

BILL ANALYSIS

S.B. 807
By: Deuell
Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Each year, many individuals enter the United States from areas of the world where tuberculosis (TB) is endemic. Interested parties assert that, though intake into a U.S. Immigration and Customs Enforcement (ICE) detention facility includes an initial health care screening that includes checking for signs and symptoms of TB, these facilities are not equipped to treat patients with complicated TB. The parties contend that individuals found to have TB who are released from ICE facilities into Texas' general population without treatment pose a potential public health threat, noting that more complicated cases of TB are best treated at the Texas Center for Infectious Disease, Texas' designated facility for court-ordered management of TB patients.

Because current law specifies that nonresidents of the state may be admitted to the center only under certain conditions, illegal immigrants with TB awaiting removal or asylum proceedings who do not meet such conditions are ineligible for admission even though their condition constitutes a public health threat. S.B. 807 seeks to protect Texans from exposure to this serious disease by authorizing the Department of State Health Services to admit certain nonresident tuberculosis patients to a state chest hospital.

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

Section 531.0055, Government Code, as amended by Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, expressly grants to the executive commissioner of the Health and Human Services Commission all rulemaking authority for the operation of and provision of services by the health and human services agencies. Similarly, Sections 1.16-1.29, Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, provide for the transfer of a power, duty, function, program, or activity from a health and human services agency abolished by that act to the corresponding legacy agency. To the extent practical, this bill analysis is written to reflect any transfer of rulemaking authority and to update references as necessary to an agency's authority with respect to a particular health and human services program.

S.B. 807 amends the Health and Safety Code to authorize the commissioner of public health to admit a person to a state chest hospital if the person is in the custody of U.S. Immigration and Customs Enforcement, or other appropriate federal agency, pending completion of deportation or political asylum proceedings or has been released from custody pending completion of the proceedings, and the commissioner determines the person is a tuberculosis patient. The bill requires the Department of State Health Services, if the commissioner admits such a tuberculosis patient, to attempt to recover from the appropriate federal agency the costs associated with the treatment of the patient.

EFFECTIVE DATE

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