

SENATE AMENDMENTS

2nd Printing

By: Eiland

H.B. No. 3459

A BILL TO BE ENTITLED

AN ACT

relating to the containment of costs incurred in the correctional health care system.

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

SECTION 1. Subchapter E, Chapter 501, Government Code, is amended by adding Section 501.1485 to read as follows:

Sec. 501.1485. CORRECTIONS MEDICATION AIDES. (a) The department, in cooperation with The University of Texas Medical Branch at Galveston and the Texas Tech University Health Sciences Center, shall develop and implement a training program for corrections medication aides that uses a curriculum specific to administering medication in a correctional setting.

(b) In developing the curriculum for the training program, the department, The University of Texas Medical Branch at Galveston, and the Texas Tech University Health Sciences Center shall:

(1) consider the content of the curriculum developed by the American Correctional Association for certified corrections nurses; and

(2) modify as appropriate the content of the curriculum developed under Chapter 242, Health and Safety Code, for medication aides administering medication in convalescent and nursing homes and related institutions to produce content suitable for administering medication in a correctional setting.

1 (c) The department shall submit an application for the
2 approval of a training program developed under this section,
3 including the curriculum, to the Department of Aging and Disability
4 Services in the manner established by the executive commissioner of
5 the Health and Human Services Commission under Section 161.082,
6 Human Resources Code.

7 SECTION 2. Section 251.012, Health and Safety Code, as
8 amended by Chapters 839 (S.B. 1932) and 1280 (H.B. 1831), Acts of
9 the 81st Legislature, Regular Session, 2009, is reenacted and
10 amended to read as follows:

11 Sec. 251.012. EXEMPTIONS FROM LICENSING REQUIREMENT. The
12 following facilities are not required to be licensed under this
13 chapter:

14 (1) a home and community support services agency
15 licensed under Chapter 142 with a home dialysis designation;

16 (2) a hospital licensed under Chapter 241 that
17 provides dialysis only to individuals receiving:

18 (A) [~~individuals receiving~~] inpatient services
19 from the hospital; or

20 (B) [~~individuals receiving~~] outpatient services
21 due to a disaster declared by the governor or a federal disaster
22 declared by the president of the United States occurring in this
23 state or another state during the term of the disaster declaration;
24 [~~or~~]

25 (3) a hospital operated by or on behalf of the state as
26 part of the managed health care provider network established under
27 Chapter 501, Government Code, that provides dialysis only to

1 individuals receiving:

2 (A) inpatient services from the hospital; or

3 (B) outpatient services while serving a term of
4 confinement in a facility operated by or under contract with the
5 Texas Department of Criminal Justice; or

6 (4) the office of a physician unless the office is used
7 primarily as an end stage renal disease facility.

8 SECTION 3. Subchapter D, Chapter 161, Human Resources Code,
9 is amended by adding Section 161.082 to read as follows:

10 Sec. 161.082. CORRECTIONS MEDICATION AIDES. (a) The
11 executive commissioner shall establish:

12 (1) minimum standards and procedures for the approval
13 of corrections medication aide training programs, including
14 curricula, developed under Section 501.1485, Government Code;

15 (2) minimum requirements for the issuance, denial,
16 renewal, suspension, and revocation of a permit to a corrections
17 medication aide, including the payment of an application or renewal
18 fee in an amount necessary to cover the costs incurred by the
19 department in administering this section; and

20 (3) the acts and practices that are within and outside
21 the scope of a permit issued under this section.

22 (b) Not later than the 90th day after receipt of an
23 application for approval of a corrections medication aide training
24 program developed under Section 501.1485, Government Code, the
25 department shall:

26 (1) approve the program, if the program meets the
27 minimum standards and procedures established under Subsection

1 (a)(1); or

2 (2) provide notice to the Texas Department of Criminal
3 Justice that the program is not approved and include in the notice a
4 description of the actions that are required for the program to be
5 approved.

6 (c) The department shall issue a permit to or renew the
7 permit of an applicant who meets the minimum requirements
8 established under Subsection (a)(2). The department shall
9 coordinate with the Texas Department of Criminal Justice in the
10 performance of the department's duties and functions under this
11 subsection.

