

BILL ANALYSIS

C.S.H.B. 2620
By: Collier
Human Services
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties assert that pregnant women are at a greater risk for domestic violence, especially from an intimate partner, than the general population of women in the United States. Domestic violence during pregnancy can lead to health complications for both the child and the mother, including miscarriage, low birth weight, and pre-term birth. According to industry experts, homicide is the number one cause of maternal mortality, with almost half of pregnancy-related homicides directly related to domestic violence.

Interested parties note that the prenatal and postpartum periods present increased intervention potential for health care professionals, as women are more likely to access health care services during these times. Programs such as home visitation, in particular, provide reliable points of intervention in domestic violence cases. C.S.H.B. 2620 seeks to create a task force to study and address domestic violence in prenatal and postpartum women, including assistance that can be provided by health care providers.

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. 2620 amends the Health and Safety Code to create the task force on domestic violence composed of 25 members appointed by the executive commissioner of the Health and Human Services Commission (HHSC) as set forth under the bill's provisions, with a task force member appointed by the executive commissioner to serve as the task force's presiding officer. The bill requires the task force to meet at the call of the presiding officer to examine the impact of domestic violence on maternal and infant mortality, the health of mothers, and the health and development of fetuses, infants, and children; to identify the health care services available to children age two and younger and to mothers, and to explore opportunities for improving the ability of those services to address domestic violence; to identify methods to effectively include domestic violence information and support in educational standards for educators and in protocols for health care providers; and to investigate and make recommendations relating to the coordination of health care services for children age two and younger and pregnant and postpartum women who are victims of domestic violence, including recommendations for improving early screening and detection and public awareness efforts.

C.S.H.B. 2620 requires the task force, not later than September 1, 2015, to submit a report containing the findings and legislative, policy, and research recommendations of the task force and a description of the activities of the task force to the governor, the lieutenant governor, the speaker of the house of representatives, the presiding officers of the legislative committees with primary jurisdiction over health and human services, the executive commissioner of HHSC, and the commissioner of state health services. The bill establishes that the task force is abolished and that provisions relating to the task force expire January 1, 2016.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2013.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 2620 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.

INTRODUCED

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Subtitle H, Title 2, Health and Safety Code, is amended by adding Chapter 172 to read as follows:

SECTION 1. Chapter 32, Health and Safety Code, is amended by adding Subchapter C to read as follows:

CHAPTER 172. TASK FORCE ON DOMESTIC VIOLENCE

SUBCHAPTER C. TASK FORCE ON DOMESTIC VIOLENCE

Sec. 172.001. DEFINITION. In this chapter, "task force" means the task force on domestic violence.

Sec. 32.061. DEFINITION. In this subchapter, "task force" means the task force on domestic violence.

Sec. 172.002. ESTABLISHMENT; PRESIDING OFFICER. (a) The task force is composed of 20 members appointed by the executive commissioner of the Health and Human Services Commission as follows:

Sec. 32.062. ESTABLISHMENT; PRESIDING OFFICER. (a) The task force is composed of 25 members appointed by the executive commissioner of the Health and Human Services Commission as follows:

(1) four representatives of family violence centers, as defined by Section 51.002, Human Resources Code, from different geographic regions in this state, including both rural and urban areas;

(1) four representatives of family violence centers, as defined by Section 51.002, Human Resources Code, from different geographic regions in this state, including both rural and urban areas;

(2) one representative of a statewide family violence advocacy organization;

(2) one representative of a statewide family violence advocacy organization;

(3) one representative of a statewide association of obstetricians and gynecologists;

(3) one representative of a statewide association of obstetricians and gynecologists;

(4) one representative of the Office of Title V and Family Health in the Department of State Health Services;

(4) two representatives of the family and community health programs in the Department of State Health Services;

(5) one representative of a statewide sexual assault advocacy organization;

(5) one representative of a statewide sexual assault advocacy organization;

(6) one representative of the Health and Human Services Commission Texas Home Visiting Program;

(6) one representative of the Health and Human Services Commission Texas Home Visiting Program;

(7) one representative of a statewide association of midwifery;

(7) one representative of a statewide association of midwifery;

