILL TO BE ENTITLED

### AN ACT

2 relating to the repeal of certain health programs, task forces, and councils, to the review of certain health programs, councils, 3 centers, and divisions under the Texas Sunset Act, and to the 4 5 transfer of certain functions to the Department of State Health Services; providing penalties. 6

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 531.021(b), Government Code, is amended 8 to read as follows: 9

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(b) The commission shall:

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(1)plan and direct the Medicaid program in each 12 agency that operates a portion of the Medicaid program, including the management of the Medicaid managed care system and the 13 14 development, procurement, management, and monitoring of contracts

necessary to implement the Medicaid managed care system;

16 (2) adopt reasonable rules and standards governing the determination of fees, charges, and rates for medical assistance 17 payments under Chapter 32, Human Resources Code, in consultation 18 with the agencies that operate the Medicaid program; and 19

20 (3) establish requirements for and define the scope of 21 the ongoing evaluation of the Medicaid managed care system [conducted in conjunction with the Texas Health Care Information 22 Council under Section 108.0065, Health and Safety Code]. 23

SECTION 2. Section 531.0214(b), Government Code, is amended 24

1 to read as follows:

2 (b) To minimize cost and duplication of activities, the3 commission shall assist and coordinate:

4 (1) the efforts of the agencies that are participating 5 in the development of the system required by Subsection (a); and

6 (2) the efforts of those agencies with the efforts of 7 other agencies involved in a [statewide] health care data 8 collection system used by the Department of State Health Services 9 [provided for by Section 108.006, Health and Safety Code], 10 including avoiding duplication of expenditure of state funds for 11 computer hardware, staff, or services.

SECTION 3. Section 2054.0541, Government Code, is amended to read as follows:

Sec. 2054.0541. STATEWIDE HEALTH CARE DATA COLLECTION 14 15 SYSTEM. The department shall assist [the Texas Health Care Information Council and] the [Texas] Department of State Health 16 and management functions 17 Services with planning, analyses, relating to the procurement, use, and implementation of a 18 19 [statewide] health care data collection system used by the Department of State Health Services [under Chapter 108, Health and 20 Safety Code]. 21

22 SECTION 4. Chapter 35, Health and Safety Code, is amended by 23 adding Section 35.014 to read as follows:

24 <u>Sec. 35.014. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The</u> 25 <u>services program for children with special health care needs is</u> 26 <u>subject to review under Chapter 325, Government Code (Texas Sunset</u> 27 <u>Act), as if it were a state agency subject to review under that</u>

C.S.H.B. No. 1875 1 chapter. If the program is not continued in existence in accordance 2 with that chapter, the program is abolished and this chapter 3 expires September 1, 2019. 4 (b) To the extent that Chapter 325, Government Code (Texas 5 Sunset Act), places a duty on a state agency subject to review under that chapter, the department shall perform the duty as it relates to 6 7 the program. SECTION 5. Chapter 36, Health and Safety Code, is amended by 8 adding Section 36.015 to read as follows: 9 10 Sec. 36.015. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The screening program for special senses and communication disorders 11 12 established under this chapter is subject to review under Chapter 325, Government Code (Texas Sunset Act), as if it were a state 13 14 agency subject to review under that chapter. If the program is not 15 continued in existence in accordance with that chapter, the program 16 is abolished and this chapter expires September 1, 2019. 17 (b) To the extent that Chapter 325, Government Code (Texas Sunset Act), places a duty on a state agency subject to review under 18 19 that chapter, the department shall perform the duty as it relates to 20 the program. 21 SECTION 6. Chapter 37, Health and Safety Code, is amended by 22 adding Section 37.007 to read as follows: Sec. 37.007. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The 23 24 program to detect abnormal spinal curvature in children established under this chapter is subject to review under Chapter 325, 25 26 Government Code (Texas Sunset Act), as if it were a state agency subject to review under that chapter. If the program is not 27

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1	continued in existence in accordance with that chapter, the program
2	is abolished and this chapter expires September 1, 2019.
3	(b) To the extent that Chapter 325, Government Code (Texas
4	Sunset Act), places a duty on a state agency subject to review under
5	that chapter, the department shall perform the duty as it relates to
6	the program.
7	SECTION 7. Chapter 38, Health and Safety Code, is amended by
8	adding Section 38.003 to read as follows:
9	Sec. 38.003. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The
10	program for the control and eradication of pediculosis in minors
11	established under this chapter is subject to review under Chapter
12	325, Government Code (Texas Sunset Act), as if it were a state
13	agency subject to review under that chapter. If the program is not
14	continued in existence in accordance with that chapter, the program
15	is abolished and this chapter expires September 1, 2019.
16	(b) To the extent that Chapter 325, Government Code (Texas
17	Sunset Act), places a duty on a state agency subject to review under
18	that chapter, the department shall perform the duty as it relates to
19	the program.
20	SECTION 8. Chapter 39, Health and Safety Code, is amended by
21	adding Section 39.007 to read as follows:
22	Sec. 39.007. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The
23	children's outreach heart program is subject to review under
24	Chapter 325, Government Code (Texas Sunset Act), as if it were a
25	state agency subject to review under that chapter. If the program
26	is not continued in existence in accordance with that chapter, the
27	program is abolished and this chapter expires September 1, 2019.

1	(b) To the extent that Chapter 325, Government Code (Texas
2	Sunset Act), places a duty on a state agency subject to review under
3	that chapter, the department shall perform the duty as it relates to
4	the program.
5	SECTION 9. Chapter 40, Health and Safety Code, is amended by
6	adding Section 40.008 to read as follows:
7	Sec. 40.008. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The
8	epilepsy program established under this chapter is subject to
9	review under Chapter 325, Government Code (Texas Sunset Act), as if
10	it were a state agency subject to review under that chapter. If the
11	program is not continued in existence in accordance with that
12	chapter, the program is abolished and this chapter expires
13	September 1, 2019.
14	(b) To the extent that Chapter 325, Government Code (Texas
15	Sunset Act), places a duty on a state agency subject to review under
16	that chapter, the department shall perform the duty as it relates to
17	the program.
18	SECTION 10. Chapter 41, Health and Safety Code, is amended
19	by adding Section 41.008 to read as follows:
20	Sec. 41.008. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The
21	hemophilia assistance program is subject to review under Chapter
22	325, Government Code (Texas Sunset Act), as if it were a state
23	agency subject to review under that chapter. If the program is not
24	continued in existence in accordance with that chapter, the program
25	is abolished and this chapter expires September 1, 2019.
26	(b) To the extent that Chapter 325, Government Code (Texas
27	Sunset Act), places a duty on a state agency subject to review under