12 SECTION 4. (a) The Texas Department of Criminal Justice,
13 in cooperation with The University of Texas Medical Branch at
14 Galveston, the Texas Tech University Health Sciences Center, or a
15 successor correctional managed health care provider, shall develop
16 the training program required by Section 501.1485, Government Code,
17 as added by this Act, and the department shall submit an application
18 for approval of that program, as required by Subsection (c) of that
19 section, not later than January 1, 2012. If after the effective date
20 of this Act and before the date the department develops the training
21 program described by this subsection The University of Texas
22 Medical Branch at Galveston and the Texas Tech University Health
23 Sciences Center are no longer represented on the Correctional
24 Managed Health Care Committee, or no longer serve as correctional
25 managed health care providers, the executive director of the
26 department shall request and receive the cooperation of any other
27 state agency determined by the executive director to be an

1 appropriate resource in the development of the program.

2 (b) The change in law made by this Act in amending Section
3 251.012, Health and Safety Code, applies only to dialysis services
4 provided on or after the effective date of this Act. Dialysis
5 services provided before the effective date of this Act are covered
6 by the law in effect immediately before that date, and the former
7 law is continued in effect for that purpose.

8 (c) The executive commissioner of the Health and Human
9 Services Commission shall establish the minimum standards and
10 requirements and the acts and practices allowed or prohibited, as
11 required by Section 161.082, Human Resources Code, as added by this
12 Act, not later than January 1, 2012.

13 SECTION 5. To the extent of any conflict, this Act prevails
14 over another Act of the 82nd Legislature, Regular Session, 2011,
15 relating to nonsubstantive additions to and corrections in enacted
16 codes.

17 SECTION 6. This Act takes effect September 1, 2011.

ADOPTED

MAY 25 2011

Atty Gen
Secretary of the Senate

By: Eiland

H.B. No. 3459

Substitute the following for ___B. No. ___:

By: *J. J. Kery*

C.S. ___B. No. ___

A BILL TO BE ENTITLED

AN ACT

relating to the containment of costs incurred in the correctional health care system.

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

SECTION 1. Subchapter C, Chapter 499, Government Code, is amended by adding Section 499.055 to read as follows:

Sec. 499.055. POPULATION MANAGEMENT BASED ON INMATE HEALTH.

The department shall adopt policies designed to manage inmate population based on similar health conditions suffered by inmates.

The policies adopted under this section must maximize organizational efficiencies and reduce health care costs to the department by housing inmates with similar health conditions in the same unit or units that are, if possible, served by or located near one or more specialty health care providers most likely to be needed for the treatment of the health condition.

SECTION 2. Section 501.063, Government Code, is amended to read as follows:

Sec. 501.063. ANNUAL INMATE FEE [~~COPAYMENTS~~] FOR [~~CERTAIN~~] HEALTH CARE [~~VISITS~~]. (a) An inmate confined in a facility operated by or under contract with the department, other than a halfway house, [~~who initiates a visit to a health care provider~~] shall pay an annual health care services fee [~~make a copayment~~] to the department in the amount of \$100 [~~\$3~~]. The inmate shall pay [~~make~~] the annual fee [~~copayment~~] out of the inmate's trust fund.

1 If the balance in the fund is insufficient to cover the fee
2 [~~copayment~~], 50 percent of each deposit to the fund shall be applied
3 toward the balance owed until the total amount owed is paid.

4 (b) [~~The department may not charge a copayment for health~~
5 ~~care.~~

6 [~~(1) provided in response to a life-threatening or~~
7 ~~emergency situation affecting the inmate's health,~~

8 [~~(2) initiated by the department,~~

9 [~~(3) initiated by the health care provider or~~
10 ~~consisting of routine follow-up, prenatal, or chronic care, or~~

11 [~~(4) provided under a contractual obligation that is~~
12 ~~established under the Interstate Corrections Compact or under an~~
13 ~~agreement with another state that precludes assessing a copayment.~~

14 [(c)] The department shall adopt policies to ensure that
15 before any deductions are made from an inmate's trust fund under
16 this section [~~an inmate initiates a visit to a health care~~
17 ~~provider~~], the inmate is informed that the annual health care
18 services fee [~~a \$3 copayment~~] will be deducted from the inmate's
19 trust fund as required by Subsection (a).

20 (c) [(d)] The department may not deny an inmate access to
21 health care as a result of the inmate's failure or inability to pay
22 a fee under this section [~~make a copayment~~].

