

By: Kolkhorst

H.B. No. 595

A BILL TO BE ENTITLED

AN ACT

1  
2 relating to the repeal of certain health programs and councils, to  
3 the review of certain health programs, panels, councils, systems,  
4 foundations, centers, committees, and divisions under the Texas  
5 Sunset Act, and to the transfer of certain functions to the  
6 Department of State Health Services; providing penalties.

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

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

10 (b) The commission shall:

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

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

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

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

1 to read as follows:

2 (b) To minimize cost and duplication of activities, the  
3 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.

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

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

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

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

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, 2021.

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

8 SECTION 5. Chapter 36, Health and Safety Code, is amended by  
9 adding Section 36.015 to read as follows:

10 Sec. 36.015. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
11 screening program for special senses and communication disorders  
12 established under this chapter is subject to review under Chapter  
13 325, Government Code (Texas Sunset Act), as if it were a state  
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, 2021.

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

23 Sec. 37.007. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
24 program to detect abnormal spinal curvature in children established  
25 under this chapter is subject to review under Chapter 325,  
26 Government Code (Texas Sunset Act), as if it were a state agency  
27 subject to review under that chapter. If the program is not

1 continued in existence in accordance with that chapter, the program  
2 is abolished and this chapter expires September 1, 2021.

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, 2021.

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, 2021.

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, 2021.

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, 2021.

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

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

3 SECTION 11. Chapter 42, Health and Safety Code, is amended  
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,  
9 2021.

10 SECTION 12. Chapter 43, Health and Safety Code, is amended  
11 by adding Section 43.015 to read as follows:

12 Sec. 43.015. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
13 oral health improvement services program is subject to review under  
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  
16 is not continued in existence in accordance with that chapter, the  
17 program is abolished and this chapter expires September 1, 2021.

18 (b) To the extent that Chapter 325, Government Code (Texas  
19 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 the program.

22 SECTION 13. Chapter 46, Health and Safety Code, is amended  
23 by adding Section 46.008 to read as follows:

24 Sec. 46.008. APPLICATION OF SUNSET ACT TO SYSTEM. (a) The  
25 system implemented in accordance with Section 46.002(a) is subject  
26 to review under Chapter 325, Government Code (Texas Sunset Act), as  
27 if it were a state agency subject to review under that chapter. If

1 the system is not continued in existence in accordance with that  
2 chapter, the system is abolished and this chapter expires September  
3 1, 2021.

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  
6 that chapter, the department shall perform the duty as it relates to  
7 the system.

8 SECTION 14. Chapter 47, Health and Safety Code, is amended  
9 by adding Section 47.012 to read as follows:

10 Sec. 47.012. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
11 newborn hearing screening, tracking, and intervention program is  
12 subject to review under Chapter 325, Government Code (Texas Sunset  
13 Act), as if it were a state agency subject to review under that  
14 chapter. If the program is not continued in existence in accordance  
15 with that chapter, the program is abolished and this chapter  
16 expires September 1, 2021.

17 (b) To the extent that Chapter 325, Government Code (Texas  
18 Sunset Act), places a duty on a state agency subject to review under  
19 that chapter, the department shall perform the duty as it relates to  
20 the program.

21 SECTION 15. Section 81.010, Health and Safety Code, is  
22 amended by adding Subsection (1) to read as follows:

23 (1) The Interagency Coordinating Council for HIV and  
24 Hepatitis is subject to Chapter 325, Government Code (Texas Sunset  
25 Act). Unless continued in existence as provided by that chapter,  
26 the council is abolished and this section expires September 1,  
27 2021.

1 SECTION 16. Chapter 83, Health and Safety Code, is amended  
2 by adding Section 83.0085 to read as follows:

3 Sec. 83.0085. APPLICATION OF SUNSET ACT TO PROGRAM. (a)  
4 The program created by Section 83.008 is subject to review under  
5 Chapter 325, Government Code (Texas Sunset Act), as if it were a  
6 state agency subject to review under that chapter. If the program  
7 is not continued in existence in accordance with that chapter, the  
8 program is abolished and this chapter expires September 1, 2021.

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

13 SECTION 17. Subchapter B, Chapter 85, Health and Safety  
14 Code, is amended by adding Section 85.045 to read as follows:

15 Sec. 85.045. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
16 state grant program established under this subchapter is subject to  
17 review under Chapter 325, Government Code (Texas Sunset Act), as if  
18 it were a state agency subject to review under that chapter. If the  
19 program is not continued in existence in accordance with that  
20 chapter, the program is abolished and this subchapter expires  
21 September 1, 2021.