that chapter, the department shall perform the duty as it relates to 1 2 the program. SECTION 11. Chapter 42, Health and Safety Code, is amended 3 4 by adding Section 42.019 to read as follows: 5 Sec. 42.019. SUNSET PROVISION. The kidney health care 6 division is subject to Chapter 325, Government Code (Texas Sunset 7 Act). Unless continued in existence as provided by that chapter, 8 the division is abolished and this chapter expires September 1, 2019. 9 SECTION 12. Chapter 43, Health and Safety Code, is amended 10 by adding Section 43.015 to read as follows: 11 Sec. 43.015. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The 12 oral health improvement services program is subject to review under 13 14 Chapter 325, Government Code (Texas Sunset Act), as if it were a 15 state agency subject to review under that chapter. If the program is not continued in existence in accordance with that chapter, the 16 17 program is abolished and this chapter expires September 1, 2019. (b) To the extent that Chapter 325, Government Code (Texas 18 19 Sunset Act), places a duty on a state agency subject to review under that chapter, the department shall perform the duty as it relates to 20 21 the program. SECTION 13. Chapter 46, Health and Safety Code, is amended 22 23 by adding Section 46.008 to read as follows: 24 Sec. 46.008. APPLICATION OF SUNSET ACT TO SYSTEM. (a) The system created by Section 46.002(a) is subject to review under 25 26 Chapter 325, Government Code (Texas Sunset Act), as if it were a state agency subject to review under that chapter. If the system is 27

1	not continued in existence in accordance with that chapter, the
2	system is abolished and this chapter expires September 1, 2019.
3	(b) To the extent that Chapter 325, Government Code (Texas
4	Sunset Act), places a duty on a state agency subject to review under
5	that chapter, the department shall perform the duty as it relates to
6	the system.
7	SECTION 14. Chapter 47, Health and Safety Code, is amended
8	by adding Section 47.010 to read as follows:
9	Sec. 47.010. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The
10	newborn hearing screening, tracking, and intervention program is
11	subject to review under Chapter 325, Government Code (Texas Sunset
12	Act), as if it were a state agency subject to review under that
13	chapter. If the program is not continued in existence in accordance
14	with that chapter, the program is abolished and this chapter
15	expires September 1, 2019.
16	(b) To the extent that Chapter 325, Government Code (Texas
17	Sunset Act), places a duty on a state agency subject to review under
18	that chapter, the department shall perform the duty as it relates to
19	the program.
20	SECTION 15. Section 81.010, Health and Safety Code, is
21	amended by adding Subsection (1) to read as follows:
22	(1) The Interagency Coordinating Council for HIV and
23	Hepatitis is subject to Chapter 325, Government Code (Texas Sunset
24	Act). Unless continued in existence as provided by that chapter,
25	the council is abolished and this section expires September 1,
26	<u>2019.</u>
27	SECTION 16. Chapter 83, Health and Safety Code, is amended

1 by adding Section 83.0085 to read as follows: 2 Sec. 83.0085. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The program created by Section 83.008 is subject to review under 3 Chapter 325, Government Code (Texas Sunset Act), as if it were a 4 5 state agency subject to review under that chapter. If the program is not continued in existence in accordance with that chapter, the 6 7 program is abolished and this chapter expires September 1, 2019. 8 (b) To the extent that Chapter 325, Government Code (Texas Sunset Act), places a duty on a state agency subject to review under 9 10 that chapter, the department shall perform the duty as it relates to the program. 11 SECTION 17. Subchapter B, Chapter 85, Health and Safety 12 Code, is amended by adding Section 85.045 to read as follows: 13 14 Sec. 85.045. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The 15 state grant program established under this subchapter is subject to review under Chapter 325, Government Code (Texas Sunset Act), as if 16 17 it were a state agency subject to review under that chapter. If the program is not continued in existence in accordance with that 18 19 chapter, the program is abolished and this subchapter expires September 1, 2019. 20 21 (b) To the extent that Chapter 325, Government Code (Texas 22 Sunset Act), places a duty on a state agency subject to review under 23 that chapter, the department shall perform the duty as it relates to 24 the program. SECTION 18. Subchapter C, Chapter 85, Health and Safety 25 26 Code, is amended by adding Section 85.067 to read as follows: 27 Sec. 85.067. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The

1 Texas HIV medication program is subject to review under Chapter 2 325, Government Code (Texas Sunset Act), as if it were a state agency subject to review under that chapter. If the program is not 3 continued in existence in accordance with that chapter, the program 4 is abolished and this subchapter expires September 1, 2019. 5 6 (b) To the extent that Chapter 325, Government Code (Texas 7 Sunset Act), places a duty on a state agency subject to review under 8 that chapter, the department shall perform the duty as it relates to the program. 9 SECTION 19. Subchapter D, Chapter 85, Health and Safety 10 Code, is amended by adding Section 85.090 to read as follows: 11 12 Sec. 85.090. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The testing, registration, and counseling programs established under 13 14 this subchapter are subject to review under Chapter 325, Government 15 Code (Texas Sunset Act), as if they were a state agency subject to review under that chapter. If the programs are not continued in 16 17 existence in accordance with that chapter, the programs are abolished and this subchapter expires September 1, 2019. 18 19 (b) To the extent that Chapter 325, Government Code (Texas Sunset Act), places a duty on a state agency subject to review under 20 that chapter, the department shall perform the duty as it relates to 21 22 the programs. SECTION 20. Subchapter A, Chapter 86, Health and Safety 23 24 Code, is amended by adding Section 86.006 to read as follows: Sec. 86.006. SUNSET PROVISION. The advisory council is 25 26 subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the council is 27

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### C.S.H.B. No. 1875 abolished and this subchapter expires September 1, 2019. 1 2 SECTION 21. Section 86.012, Health and Safety Code, is 3 amended by adding Subsection (c) to read as follows: 4 (c) The advisory committee is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence 5 as provided by that chapter, the committee is abolished and this 6 7 section expires September 1, 2019. Section 86.103, Health and Safety Code, 8 SECTION 22. is amended by adding Subsection (c) to read as follows: 9 10 (c) The advisory council is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence 11 12 as provided by that chapter, the council is abolished and this section expires September 1, 2019. 13 SECTION 23. Chapter 90, Health and Safety Code, is amended 14 15 by adding Section 90.004 to read as follows: 16 Sec. 90.004. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The 17 osteoporosis program created by Section 90.002 is subject to review under Chapter 325, Government Code (Texas Sunset Act), as if it were 18 19 a state agency subject to review under that chapter. If the program is not continued in existence in accordance with that chapter, the 20 program is abolished and this chapter expires September 1, 2019. 21 (b) To the extent that Chapter 325, Government Code (Texas 22 Sunset Act), places a duty on a state agency subject to review under 23 24 that chapter, the department shall perform the duty as it relates to 25 the program. SECTION 24. Chapter 91, Health and Safety Code, is amended 26 by adding Section 91.004 to read as follows: 27