23 (d) [(e)] The department shall deposit money received under
24 this section in an account in the general revenue fund that may be
25 used only to pay the cost of administering this section. At the
26 beginning of each fiscal year, the comptroller shall transfer any
27 surplus from the preceding fiscal year to the state treasury to the

1 credit of the general revenue fund.

2 SECTION 3. Subchapter B, Chapter 501, Government Code, is
3 amended by adding Section 501.067 to read as follows:

4 Sec. 501.067. AVAILABILITY OF CERTAIN MEDICATION. (a) In
5 this section, "over-the-counter medication" means medication that
6 may legally be sold and purchased without a prescription.

7 (b) The department shall make over-the-counter medication
8 available for purchase by inmates in each inmate commissary
9 operated by or under contract with the department.

10 (c) The department may not deny an inmate access to
11 over-the-counter medications as a result of the inmate's inability
12 to pay for the medication. The department shall pay for the cost of
13 over-the-counter medication for inmates who are unable to pay for
14 the medication out of the profits of inmate commissaries operated
15 by or under contract with the department.

16 (d) The department may adopt policies concerning the sale
17 and purchase of over-the-counter medication under this section as
18 necessary to ensure the safety and security of inmates in the
19 custody of, and employees of, the department, including policies
20 concerning the quantities and types of over-the-counter medication
21 that may be sold and purchased under this section.

22 SECTION 4. Subchapter E, Chapter 501, Government Code, is
23 amended by adding Section 501.1485 to read as follows:

24 Sec. 501.1485. CORRECTIONS MEDICATION AIDES. (a) The
25 department, in cooperation with The University of Texas Medical
26 Branch at Galveston and the Texas Tech University Health Sciences
27 Center, shall develop and implement a training program for

1 corrections medication aides that uses a curriculum specific to
2 administering medication in a correctional setting.

3 (b) In developing the curriculum for the training program,
4 the department, The University of Texas Medical Branch at
5 Galveston, and the Texas Tech University Health Sciences Center
6 shall:

7 (1) consider the content of the curriculum developed
8 by the American Correctional Association for certified corrections
9 nurses; and

10 (2) modify as appropriate the content of the
11 curriculum developed under Chapter 242, Health and Safety Code, for
12 medication aides administering medication in convalescent and
13 nursing homes and related institutions to produce content suitable
14 for administering medication in a correctional setting.

15 (c) The department shall submit an application for the
16 approval of a training program developed under this section,
17 including the curriculum, to the Department of Aging and Disability
18 Services in the manner established by the executive commissioner of
19 the Health and Human Services Commission under Section 161.082,
20 Human Resources Code.

21 SECTION 5. Section 251.012, Health and Safety Code, as
22 amended by Chapters 839 (S.B. 1932) and 1280 (H.B. 1831), Acts of
23 the 81st Legislature, Regular Session, 2009, is reenacted and
24 amended to read as follows:

25 Sec. 251.012. EXEMPTIONS FROM LICENSING REQUIREMENT. The
26 following facilities are not required to be licensed under this
27 chapter:

1 (1) a home and community support services agency
2 licensed under Chapter 142 with a home dialysis designation;

3 (2) a hospital licensed under Chapter 241 that
4 provides dialysis only to individuals receiving:

5 (A) [~~individuals receiving~~] inpatient services
6 from the hospital; or

7 (B) [~~individuals receiving~~] outpatient services
8 due to a disaster declared by the governor or a federal disaster
9 declared by the president of the United States occurring in this
10 state or another state during the term of the disaster declaration;
11 [~~or~~]

12 (3) a hospital operated by or on behalf of the state as
13 part of the managed health care provider network established under
14 Chapter 501, Government Code, that provides dialysis only to
15 individuals receiving:

16 (A) inpatient services from the hospital; or
17 (B) outpatient services while serving a term of
18 confinement in a facility operated by or under contract with the
19 Texas Department of Criminal Justice;

20 (4) an end stage renal disease facility operated by or
21 on behalf of the state as part of the managed health care provider
22 network established under Chapter 501, Government Code, that
23 provides dialysis only to individuals receiving those services
24 while serving a term of confinement in a facility operated by or
25 under contract with the Texas Department of Criminal Justice; or

26 (5) the office of a physician unless the office is used
27 primarily as an end stage renal disease facility.