22 (b) To the extent that Chapter 325, Government Code (Texas  
23 Sunset Act), places a duty on a state agency subject to review under  
24 that chapter, the department shall perform the duty as it relates to  
25 the program.

26 SECTION 18. Subchapter C, Chapter 85, Health and Safety  
27 Code, is amended by adding Section 85.066 to read as follows:



1       Sec. 85.066. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
2 Texas HIV medication program is subject to review under Chapter  
3 325, Government Code (Texas Sunset Act), as if it were a state  
4 agency subject to review under that chapter. If the program is not  
5 continued in existence in accordance with that chapter, the program  
6 is abolished and this subchapter expires September 1, 2021.

7       (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.

11       SECTION 19. Subchapter D, Chapter 85, Health and Safety  
12 Code, is amended by adding Section 85.090 to read as follows:

13       Sec. 85.090. APPLICATION OF SUNSET ACT TO PROGRAMS. (a)  
14 The testing, registration, and counseling programs established  
15 under this subchapter are subject to review under Chapter 325,  
16 Government Code (Texas Sunset Act), as if they were a state agency  
17 subject to review under that chapter. If the programs are not  
18 continued in existence in accordance with that chapter, the  
19 programs are abolished and this subchapter expires September 1,  
20 2021.

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 programs.

25       SECTION 20. Subchapter A, Chapter 86, Health and Safety  
26 Code, is amended by adding Section 86.006 to read as follows:

27       Sec. 86.006. SUNSET PROVISION. The advisory council is

1 subject to Chapter 325, Government Code (Texas Sunset Act). Unless  
2 continued in existence as provided by that chapter, the council is  
3 abolished and this subchapter expires September 1, 2021.

4 SECTION 21. Section 86.012, Health and Safety Code, is  
5 amended by adding Subsection (c) to read as follows:

6 (c) The advisory committee is subject to Chapter 325,  
7 Government Code (Texas Sunset Act). Unless continued in existence  
8 as provided by that chapter, the committee is abolished and this  
9 section expires September 1, 2021.

10 SECTION 22. Section 86.103, Health and Safety Code, is  
11 amended by adding Subsection (c) to read as follows:

12 (c) The advisory council is subject to Chapter 325,  
13 Government Code (Texas Sunset Act). Unless continued in existence  
14 as provided by that chapter, the council is abolished and this  
15 section expires September 1, 2021.

16 SECTION 23. Chapter 90, Health and Safety Code, is amended  
17 by adding Section 90.004 to read as follows:

18 Sec. 90.004. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
19 osteoporosis program created by Section 90.002 is subject to review  
20 under Chapter 325, Government Code (Texas Sunset Act), as if it were  
21 a state agency subject to review under that chapter. If the program  
22 is not continued in existence in accordance with that chapter, the  
23 program is abolished and this chapter expires September 1, 2021.

24 (b) To the extent that Chapter 325, Government Code (Texas  
25 Sunset Act), places a duty on a state agency subject to review under  
26 that chapter, the department shall perform the duty as it relates to  
27 the program.

1 SECTION 24. Chapter 91, Health and Safety Code, is amended  
2 by adding Section 91.004 to read as follows:

3 Sec. 91.004. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
4 program created by Section 91.002 is subject to review under  
5 Chapter 325, Government Code (Texas Sunset Act), as if it were a  
6 state agency subject to review under that chapter. If the program  
7 is not continued in existence in accordance with that chapter, the  
8 program is abolished and this chapter expires September 1, 2021.

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

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

15 Sec. 93.015. SUNSET PROVISION. The Council on  
16 Cardiovascular Disease and Stroke is subject to Chapter 325,  
17 Government Code (Texas Sunset Act). Unless continued in existence  
18 as provided by that chapter, the council is abolished and this  
19 chapter expires September 1, 2021.

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

22 Sec. 97.008. APPLICATION OF SUNSET ACT TO PROGRAM. (a) The  
23 arthritis control and prevention 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, 2021.