Sec. 91.004. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The program created by Section 91.002 is subject to review under Chapter 325, Government Code (Texas Sunset Act), as if it were a state agency subject to review under that chapter. If the program is not continued in existence in accordance with that chapter, the program is abolished and this chapter expires September 1, 2019. (b) To the extent that Chapter 325, Government Code (Texas

8 Sunset Act), places a duty on a state agency subject to review under 9 that chapter, the department shall perform the duty as it relates to 10 the program.

SECTION 25. Subchapter A, Chapter 93, Health and Safety
Code, is amended by adding Section 93.015 to read as follows:

13 <u>Sec. 93.015. SUNSET PROVISION. The Council on</u> 14 <u>Cardiovascular Disease and Stroke is subject to Chapter 325,</u> 15 <u>Government Code (Texas Sunset Act). Unless continued in existence</u> 16 <u>as provided by that chapter, the council is abolished and this</u> 17 chapter expires September 1, 2019.

SECTION 26. Chapter 97, Health and Safety Code, is amended by adding Section 97.008 to read as follows:

20 <u>Sec. 97.008. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The</u> 21 <u>arthritis control and prevention program is subject to review under</u> 22 <u>Chapter 325, Government Code (Texas Sunset Act), as if it were a</u> 23 <u>state agency subject to review under that chapter. If the program</u> 24 <u>is not continued in existence in accordance with that chapter, the</u> 25 <u>program is abolished and this chapter expires September 1, 2019.</u>

26 (b) To the extent that Chapter 325, Government Code (Texas 27 Sunset Act), places a duty on a state agency subject to review under

# that chapter, the department shall perform the duty as it relates to the program.

3 SECTION 27. Subchapter A, Chapter 98, Health and Safety 4 Code, as added by Chapter 359 (S.B. 288), Acts of the 80th 5 Legislature, Regular Session, 2007, is amended by adding Section 6 98.003 to read as follows:

Sec. 98.003. SUNSET PROVISION. The Advisory Panel on
Health Care-Associated Infections and Preventable Adverse Events
is subject to Chapter 325, Government Code (Texas Sunset Act).
Unless continued in existence as provided by that chapter, the
advisory panel is abolished and this chapter expires September 1,
2019.

# SECTION 28. Chapter 101, Health and Safety Code, is amended by adding Section 101.011 to read as follows:

Sec. 101.011. SUNSET PROVISION. The Texas Council on Alzheimer's Disease and Related Disorders is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the council is abolished and this chapter expires September 1, 2019.

20 SECTION 29. Chapter 103, Health and Safety Code, is amended 21 by adding Section 103.020 to read as follows:

22 <u>Sec. 103.020.</u> SUNSET PROVISION. The Texas Diabetes Council 23 is subject to Chapter 325, Government Code (Texas Sunset Act). 24 Unless continued in existence as provided by that chapter, the 25 council is abolished and this chapter expires September 1, 2019.

26 SECTION 30. Section 105.001(2), Health and Safety Code, is 27 amended to read as follows:

(2) <u>"Department"</u> ["Council"] means the <u>Department of</u>
 <u>State Health Services</u> [statewide health coordinating council].

3 SECTION 31. Section 105.002, Health and Safety Code, is 4 amended to read as follows:

5 Sec. 105.002. ESTABLISHMENT OF CENTER. (a) In conjunction 6 with the Texas Higher Education Coordinating Board and in such a way 7 as to avoid duplication of effort, the <u>department</u> [council] shall 8 establish a comprehensive health professions resource center for 9 the collection and analysis of educational and employment trends 10 for health professions in this state.

11 (b) <u>To</u> [<u>In conjunction with the committee formed under</u> 12 <u>Section 104.0155, to avoid duplication of effort, and to</u>] the 13 extent funding is available through fees collected under Section 14 301.155(c), Occupations Code, the <u>department</u> [<del>council</del>] shall 15 establish a nursing resource section within the center for the 16 collection and analysis of educational and employment trends for 17 nurses in this state.

(c) If the nursing resource section established under Subsection (b) is funded from surcharges collected under Section 301.155(c), Occupations Code, the <u>department</u> [council] shall provide the Texas Board of Nursing with an annual accounting of the money received from the board. The <u>department</u> [council] may expend a reasonable amount of the money to pay administrative costs of maintaining the nursing resource section.

25 SECTION 32. Sections 105.003(a), (b), (c), (c-1), (d), (f), 26 and (g), Health and Safety Code, are amended to read as follows:

27 (a) The <u>department</u> [<del>council</del>] shall place a high priority on

collecting and disseminating data on health professions
 demonstrating an acute shortage in this state, including:

3 (1) data concerning nursing personnel; and
4 (2) data concerning the health professions in which
5 shortages occur in rural areas.

6 (b) To the extent possible, the <u>department</u> [council] may 7 collect the data from existing sources that the <u>department</u> 8 [council] determines are credible. The <u>department</u> [council] may 9 enter agreements with those sources that establish guidelines 10 concerning the identification, acquisition, transfer, and 11 confidentiality of the data.

(c) The Department of Information Resources, through TexasOnline and in consultation with the <u>department</u> [council] and the Health Professions Council, shall add and label as "mandatory" the following fields on an application or renewal form for a license, certificate, or registration for a person subject to Subsection (c-2):

18 (1) full name and last four digits of social security 19 number;

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(2) full mailing address; and

(3) educational background and training, including basic health professions degree, school name and location of basic health professions degree, and graduation year for basic health professions degree, and, as applicable, highest professional degree obtained, related professional school name and location, and related graduation year.

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(c-1) The Department of Information Resources, through

1 TexasOnline and in consultation with the <u>department</u> [council] and 2 the Health Professions Council, shall add the following fields on 3 an application or renewal form for a license, certificate, or 4 registration for a person subject to Subsection (c-2):

6 (2) sex;

7 (3) race and ethnicity;

(1)

8 (4) location of high school;

(5) mailing address of primary practice;

date and place of birth;

10 (6) number of hours per week spent at primary practice 11 location;

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(7) description of primary practice setting;

(8) primary practice information, including primary
 specialty practice, practice location zip code, and county; and

(9) information regarding any additional practice, including description of practice setting, practice location zip code, and county.