1 SECTION 6. Subchapter D, Chapter 161, Human Resources Code,
2 is amended by adding Section 161.082 to read as follows:

3 Sec. 161.082. CORRECTIONS MEDICATION AIDES. (a) The
4 executive commissioner shall establish:

5 (1) minimum standards and procedures for the approval
6 of corrections medication aide training programs, including
7 curricula, developed under Section 501.1485, Government Code;

8 (2) minimum requirements for the issuance, denial,
9 renewal, suspension, and revocation of a permit to a corrections
10 medication aide, including the payment of an application or renewal
11 fee in an amount necessary to cover the costs incurred by the
12 department in administering this section; and

13 (3) the acts and practices that are within and outside
14 the scope of a permit issued under this section.

15 (b) Not later than the 90th day after receipt of an
16 application for approval of a corrections medication aide training
17 program developed under Section 501.1485, Government Code, the
18 department shall:

19 (1) approve the program, if the program meets the
20 minimum standards and procedures established under Subsection
21 (a)(1); or

22 (2) provide notice to the Texas Department of Criminal
23 Justice that the program is not approved and include in the notice a
24 description of the actions that are required for the program to be
25 approved.

26 (c) The department shall issue a permit to or renew the
27 permit of an applicant who meets the minimum requirements

1 established under Subsection (a)(2). The department shall
2 coordinate with the Texas Department of Criminal Justice in the
3 performance of the department's duties and functions under this
4 subsection.

5 SECTION 7. (a) The Texas Department of Criminal Justice,
6 in cooperation with The University of Texas Medical Branch at
7 Galveston, the Texas Tech University Health Sciences Center, or a
8 successor correctional managed health care provider, shall develop
9 the training program required by Section 501.1485, Government Code,
10 as added by this Act, and the department shall submit an application
11 for approval of that program, as required by Subsection (c) of that
12 section, not later than January 1, 2012. If after the effective date
13 of this Act and before the date the department develops the training
14 program described by this subsection The University of Texas
15 Medical Branch at Galveston and the Texas Tech University Health
16 Sciences Center are no longer represented on the Correctional
17 Managed Health Care Committee, or no longer serve as correctional
18 managed health care providers, the executive director of the
19 department shall request and receive the cooperation of any other
20 state agency determined by the executive director to be an
21 appropriate resource in the development of the program.

22 (b) The change in law made by this Act in amending Section
23 251.012, Health and Safety Code, applies only to dialysis services
24 provided on or after the effective date of this Act. Dialysis
25 services provided before the effective date of this Act are covered
26 by the law in effect immediately before that date, and the former
27 law is continued in effect for that purpose.

1 (c) The executive commissioner of the Health and Human
2 Services Commission shall establish the minimum standards and
3 requirements and the acts and practices allowed or prohibited, as
4 required by Section 161.082, Human Resources Code, as added by this
5 Act, not later than January 1, 2012.

6 SECTION 8. To the extent of any conflict, this Act prevails
7 over another Act of the 82nd Legislature, Regular Session, 2011,
8 relating to nonsubstantive additions to and corrections in enacted
9 codes.

10 SECTION 9. This Act takes effect September 1, 2011.

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

May 26, 2011

TO: Honorable Joe Straus, Speaker of the House, House of Representatives

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **As Passed 2nd House**

Estimated Two-year Net Impact to General Revenue Related Funds for HB3459, As Passed 2nd House: a positive impact of \$13,485,150 through the biennium ending August 31, 2013.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2012	\$7,705,800
2013	\$5,779,350
2014	\$5,779,350
2015	\$5,779,350
2016	\$5,779,350

All Funds, Five-Year Impact:

Fiscal Year	Probable Revenue Gain from <i>General Revenue Fund</i> 1
2012	\$7,705,800
2013	\$5,779,350
2014	\$5,779,350
2015	\$5,779,350
2016	\$5,779,350

Fiscal Analysis

The bill would amend Sections 499 and 501 of the Government Code to add provisions regarding TDCJ policies designed to manage inmate population based on similar health conditions, to require inmates to pay an annual \$100 health care services fee, and to require TDCJ to provide certain over-the-counter medications to offenders through commissary operations and do so at no cost if the inmate is indigent.