(8) one representative of a statewide family physician's association;

(8) one representative of a statewide family physician's association;

(9) one representative of a statewide nursing association;

(9) one representative of a statewide nursing association;

(10) one representative of a statewide hospital association;

(10) one representative of a statewide hospital association;

(11) one representative of a statewide

(11) one representative of a statewide

- pediatric medical association;
(12) one representative of a statewide medical association;
(13) one representative of The University of Texas School of Social Work Institute on Domestic Violence and Sexual Assault;
(14) one representative of The University of Texas School of Law Domestic Violence Clinic;
(15) one representative of the governor's EMS and Trauma Advisory Council;
(16) one representative of a Department of Family and Protective Services prevention and early intervention program; and
(17) one representative of a statewide osteopathic medical association.

(b) The executive commissioner of the Health and Human Services Commission shall appoint a task force member to serve as presiding officer of the task force.

Sec. 172.003. DUTIES OF TASK FORCE. The task force shall meet at the call of the presiding officer to:

- (1) examine the impact of domestic violence on maternal and infant mortality, the health of mothers, and the health and development of fetuses, infants, and children;
(2) identify the health care services available to mothers and children compared to the need for the services and opportunities for improving the services provided to these groups;
(3) identify methods to effectively include domestic violence information and support in educational standards for educators and protocols for health care providers; and
(4) investigate and make recommendations relating to the coordination of health care services for young children and pregnant and postpartum women who are victims of domestic violence, including

- pediatric medical association;
(12) one representative of a statewide medical association;
(13) one representative of The University of Texas School of Social Work Institute on Domestic Violence and Sexual Assault;
(14) one representative of The University of Texas School of Law Domestic Violence Clinic;
(15) one representative of the governor's EMS and Trauma Advisory Council;
(16) one representative of a Department of Family and Protective Services prevention and early intervention program;
(17) one representative of a statewide osteopathic medical association;

(18) one representative of a statewide association of community health centers;

(19) one representative of the Family Initiatives section of the child support division of the office of the attorney general;

(20) one representative from a medical school or a teaching hospital in the state who is either an attending physician of the hospital or a faculty member of the medical school; and

(21) one representative of the Health and Human Services Commission's Family Violence Program.

(b) The executive commissioner of the Health and Human Services Commission shall appoint a task force member to serve as presiding officer of the task force.

Sec. 32.063. DUTIES OF TASK FORCE. The task force shall meet at the call of the presiding officer to:

- (1) examine the impact of domestic violence on maternal and infant mortality, the health of mothers, and the health and development of fetuses, infants, and children;
(2) identify the health care services available to children age two and younger and mothers and explore opportunities for improving the ability of those services to address domestic violence;
(3) identify methods to effectively include domestic violence information and support in educational standards for educators and protocols for health care providers; and
(4) investigate and make recommendations relating to the coordination of health care services for children age two and younger and pregnant and postpartum women who are victims of domestic violence, including

recommendations for improving early screening and detection and public awareness efforts.

Sec. 172.004. REPORT. Not later than September 1, 2015, the task force shall submit a report to the governor, the lieutenant governor, the speaker of the house of representatives, the presiding officers of the standing committees of the legislature having primary jurisdiction over health and human services, the executive commissioner of the Health and Human Services Commission, and the commissioner of state health services containing:

(1) the findings and legislative, policy, and research recommendations of the task force; and

(2) a description of the activities of the task force.

Sec. 172.005. EXPIRATION. The task force is abolished and this chapter expires January 1, 2016.

SECTION 2. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2013.

recommendations for improving early screening and detection and public awareness efforts.

Sec. 32.064. REPORT. Not later than September 1, 2015, the task force shall submit a report to the governor, the lieutenant governor, the speaker of the house of representatives, the presiding officers of the standing committees of the legislature having primary jurisdiction over health and human services, the executive commissioner of the Health and Human Services Commission, and the commissioner of state health services containing:

(1) the findings and legislative, policy, and research recommendations of the task force; and

(2) a description of the activities of the task force.

Sec. 32.065. EXPIRATION. The task force is abolished and this subchapter expires January 1, 2016.

SECTION 2. Same as introduced version.