(d) To the extent feasible, the <u>department</u> [council] shall use a researcher with a doctorate in nursing to collect, analyze, and disseminate nursing data that may be used to predict supply and demand for nursing personnel in this state using appropriate federal or state supply-and-demand models. The nursing data must at least:

(1) include demographics, areas of practice, supply,demand, and migration; and

26 (2) be analyzed to identify trends relating to numbers27 and geographical distribution, practice setting, and area of

practice and, to the extent possible, compare those trends with
 corresponding national trends.

The relevant members of the Health Professions Council, 3 (f) in conjunction with the Department of Information Resources, shall 4 ensure that the information collected under Subsections (c) and 5 department [statewide health (c-1) is transmitted to the 6 coordinating council]. The department [council] shall store the 7 8 information as needed and conduct related workforce studies, including a determination of the geographical distribution of the 9 10 reporting professionals.

(g) The relevant members of the Health Professions Council, in conjunction with the Department of Information Resources, shall ensure that the following information is submitted to the <u>department</u> [statewide health coordinating council] for a person subject to Subsection (c-2):

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(1) certification, registration, or license number;

17 (2) issuance date;

18 (3) method of certification, registration, or19 licensure; and

(4) certification, registration, or licensure status.
 SECTION 33. Section 105.004, Health and Safety Code, is
 amended to read as follows:

23 Sec. 105.004. REPORTS. (a) The <u>department</u> [<del>council</del>] may 24 use the data collected and analyzed under this chapter to publish 25 reports regarding:

(1) the educational and employment trends for healthprofessions;

1 (2) the supply and demand of health professions; and 2 (3) other issues, as necessary, concerning health 3 professions in this state. 4 (b) The department [<del>council</del>] shall publish reports 5 regarding the data collected and analyzed under this chapter related to: 6

7 (1) the educational and employment trends of nursing8 professionals;

9 (2) the supply and demand of nursing professionals; 10 and

11 (3) other issues, as determined necessary by the 12 <u>department</u> [council], concerning nursing professionals in this 13 state.

SECTION 34. Section 105.007, Health and Safety Code, is amended to read as follows:

16 Sec. 105.007. CLEARINGHOUSE. (a) As part of the 17 comprehensive health professions resource center, the <u>department</u> 18 [<del>council</del>] shall develop and establish a clearinghouse for health 19 professionals seeking collaborative practice.

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(b) The <u>department</u> [council] may:

(1) set and collect a reasonable fee to offset the costof complying with this section;

(2) solicit, receive, and spend grants, gifts, and
 24 donations from public and private sources to comply with this
 25 section; and

26 (3) contract with public or private entities in the
 27 performance of <u>the department's</u> [<del>its</del>] responsibilities under this

C.S.H.B. No. 1875 1 section. SECTION 35. Sections 105.008(e) and (h), Health and Safety 2 3 Code, are amended to read as follows: 4 The nursing resource section shall contract with an (e) 5 independent researcher to develop the research design and conduct the research. The independent researcher must be selected by a 6 selection committee composed of: 7 8 (1) [one representative elected by a majority of the nursing advisory committee under Section 104.0155, who is the chair 9 10 of the selection committee; [<del>(2)</del>] one representative designated by the Texas 11 Health Care Policy Council; 12 (2) [(3)] the presiding officer of the Texas Board of 13 14 Nursing; 15 (3) [(4)] one representative of the Texas Higher 16 Education Coordinating Board, designated by the governor; 17 (4) [(5)] one representative designated by the Texas Hospital Association; 18 19 (5) [<del>(6)</del>] one representative designated by the Texas Association of Business; and 20 (6) [(7)] one representative designated by a clinical 21 competency assessment program that meets the requirements of 22 Section 301.157(d-8), Occupations Code[; and 23 24 [(8) the nurse researcher member of the nursing 25 advisory committee under Section 104.0155]. 26 (h) The executive commissioner of the Health and Human Services Commission [nursing advisory committee formed under 27

1 Section 104.0155] shall oversee [serve as the oversight committee
2 for] the study.

3 SECTION 36. Chapter 105, Health and Safety Code, is amended 4 by adding Section 105.009 to read as follows:

5 Sec. 105.009. APPLICATION OF SUNSET ACT TO CENTER. (a) The 6 comprehensive health professions resource center created by 7 Section 105.002 is subject to review under Chapter 325, Government 8 Code (Texas Sunset Act), as if it were a state agency subject to 9 review under that chapter. If the center is not continued in 10 existence in accordance with that chapter, the center is abolished 11 and this chapter expires September 1, 2019.

12 (b) To the extent that Chapter 325, Government Code (Texas 13 Sunset Act), places a duty on a state agency subject to review under 14 that chapter, the department shall perform the duty as it relates to 15 the center.

16 SECTION 37. Chapter 107, Health and Safety Code, is amended 17 by adding Section 107.010 to read as follows:

Sec. 107.010. SUNSET PROVISION. The health disparities task force is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the task force is abolished and this chapter expires September 1, 22 2019.

23 SECTION 38. Chapter 112, Health and Safety Code, is amended 24 by adding Section 112.015 to read as follows:

25 <u>Sec. 112.015.</u> SUNSET PROVISION. The Border Health
 26 Foundation is subject to Chapter 325, Government Code (Texas Sunset
 27 Act). Unless continued in existence as provided by that chapter,

1 <u>the foundation is abolished and this chapter expires September 1,</u> 2 2019.

3 SECTION 39. Section 113.002, Health and Safety Code, is 4 amended to read as follows:

5 Sec. 113.002. SUNSET PROVISION; ABOLISHMENT. The Texas Organ, Tissue, and Eye Donor Council is subject to Chapter 325, 6 Government Code (Texas Sunset Act). Unless continued in existence 7 8 as provided by that chapter, the council is abolished and this chapter expires September 1, 2019 [2017], unless the department and 9 10 the council mutually determine that the public interest is best served by abolition of the council and agree to abolish the council 11 12 on an earlier date.

13 SECTION 40. The heading to Chapter 114, Health and Safety 14 Code, is amended to read as follows:

15 CHAPTER 114. [INTERAGENCY] OBESITY COORDINATION EFFORT [COUNCIL]

SECTION 41. Section 114.001, Health and Safety Code, is amended to read as follows:

Sec. 114.001. DEFINITION. In this chapter, <u>"institution of</u> higher education" has the meaning assigned by Section 61.003, <u>Education Code</u> ["council" means the interagency obesity council created by this chapter].