The bill would require TDCJ, UTMB, and TTUHSC to develop and implement a training program for corrections medication aides similar to the one currently offered by DADS which certifies medication aides who work in nursing homes.

The bill would provide an exemption from end stage renal disease licensing requirements for clinics and hospitals operated on behalf of the state that provide dialysis to individuals receiving services in the correctional managed health care program.

The bill would take effect September 1, 2011.

Methodology

Section 1 would require TDCJ to adopt policies designed to manage inmate population based on similar health conditions. TDCJ reports that the agency currently considers medical need in housing determinations to the extent possible without sacrificing the safety and security of staff and inmates.

Section 2 would replace an inmate copayment of \$3 for certain inmates with an annual inmate health care fee of \$100 for all confined inmates. Currently only certain inmates who use medical services are required to pay the \$3 copayment while the revision would require all inmates, regardless of the frequency in which they use health care services, to pay the annual fee. TDCJ reports that in fiscal year 2010, there were 77,058 offenders with annual trust deposits of \$100 or more. However, deposits are not expected to remain constant in future years as a result of a variety of economic and other factors. Assuming the fiscal year 2011 amount for fiscal year 2012 and calculating 75 percent of the amount for subsequent years, it is estimated that the bill would produce \$13.5 million in revenue for the 2012-13 biennium.

Section 3 would have no significant fiscal impact to the state.

Sections 4 and 5 would implement recommendations in the Legislative Budget Board's Government Effectiveness and Efficiency Report entitled "Eliminate Statutory Barriers to Contain Costs in Correctional Managed Health Care," submitted to the Eighty-second Legislature, 2011. The provisions would reduce costs in the Correctional Managed Health Care program by creating operational efficiencies for the program's health care providers.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 539 Aging and Disability Services, Department of, 696 Department of Criminal Justice, 720 The University of Texas System Administration, 739 Texas Tech University Health Sciences Center, 697 Board of Pardons and Paroles, 781 Higher Education Coordinating Board

LBB Staff: JOB, KK, DH, ESi, JI, AI, GG, LM

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

May 19, 2011

TO: Honorable John Whitmire, Chair, Senate Committee on Criminal Justice

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **Committee Report 2nd House, Substituted**

Estimated Two-year Net Impact to General Revenue Related Funds for HB3459, Committee Report 2nd House, Substituted: a positive impact of \$13,485,150 through the biennium ending August 31, 2013.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2012	\$7,705,800
2013	\$5,779,350
2014	\$5,779,350
2015	\$5,779,350
2016	\$5,779,350

All Funds, Five-Year Impact:

Fiscal Year	Probable Revenue Gain from <i>General Revenue Fund</i> 1
2012	\$7,705,800
2013	\$5,779,350
2014	\$5,779,350
2015	\$5,779,350
2016	\$5,779,350

Fiscal Analysis

The bill would amend Sections 499 and 501 of the Government Code to add provisions regarding TDCJ policies designed to manage inmate population based on similar health conditions, to require inmates to pay an annual \$100 health care services fee, and to require TDCJ to provide certain over-the-counter medications to offenders through commissary operations and do so at no cost if the inmate is indigent.

The bill would require TDCJ, UTMB, and TTUHSC to develop and implement a training program for corrections medication aides similar to the one currently offered by DADS which certifies medication aides who work in nursing homes.

The bill would provide an exemption from end stage renal disease licensing requirements for clinics and hospitals operated on behalf of the state that provide dialysis to individuals receiving services in the correctional managed health care program.

The bill would take effect September 1, 2011.

Methodology

Section 1 would require TDCJ to adopt policies designed to manage inmate population based on similar health conditions. TDCJ reports that the agency currently considers medical need in housing determinations to the extent possible without sacrificing the safety and security of staff and inmates.

Section 2 would replace an inmate copayment of \$3 for certain inmates with an annual inmate health care fee of \$100 for all confined inmates. Currently only certain inmates who use medical services are required to pay the \$3 copayment while the revision would require all inmates, regardless of the frequency in which they use health care services, to pay the annual fee. TDCJ reports that in fiscal year 2010, there were 77,058 offenders with annual trust deposits of \$100 or more. However, deposits are not expected to remain constant in future years as a result of a variety of economic and other factors. Assuming the fiscal year 2011 amount for fiscal year 2012 and calculating 75 percent of the amount for subsequent years, it is estimated that the bill would produce \$13.5 million in revenue for the 2012-13 biennium.

