### **BILL ANALYSIS**

C.S.H.B. 2042 By: Guillen Public Health Committee Report (Substituted)

#### **BACKGROUND AND PURPOSE**

In recognizing the significant burden of living with and treating chronic kidney disease and end stage renal disease, the legislature established the chronic kidney disease task force to develop a plan to educate individuals and health care professionals about these diseases. C.S.H.B. 2042 seeks to ensure the continued efforts of the task force by removing provisions relating to the expiration of the task force and revising the composition and certain reporting requirements of the task force.

#### **RULEMAKING AUTHORITY**

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

## **ANALYSIS**

C.S.H.B. 2042 amends certain provisions of Chapter 98, Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007, relating to the Chronic Kidney Disease Task Force. The bill repeals statutory provisions abolishing the task force and providing for the expiration of provisions relating to the task force on August 31, 2013, and makes conforming and clarifying changes to certain reporting duties of the task force. The bill increases from 13 to 18 the number of members of the task force and adds to the composition of the task force one primary care physician, one licensed and certified renal dietitian, one certified nephrology nurse, one representative from a health care system, one representative of the Health and Human Services Commission whose duties involve the state Medicaid program, and one end stage renal disease expert. The bill decreases from two to one the number of representatives on the task force from the National Kidney Foundation and specifies that the representative from a nephrology department of a state medical school must be a nephrologist and that the representative from the Department of State Health Services (DSHS) must be from DSHS's Kidney Health Care Program. The bill requires the governor, not later than January 1, 2014, to appoint the additional members to the task force.

C.S.H.B 2042 repeals Section 98.009, Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007.

## **EFFECTIVE DATE**

September 1, 2013.

### **COMPARISON OF ORIGINAL AND SUBSTITUTE**

While C.S.H.B. 2042 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and highlighted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

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# INTRODUCED

## No equivalent provision.

SECTION 1. Section 98.006, Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007, is amended to read as follows:

Sec. 98.006. REPORT. Not later than January 1 of each even-numbered year[, 2013], the task force shall submit its

#### HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Section 98.002(a), Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007, is amended to read as follows: (a) The Chronic Kidney Disease Task Force is composed of:

- (1) 18 [13] members appointed by the governor as follows:
- (A) one family practice physician;
- (B) one pathologist;
- (C) one <u>nephrologist</u> representative from a nephrology department of a state medical school;
- (D) one nephrologist in private practice;
- (E) <u>one representative</u> [two representatives] from [different Texas affiliates of] the National Kidney Foundation;
- (F) one representative from the <u>department's Kidney Health Care Program</u> [<del>department</del>];
- (G) one representative of an insurer that issues a preferred provider benefit plan or of a health maintenance organization;
- (H) one representative of clinical laboratories;
- (I) one representative of private renal care providers;
- (J) one pediatrician in private practice;
- (K) one kidney transplant surgeon; [and]
- (L) one representative from the Texas Renal Coalition;
- (M) one primary care physician;
- (N) one licensed and certified renal dietitian;
- (O) one certified nephrology nurse;
- (P) one representative from a health care system;
- (Q) one representative of the Health and Human Services Commission whose duties involve the state Medicaid program; and
- (R) one end stage renal disease expert;
- (2) two members of the senate appointed by the lieutenant governor; and
- (3) two members of the house of representatives appointed by the speaker of the house of representatives.

SECTION 2. Same as introduced version.

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findings and recommendations to:

(1) the governor, lieutenant governor, and speaker of the house of representatives; and (2) the presiding officers of the [Senate Committee on Health and Human Services and the Public Health Committee of the house of representatives, or the] appropriate standing committees of the legislature with jurisdiction over health issues [82nd Legislature].

SECTION 2. Section 98.009, Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007, is repealed.

SECTION 3. Same as introduced version.

# No equivalent provision.

SECTION 4. Not later than January 1, 2014, the governor shall appoint the additional members to the Chronic Kidney Disease Task Force as required by Section 98.002(a), Health and Safety Code, as added by Chapter 671 (H.B. 1373), Acts of the 80th Legislature, Regular Session, 2007, as amended by this Act.

SECTION 3. This Act takes effect September 1, 2013.

SECTION 5. Same as introduced version.

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