22 SECTION 42. Section 114.005, Health and Safety Code, is 23 amended to read as follows:

Sec. 114.005. REVIEW OF AGENCY PROGRAMS. The <u>institutions</u> of higher education that receive state money for obesity research [council] shall jointly review the status of the programs of the Department of Agriculture, the Department of State Health Services,

1 and the Texas Education Agency that promote better health and 2 nutrition and prevent obesity among children and adults in this 3 state.

4 SECTION 43. Sections 114.007(a) and (b), Health and Safety 5 Code, are amended to read as follows:

later than January 15 of each even-numbered (a) Not 6 the institutions of higher education 7 [<del>odd-numbered</del>] year, performing the review under Section 114.005 [the council] shall 8 jointly submit a report to the governor, the lieutenant governor, 9 and the speaker of the house of representatives on the activities of 10 the institutions [council] under Section [Sections] 114.005 [and 11 114.006] during the preceding two calendar years. 12

13 (b) A report submitted by the <u>institutions of higher</u> 14 <u>education</u> [<del>council</del>] under Subsection (a) must include the following 15 information regarding discussions of agency programs under Section 16 114.005:

(1) a list of the programs within each agency [represented on the council] that are designed to promote better health and nutrition;

20 (2) an assessment of the steps taken by each program
21 during the preceding two calendar years;

(3) a report of the progress made by taking these stepsin reaching each program's goals;

24 (4) the areas of improvement that are needed in each25 program; and

(5) recommendations for future goals or legislation.
 SECTION 44. Section 115.012, Health and Safety Code, as

1 added by Chapters 835 (S.B. 1824) and 1133 (H.B. 2196), Acts of the 2 81st Legislature, Regular Session, 2009, is amended to read as 3 follows:

Sec. 115.012. SUNSET PROVISION. The Interagency Task Force
for Children With Special Needs is subject to Chapter 325,
Government Code (Texas Sunset Act). Unless continued in existence
as provided by that chapter, the task force is abolished and this
chapter expires September 1, 2019 [2015].

9 SECTION 45. Section 221.005(b), Health and Safety Code, is 10 amended to read as follows:

11 (b) This chapter does not exempt a corporation or user from 12 compliance with Chapter [<del>104 or</del>] 225.

13 SECTION 46. Section 222.022(1), Health and Safety Code, is 14 amended to read as follows:

(1) "Health care facility" <u>means a public or private</u> 15 hospital, skilled nursing facility, intermediate care facility, 16 ambulatory surgical center, family planning clinic that performs 17 ambulatory surgical procedures, rural or urban health initiative 18 clinic, end stage renal disease facility, or 19 inpatient rehabilitation facility. The term does not include the office of 20 physicians or practitioners of the healing arts practicing 21 individually or in groups or [has the meaning assigned by Section 22 104.002, except that the term does not include] a chemical 23 24 dependency treatment facility licensed by the Department of State Health Services [Texas Commission on Alcohol and Drug Abuse]. 25

26 SECTION 47. Section 311.033(d), Health and Safety Code, is 27 amended to read as follows:

(d) A hospital that does not submit to the department the
 data required under this section is subject to civil penalties
 under Section 311.0331 [104.043].

4 SECTION 48. Subchapter C, Chapter 311, Health and Safety 5 Code, is amended by adding Section 311.0331 to read as follows:

6 <u>Sec. 311.0331.</u> FAILURE TO SUBMIT DATA; CIVIL PENALTY. (a) 7 If the department does not receive necessary data from a hospital as 8 required by Section 311.033, the department shall send to the 9 <u>hospital a notice requiring the hospital to submit the data not</u> 10 <u>later than the 30th day after the date on which the hospital</u> 11 <u>receives the notice.</u>

12 (b) A hospital that does not submit the data during the 13 period determined under Subsection (a) is subject to a civil 14 penalty of not more than \$500 for each day after the period that 15 hospital fails to submit the data.

16 (c) At the request of the executive commissioner of the 17 Health and Human Services Commission, the attorney general shall 18 sue in the name of the state to recover the civil penalty.

SECTION 49. Section 577.016(a), Health and Safety Code, is amended to read as follows:

(a) The department may deny, suspend, or revoke a license if department finds that the applicant or licensee has substantially failed to comply with:

- 24
- department rules;

25 (2) this subtitle; or

26 (3) Chapter [Chapters 104 and] 225.

27 SECTION 50. Section 1001.071, Health and Safety Code, is

amended to read as follows: 1 Sec. 1001.071. GENERAL POWERS AND DUTIES OF DEPARTMENT 2 RELATED TO HEALTH CARE. 3 The department is responsible for administering human services programs regarding the public health, 4 including: 5 6 (1)implementing the state's public health care 7 delivery programs under the authority of the department; 8 (2) administering state health facilities, hospitals, 9 and health care systems; 10 (3) developing and providing health care services, as directed by law; 11 12 (4) providing for the prevention and control of communicable diseases; 13 14 (5) providing public education on health-related 15 matters, as directed by law; 16 (6) compiling, collecting, and reporting 17 health-related information, as directed by law; (7) acting as the lead agency for implementation of 18 state policies regarding the human immunodeficiency virus and 19 acquired immunodeficiency syndrome and administering programs 20 21 related to the human immunodeficiency virus and acquired immunodeficiency syndrome; 22 investigating the causes of injuries and methods 23 (8) 24 of prevention; 25 (9) administering a grant program to provide 26 appropriated money to counties, municipalities, public health districts, and other political subdivisions for their use to 27

1 provide or pay for essential public health services;

2 (10) administering the registration of vital 3 statistics;

4 (11) licensing, inspecting, and enforcing regulations
5 regarding health facilities, other than long-term care facilities
6 regulated by the Department of Aging and Disability Services;

7 (12) implementing established standards and 8 procedures for the management and control of sanitation and for 9 health protection measures;

10 (13) enforcing regulations regarding radioactive
11 materials;

12 (14) enforcing regulations regarding food, bottled13 and vended drinking water, drugs, cosmetics, and health devices;

14 (15) enforcing regulations regarding food service 15 establishments, retail food stores, mobile food units, and roadside 16 food vendors; and

17 (16) enforcing regulations controlling hazardous18 substances in households and workplaces.