Section 3 would have no significant fiscal impact to the state.

Sections 4 and 5 would implement recommendations in the Legislative Budget Board's Government Effectiveness and Efficiency Report entitled "Eliminate Statutory Barriers to Contain Costs in Correctional Managed Health Care," submitted to the Eighty-second Legislature, 2011. The provisions would reduce costs in the Correctional Managed Health Care program by creating operational efficiencies for the program's health care providers.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 539 Aging and Disability Services, Department of, 696 Department of Criminal Justice, 720 The University of Texas System Administration, 739 Texas Tech University Health Sciences Center, 697 Board of Pardons and Paroles, 781 Higher Education Coordinating Board

LBB Staff: JOB, DH, ESi, JI, AI, GG, LM

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

May 10, 2011

TO: Honorable John Whitmire, Chair, Senate Committee on Criminal Justice

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **As Engrossed**

No significant fiscal implication to the State is anticipated.

The bill would implement recommendations in the Legislative Budget Board's Government Effectiveness and Efficiency Report entitled "Eliminate Statutory Barriers to Contain Costs in Correctional Managed Health Care," submitted to the Eighty-second Legislature, 2011. The bill would reduce costs in the Correctional Managed Health Care program by creating operational efficiencies for the program's health care providers, the University of Texas Medical Branch at Galveston (UTMB) and the Texas Tech University Health Sciences Center (TTUHSC), or their successors.

The bill would require the Texas Department of Criminal Justice (TDCJ), UTMB, and TTUHSC to develop and implement a training program for corrections medication aides similar to the one currently offered by the Department of Aging and Disability Services (DADS) which certifies medication aides who work in nursing homes. The bill provides for the content of the curriculum. The bill would require the executive commission of the Health and Human Services Commission to approve the training program and establish licensing practices for corrections medication aides who would be licensed by DADS.

The bill would provide an exemption from end stage renal disease licensing requirements for hospitals operated on behalf of the state that provide dialysis to individuals receiving services in the correctional managed health care program.

The bill would take effect September 1, 2011.

This analysis assumes that any cost associated with implementing the bill's provisions could be met using existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 539 Aging and Disability Services, Department of, 696 Department of Criminal Justice, 720 The University of Texas System Administration, 739 Texas Tech University Health Sciences Center

LBB Staff: JOB, ESi, JI, DH, AI

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

April 14, 2011

TO: Honorable Jerry Madden, Chair, House Committee on Corrections

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: **HB3459** by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **Committee Report 1st House, Substituted**

No significant fiscal implication to the State is anticipated.

The bill would implement recommendations in the Legislative Budget Board's Government Effectiveness and Efficiency Report entitled "Eliminate Statutory Barriers to Contain Costs in Correctional Managed Health Care," submitted to the Eighty-second Legislature, 2011. The bill would reduce costs in the Correctional Managed Health Care program by creating operational efficiencies for the program's health care providers, the University of Texas Medical Branch at Galveston (UTMB) and the Texas Tech University Health Sciences Center (TTUHSC), or their successors.

The bill would require the Texas Department of Criminal Justice (TDCJ), UTMB, and TTUHSC to develop and implement a training program for corrections medication aides similar to the one currently offered by the Department of Aging and Disability Services (DADS) which certifies medication aides who work in nursing homes. The bill provides for the content of the curriculum. The bill would require the executive commission of the Health and Human Services Commission to approve the training program and establish licensing practices for corrections medication aides who would be licenses by DADS.

The bill would provide an exemption from end stage renal disease licensing requirements for hospitals operated on behalf of the state that provide dialysis to individuals receiving services in the correctional managed health care program.

The bill would take effect September 1, 2011.

This analysis assumes that any cost associated with implementing the bill's provisions could be met using existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 539 Aging and Disability Services, Department of, 696 Department of Criminal Justice, 720 The University of Texas System Administration, 739 Texas Tech University Health Sciences Center

LBB Staff: JOB, ESi, JI, DH, AI

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

April 5, 2011

TO: Honorable Jerry Madden, Chair, House Committee on Corrections

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would implement recommendations in the Legislative Budget Board's Government Effectiveness and Efficiency Report entitled "Eliminate Statutory Barriers to Contain Costs in Correctional Managed Health Care," submitted to the Eighty-second Legislature, 2011. The bill would reduce costs in the Correctional Managed Health Care program by creating operational efficiencies for the program's health care providers, the University of Texas Medical Branch at Galveston (UTMB) and the Texas Tech University Health Sciences Center (TTUHSC), or their successors.