SECTION 51. Chapter 1001, Health and Safety Code, is amended by adding Subchapter G to read as follows:

## 21 <u>SUBCHAPTER G. SUBMISSION AND COLLECTION OF HEALTH CARE DATA</u>

22 <u>Sec. 1001.171. DEFINITION.</u> In this subchapter, "rural 23 <u>provider" means a provider:</u>

24 (1) located in a county:
25 (A) with a population of 35,000 or less; or
26 (B) with a population of more than 35,000, that
27 has 100 or fewer licensed hospital beds, and that is not located in

1	an area that is delineated as an urbanized area by the United States
2	Bureau of the Census; and
3	(2) that is not a state-owned hospital or a hospital
4	that is managed or owned, directly or indirectly, by an individual,
5	association, partnership, corporation, or other legal entity that
6	owns or manages one or more other hospitals.
7	Sec. 1001.172. DATA SUBMISSION AND COLLECTION. (a) The
8	department may collect and, except as provided by Subsections (c)
9	and (d), providers shall submit to the department or another entity
10	as determined by the department all data required by this section.
11	The data must be collected according to uniform submission formats,
12	coding systems, and other technical specifications necessary to
13	make the incoming data substantially valid, consistent,
14	compatible, and manageable using electronic data processing, if
15	available.
16	(b) The department shall adopt rules to implement the data
17	submission requirements imposed by Subsection (a) in appropriate
18	stages to allow for the development of efficient systems for the
19	collection and submission of the data. A rule adopted by the
20	department that requires submission of a data element that was not
21	required to be submitted before adoption of the rule:
22	(1) may not take effect before the 90th day after the
23	date the rule is adopted; and
24	(2) must take effect not later than the first
25	anniversary after the date the rule is adopted.
26	(c) A rural provider may provide the data required by this
27	subchapter.

C.S.H.B. No. 1875 1 (d) A hospital may provide the data required by this subchapter if the hospital: 2 3 (1) is exempt from state franchise, sales, ad valorem, or other state or local taxes; and 4 5 (2) does not seek or receive reimbursement for providing health care services to patients from any source, 6 7 including: 8 (A) the patient or any person legally obligated to support the patient; 9 10 (B) a third-party payor; and (C) Medicaid, Medicare, or any other federal, 11 12 state, or local program for indigent health care. (e) The department may not collect data from an individual 13 physician or from an entity that is composed entirely of physicians 14 15 and that is formed under Title 7, Business Organizations Code, or is a professional association organized under the former Texas 16 17 Professional Association Act (Article 1528f, Vernon's Texas Civil Statutes) or formed under the Texas Professional Association Law, 18 as described by Section 1.008, Business Organizations Code, a 19 limited liability partnership organized under former Section 3.08, 20 21 Texas Revised Partnership Act (Article 6132b-3.08, Vernon's Texas Civil Statutes), or described by Subchapter J, Chapter 152, 22 Business Organizations Code, or a limited liability company 23 24 organized under the former Texas Limited Liability Company Act (Article 1528n, Vernon's Texas Civil Statutes) or formed under the 25 26 Texas Limited Liability Company Law, as described by Section 1.008, Business Organizations Code, except to the extent the entity owns 27

C.S.H.B. No. 1875 1 and operates a health care facility in this state. This subsection 2 does not prohibit the release of data about physicians using 3 uniform physician identifiers that has been collected from a health care facility under this subchapter. 4 5 (f) The department is the single collection point for the receipt of data from providers. The department may transfer 6 7 collection of any data required to be collected by the department 8 under any other law to the statewide health care data collection 9 system. 10 (g) The department may not require a provider to submit data more frequently than quarterly. A provider may submit data more 11 12 frequently than quarterly. (h) The department shall coordinate data collection with 13 the data collection formats used by federally qualified health 14 15 centers. To satisfy the requirements of this subchapter: 16 (1) a federally qualified health center shall submit 17 annually to the department a copy of the Medicaid cost report of federally qualified health centers; and 18 19 (2) a provider receiving federal funds under 42 U.S.C. Section 254b, 254c, or 256 shall submit annually to the department a 20 copy of the Bureau of Common Reporting Requirements data report 21 22 developed by the United States Public Health Service. (i) The department shall coordinate data collection with 23 24 the data submission formats used by hospitals and other providers. The department shall accept data in the format developed by the 25 26 National Uniform Billing Committee (Uniform Hospital Billing Form

27 UB 92) and HCFA-1500 or their successors or other universally

	C.S.II.D. No. 1075
1	accepted standardized forms that hospitals and other providers use
2	for other complementary purposes.
3	(j) The department by rule shall develop reasonable
4	alternate data submission procedures for providers that do not
5	possess electronic data processing capacity.
6	(k) The department shall collect health care data elements
7	relating to payer type, the racial and ethnic background of
8	patients, and the use of health care services by consumers. The
9	department shall prioritize data collection efforts on inpatient
10	and outpatient surgical and radiological procedures from
11	hospitals, ambulatory surgical centers, and freestanding radiology
12	centers.
13	(1) To the extent feasible, the department shall obtain from
14	public records the information that is available from those
15	records.
16	(m) A provider of a health benefit plan shall annually
17	submit to the department aggregate data by service area required by
18	the Health Plan Employer Data and Information Set as operated by the
19	National Committee for Quality Assurance. The department may
20	approve the submission of data in accordance with other methods
21	generally used by the health benefit plan industry. If the Health
22	Plan Employer Data and Information Set does not generally apply to a
23	health benefit plan, the department shall require submission of
24	data in accordance with other methods. This subsection does not
25	relieve a health care facility that provides services under a
26	health benefit plan from the requirements of this subchapter.
27	Information submitted under this section:

1	(1) is subject to Section 1001.174; and
2	(2) is not subject to Section 1001.173.
3	Sec. 1001.173. COLLECTION AND DISSEMINATION OF PROVIDER
4	QUALITY DATA. (a) Subject to Section 1001.172, the department
5	shall collect data reflecting provider quality based on a
6	methodology and review process established through the
7	department's rulemaking process. The methodology shall identify
8	and measure quality standards and adhere to any federal mandates.
9	(b) The department shall study and analyze initial
10	methodologies for obtaining provider quality data, including
11	outcome data.
12	(c) Provider quality data for reports shall be published and
13	made available to the public, on a time schedule the department
14	considers appropriate.
15	(d) If the department determines that provider quality data
16	to be published under Subsection (c) does not provide the intended
17	result or is inaccurate or inappropriate for dissemination, the
18	department is not required to publish the data or reports based in
19	whole or in part on the data. This subsection does not affect the
20	release of public use data in accordance with Section 1001.174 or
21	the release of information submitted under Section 1001.172(m).
22	(e) The department shall adopt rules allowing a provider to
23	submit concise written comments regarding any specific provider
24	quality data to be released concerning the provider. The
25	department shall make the comments available to the public and in an
26	electronic form accessible through the Internet. The comments
27	shall be attached to any public release of provider quality data.

1	Providers shall submit the comments to the department to be
2	attached to the public release of provider quality data in the same
3	format as the provider quality data that is to be released.
4	(f) The methodology adopted by the department for measuring
5	quality shall include case-mix qualifiers, severity adjustment
6	factors, adjustments for medical education and research, and any
7	other factors necessary to accurately reflect provider quality.
8	(g) In addition to the requirements of this section, any
9	release of provider quality data shall comply with Sections
10	1001.174(g) and (h).
11	(h) A provider quality data report may not identify an
12	individual physician by name. A provider quality data report must
13	identify a physician by the uniform physician identifier designated
14	by the department under Section 1001.174(c).
15	(i) The department shall release provider quality data in an
16	aggregate form without uniform physician identifiers if:
17	(1) the data relates to a rural provider; or
18	(2) the cell size of the data is less than the minimum
19	size established by department rule that would enable
20	identification of an individual patient or physician.
21	Sec. 1001.174. DISSEMINATION OF PUBLIC USE DATA AND
22	DEPARTMENT PUBLICATIONS. (a) The department shall promptly
23	provide public use data and data collected in accordance with
24	Section 1001.172(m) to those requesting it. The public use data
25	does not include provider quality data prescribed by Section
26	1001.173 or confidential data prescribed by Section 1001.176.
27	(b) Subject to the restrictions on access to department data

1 prescribed by Sections 1001.173 and 1001.176, and using the public use data and other data, records, and matters of record available to 2 3 the department, the department shall prepare and issue reports to the governor, the legislature, and the public as provided by this 4 section. The department must issue the reports at least annually. 5 6 (c) Subject to the restrictions on access to department data 7 prescribed by Sections 1001.173 and 1001.176, the department shall 8 use public use data to prepare and issue reports that provide information relating to providers, including the incidence rate of 9 selected medical or surgical procedures. The reports must provide 10 the data in a manner that identifies individual providers, 11 12 including individual physicians, and that identifies and compares data elements for all providers. An individual physician may not be 13 identified by name. An individual physician shall be identified by 14 15 uniform physician identifiers. The department by rule shall designate the characters to be used as uniform physician 16 17 identifiers. (d) The department shall use public use data to prepare and 18 19 issue reports that provide information for review and analysis by 20 the commission relating to services that are provided: 21 (1) in a niche hospital, as that term is defined by 22 Section 105.002, Occupations Code; and (2) by a physician with an ownership interest in the 23 24 niche hospital. 25 (e) Subsection (d) does not apply to an ownership interest 26 in publicly available shares of a registered investment company, including a mutual fund, that owns publicly traded equity 27

1	securities or debt obligations issued by a niche hospital or an
2	entity that owns a niche hospital.
3	(f) The department shall adopt procedures to establish the
4	accuracy and consistency of the public use data before releasing
5	the public use data to the public.
6	(g) If public use data is requested from the department
7	about a specific provider, the department shall notify the provider
8	about the release of the data. A provider may not interfere with
9	the release of the data.
10	(h) A report issued by the department shall include a
11	reasonable review and comment period for the affected providers
12	before public release of the report.
13	(i) The department shall adopt rules allowing a provider to
14	submit concise written comments regarding any specific public use
15	data to be released concerning the provider. The department shall
16	make the comments available to the public and in an electronic form
17	accessible through the Internet. The comments shall be attached to
18	any public release of the public use data. A provider shall submit
19	the comments to the department to be attached to the public release
20	of public use data in the same format as the public use data that is
21	to be released.
22	(j) Electronic media containing public use data and
23	provider quality reports that is released to the public must
24	include general consumer education material, including an
25	explanation of the benefits and limitations of the information
26	provided in the public use data and provider quality reports.
27	(k) The department shall release public use data in an

1	aggregate form without uniform physician identifiers if:
2	(1) the data relates to a rural provider; or
3	(2) the cell size of the data is less than the minimum
4	size established by department rule that would enable
5	identification of an individual patient or physician.
6	Sec. 1001.175. COMPUTER ACCESS TO DATA. (a) The department
7	shall provide for computer-to-computer access to the public use
8	data. A report must maintain patient confidentiality as provided
9	by Section 1001.176.
10	(b) The department may charge a person requesting public use
11	or provider quality data a fee for the data. The fee:
12	(1) may reflect the quantity of information provided
13	and the expense incurred by the department in collecting and
14	providing the data; and
15	(2) must be set at a level that will raise revenue
16	sufficient for the department's operations under this subchapter.
17	(c) The department may not charge a fee for providing public
18	use data to a state agency.
19	Sec. 1001.176. CONFIDENTIALITY AND GENERAL ACCESS TO DATA.
20	(a) The department shall use data received by the department for
21	the benefit of the public. Subject to specific limitations
22	established by this subchapter and department rule, the department
23	shall make determinations on requests for information in favor of
24	access.
25	(b) The department by rule shall designate the characters to
26	be used as uniform patient identifiers. The basis for assignment of
27	the characters and the manner in which the characters are assigned

1	are confidential.
2	(c) Unless specifically authorized by this subchapter, the
3	department may not release and a person may not gain access to any
4	data that:
5	(1) could reasonably be expected to reveal the
6	identity of a patient;
7	(2) could reasonably be expected to reveal the
8	identity of a physician;
9	(3) discloses a provider discount or a differential
10	between payments and billed charges;
11	(4) relates to actual payments to an identified
12	provider made by a payer; or
13	(5) is submitted to the department in a uniform
14	submission format that is not included in the public use data set
15	established, except in accordance with Section 1001.177.
16	(d) All data collected and used by the department under this
17	subchapter is subject to the confidentiality provisions and
18	criminal penalties of:
19	(1) Section 81.103;
20	(2) Section 311.037; and
21	(3) Section 159.002, Occupations Code.
22	(e) Data on patients and compilations produced from the data
23	collected that identifies a patient is not:
24	(1) subject to discovery, subpoena, or any other means
25	of legal compulsion for release to any person or entity except as
26	provided by this section; or
27	(2) admissible in any civil, administrative, or