The bill would require the Texas Department of Criminal Justice (TDCJ), UTMB, and TTUHSC to develop and implement a training program for corrections medication aides similar to the one currently offered by the Department of Aging and Disability Services (DADS) which certifies medication aides who work in nursing homes. The bill provides for the content of the curriculum. The bill would require the executive commission of the Health and Human Services Commission to approve the training program and establish licensing practices for corrections medication aides who would be licenses by DADS.

The bill would provide an exemption from end stage renal disease licensing requirements for hospitals operated on behalf of the state that provide dialysis to individuals receiving services in the correctional managed health care program.

The bill would expand the definition of elderly and terminally ill in the Medically Recommended Intensive Supervision program. The bill would define elderly as age 60 and define terminally ill as having an incurable illness, disease, disorder, or other condition that has been diagnosed by a physician and is reasonably expected to result in death in 12 months or less. The change would expand the number of offenders who could be paroled by the Board of Pardons and Paroles if the board determines the individual is a suitable for medical parole.

The bill would take effect September 1, 2011.

This analysis assumes that any cost associated with implementing the bill's provisions could be met using existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 539 Aging and Disability Services, Department of, 696 Department of Criminal Justice, 720 The University of Texas System Administration, 739 Texas Tech University Health Sciences Center

LBB Staff: JOB, ESi, JI, DH, AI

LEGISLATIVE BUDGET BOARD
Austin, Texas

CRIMINAL JUSTICE IMPACT STATEMENT

82ND LEGISLATIVE REGULAR SESSION

May 19, 2011

TO: Honorable John Whitmire, Chair, Senate Committee on Criminal Justice

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **Committee Report 2nd House, Substituted**

No significant impact on the programs and workload of state corrections agencies or on the demand for resources and services of those agencies is anticipated from any provisions of this bill that authorize or require a change in the sanctions applicable to adults convicted of felony crimes.

Source Agencies:

LBB Staff: JOB, ADM, GG, LM

LEGISLATIVE BUDGET BOARD

Austin, Texas

CRIMINAL JUSTICE IMPACT STATEMENT

82ND LEGISLATIVE REGULAR SESSION

May 10, 2011

TO: Honorable John Whitmire, Chair, Senate Committee on Criminal Justice

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **As Engrossed**

No significant impact on the programs and workload of state corrections agencies or on the demand for resources and services of those agencies is anticipated from any provisions of this bill that authorize or require a change in the sanctions applicable to adults convicted of felony crimes.

Source Agencies:

LBB Staff: JOB, ADM, GG, LM

**LEGISLATIVE BUDGET BOARD
Austin, Texas**

CRIMINAL JUSTICE IMPACT STATEMENT

82ND LEGISLATIVE REGULAR SESSION

April 14, 2011

TO: Honorable Jerry Madden, Chair, House Committee on Corrections

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **Committee Report 1st House, Substituted**

No significant impact on the programs and workload of state corrections agencies or on the demand for resources and services of those agencies is anticipated from any provisions of this bill that authorize or require a change in the sanctions applicable to adults convicted of felony crimes.

Source Agencies:

LBB Staff: JOB, GG, LM

**LEGISLATIVE BUDGET BOARD
Austin, Texas**

CRIMINAL JUSTICE IMPACT STATEMENT

82ND LEGISLATIVE REGULAR SESSION

April 5, 2011

TO: Honorable Jerry Madden, Chair, House Committee on Corrections

FROM: John S O'Brien, Director, Legislative Budget Board

IN RE: HB3459 by Eiland (Relating to the containment of costs incurred in the correctional health care system.), **As Introduced**

No significant impact on the programs and workload of state corrections agencies or on the demand for resources and services of those agencies is anticipated from any provisions of this bill that authorize or require a change in the sanctions applicable to adults convicted of felony crimes.

Source Agencies:

LBB Staff: JOB, GG, LM