1 criminal proceeding. 2 (f) Data on physicians and compilations produced from the 3 data collected that identifies a physician is not: 4 (1) subject to discovery, subpoena, or any other means 5 of legal compulsion for release to any person or entity except as provided by this section; or 6 7 (2) admissible in any civil, administrative, or 8 criminal proceeding. (g) The department may not release data elements in a manner 9 10 that will reveal the identity of a patient or a physician. 11 (h) Subsections (c) and (g) do not prohibit the release of a 12 uniform physician identifier in conjunction with: (1) a provider quality report in accordance with 13 14 Section 1001.173; or 15 (2) associated public use data in accordance with Section 1001.174. 16 17 (i) Notwithstanding any other law, the department may not provide information made confidential by this section to any other 18 19 agency of this state. (j) The department by rule shall develop and implement a 20 mechanism to comply with Subsections (c)(1) and (2). 21 Sec. 1001.177. SCIENTIFIC REVIEW PANEL. (a) 22 The department shall establish a scientific review panel to review and 23 24 approve requests for information other than public use data. (b) The members of the panel must have experience and 25 26 expertise in ethics, patient confidentiality, and health care data. (c) To assist the panel in determining whether to approve a 27

1	request for information, the department shall adopt rules similar
2	to the guidelines on releasing data of the Health Care Financing
3	Administration of the United States Department of Health and Human
4	Services.
5	(d) A request for information, other than public use data,
6	must be made on the form created by the department.
7	Sec. 1001.178. CIVIL PENALTY. (a) A person who knowingly
8	or negligently releases data in violation of this subchapter is
9	liable for a civil penalty of not more than \$10,000.
10	(b) A person who fails to supply available data under
11	Sections 1001.172 and 1001.173 is liable for a civil penalty of not
12	less than \$1,000 or more than \$10,000 for each violation.
13	(c) If requested by the department, the attorney general
14	shall enforce this subchapter.
15	(d) The venue of an action brought under this section is in
16	Travis County.
17	(e) A civil penalty recovered in a suit instituted by the
18	attorney general under this subchapter shall be deposited in the
19	general revenue fund to the credit of the health care information
20	account.
21	Sec. 1001.179. CRIMINAL PENALTY. (a) A person commits an
22	offense if the person:
23	(1) knowingly accesses data in violation of this
24	subchapter; or
25	(2) releases data, with criminal negligence, in
26	violation of this subchapter.
27	(b) An offense under this section is a state jail felony.

Sec. 1001.180. RULES. The executive commissioner may adopt rules as necessary to implement this subchapter, including rules that:

4 (1) prescribe a process for providers to submit data 5 consistent with Section 1001.172; and

6 (2) adopt and implement a methodology to collect and 7 disseminate data reflecting provider quality in accordance with 8 Section 1001.173.

9 SECTION 52. Section 56.3075(a), Education Code, is amended 10 to read as follows:

(a) If the money available for TEXAS grants in a period for which grants are awarded is sufficient to provide grants to all eligible applicants in amounts specified by Section 56.307, the coordinating board may use any excess money available for TEXAS grants to award a grant in an amount not more than three times the amount that may be awarded under Section 56.307 to a student who:

(1) is enrolled in a program that fulfills the educational requirements for licensure or certification by the state in a health care profession that the coordinating board, in consultation with the Texas Workforce Commission and the <u>Department</u> <u>of State Health Services</u> [statewide health coordinating council], has identified as having a critical shortage in the number of license holders needed in this state;

(2) has completed at least one-half of the work toward
a degree or certificate that fulfills the educational requirement
for licensure or certification; and

27

(3) meets all the requirements to receive a grant

1 award under Section 56.307.

2 SECTION 53. Section 56.4075(a), Education Code, is amended 3 to read as follows:

4 (a) The coordinating board may award a grant in an amount 5 not more than three times the amount that may be awarded under 6 Section 56.407 to a student who:

7 (1) is enrolled in a program that fulfills the 8 educational requirements for licensure or certification by the 9 state in a health care profession that the coordinating board, in 10 consultation with the Texas Workforce Commission and the <u>Department</u> 11 <u>of State Health Services</u> [statewide health coordinating council], 12 has identified as having a critical shortage in the number of 13 license holders needed in this state;

14 (2) has completed at least one-half of the work toward 15 a degree or certificate that fulfills the educational requirement 16 for licensure or certification; and

17 (3) meets all the requirements to receive a grant18 award under Section 56.407.

SECTION 54. Section 501.253(a), Insurance Code, is amended to read as follows:

(a) The office is entitled to information that is
confidential under a law of this state, including Section 843.006
of this code, <u>Subchapter G</u>, Chapter <u>1001</u> [<del>108</del>], Health and Safety
Code, and Chapter 552, Government Code.

25 SECTION 55. Section 301.157(h), Occupations Code, is 26 amended to read as follows:

27

(h) The board, in collaboration with the nursing educators,

C.S.H.B. No. 1875 1 the Texas Higher Education Coordinating Board, and the Department of State Health Services [Texas Health Care Policy Council], shall 2 implement, monitor, and evaluate a plan for the creation of 3 innovative nursing education models that promote 4 increased 5 enrollment in this state's nursing programs. SECTION 56. The following laws are repealed: 6 (1) Chapter 104, Health and Safety Code; 7 8 (2) Chapter 108, Health and Safety Code; (3) Chapter 109, Health and Safety Code; and 9 Sections 114.002, 114.003, 114.004, 10 (4) 114.006, 114.007(c), and 114.008, Health and Safety Code. 11 12 SECTION 57. On September 1, 2011: (1) the statewide health coordinating council 13 is 14 abolished; 15 (2) all property in the custody of the statewide health coordinating council is transferred to the Department of 16 17 State Health Services; and all contracts, leases, rights, and obligations of 18 (3) 19 the statewide health coordinating council are transferred to the Department of State Health Services. 20 21 SECTION 58. On September 1, 2011: (1) the Texas Health Care Policy Council is abolished; 2.2 23 (2) all property in the custody of the Texas Health 24 Care Policy Council is transferred to the Department of State Health Services; and 25 (3) all contracts, leases, rights, and obligations of 26 27 the Texas Health Care Policy Council are transferred to the

Department of State Health Services. 1 2 SECTION 59. On September 1, 2011: 3 (1) the Interagency Obesity Council is abolished; 4 (2) all property in the custody of the Interagency 5 Obesity Council is transferred to the Department of State Health 6 Services; and (3) all contracts, leases, rights, and obligations of 7 the Interagency Obesity Council are transferred to the Department 8 of State Health Services. 9

10

SECTION 60. This Act takes effect September 1, 2011.