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 27. Subchapter A, Chapter 98, Health and Safety  
6 Code, as added by Chapter 359 (S.B. 288), Acts of the 80th  
7 Legislature, Regular Session, 2007, is amended by adding Section  
8 98.003 to read as follows:

9        Sec. 98.003. SUNSET PROVISION. The Advisory Panel on  
10 Health Care-Associated Infections and Preventable Adverse Events  
11 is subject to Chapter 325, Government Code (Texas Sunset Act).  
12 Unless continued in existence as provided by that chapter, the  
13 advisory panel is abolished and this chapter expires September 1,  
14 2021.

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

17        Sec. 101.011. SUNSET PROVISION. The Texas Council on  
18 Alzheimer's Disease and Related Disorders is subject to Chapter  
19 325, Government Code (Texas Sunset Act). Unless continued in  
20 existence as provided by that chapter, the council is abolished and  
21 this chapter expires September 1, 2021.

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

24        Sec. 103.020. SUNSET PROVISION. The Texas Diabetes Council  
25 is subject to Chapter 325, Government Code (Texas Sunset Act).  
26 Unless continued in existence as provided by that chapter, the  
27 council is abolished and this chapter expires September 1, 2021.

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

3 (2) "Department" [~~"Council"~~] means the Department of  
4 State Health Services [~~statewide health coordinating council~~].

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

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

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

20 (c) If the nursing resource section established under  
21 Subsection (b) is funded from surcharges collected under Section  
22 301.155(c), Occupations Code, the department [~~council~~] shall  
23 provide the Texas Board of Nursing with an annual accounting of the  
24 money received from the board. The department [~~council~~] may expend  
25 a reasonable amount of the money to pay administrative costs of  
26 maintaining the nursing resource section.

27 SECTION 32. Sections 105.003(a), (b), (c), (c-1), (d), (f),

1 and (g), Health and Safety Code, are amended to read as follows:

2 (a) The department [~~council~~] shall place a high priority on  
3 collecting and disseminating data on health professions  
4 demonstrating an acute shortage in this state, including:

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

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

14 (c) The Department of Information Resources, through the  
15 state electronic Internet portal and in consultation with the  
16 department [~~council~~] and the Health Professions Council, shall add  
17 and label as "mandatory" the following fields on an application or  
18 renewal form for a license, certificate, or registration for a  
19 person subject to Subsection (c-2):

- 20 (1) full name and last four digits of social security  
21 number;  
22 (2) full mailing address; and  
23 (3) educational background and training, including  
24 basic health professions degree, school name and location of basic  
25 health professions degree, and graduation year for basic health  
26 professions degree, and, as applicable, highest professional  
27 degree obtained, related professional school name and location, and

1 related graduation year.

2 (c-1) The Department of Information Resources, through the  
3 state electronic Internet portal and in consultation with the  
4 department [~~council~~] and the Health Professions Council, shall add  
5 the following fields on an application or renewal form for a  
6 license, certificate, or registration for a person subject to  
7 Subsection (c-2):

- 8 (1) date and place of birth;
- 9 (2) sex;
- 10 (3) race and ethnicity;
- 11 (4) location of high school;
- 12 (5) mailing address of primary practice;
- 13 (6) number of hours per week spent at primary practice  
14 location;
- 15 (7) description of primary practice setting;
- 16 (8) primary practice information, including primary  
17 specialty practice, practice location zip code, and county; and
- 18 (9) information regarding any additional practice,  
19 including description of practice setting, practice location zip  
20 code, and county.

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

- 27 (1) include demographics, areas of practice, supply,

1 demand, and migration; and

2           (2) be analyzed to identify trends relating to numbers  
3 and geographical distribution, practice setting, and area of  
4 practice and, to the extent possible, compare those trends with  
5 corresponding national trends.

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

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

- 19           (1) certification, registration, or license number;  
20           (2) issuance date;  
21           (3) method of certification, registration, or  
22 licensure; and  
23           (4) certification, registration, or licensure status.

24           SECTION 33. Section 105.004, Health and Safety Code, is  
25 amended to read as follows:

26           Sec. 105.004. REPORTS. (a) The department [~~council~~] may  
27 use the data collected and analyzed under this chapter to publish



1 reports regarding:

2 (1) the educational and employment trends for health  
3 professions;

4 (2) the supply and demand of health professions; and

5 (3) other issues, as necessary, concerning health  
6 professions in this state.

7 (b) The department [~~council~~] shall publish reports  
8 regarding the data collected and analyzed under this chapter  
9 related to:

10 (1) the educational and employment trends of nursing  
11 professionals;

12 (2) the supply and demand of nursing professionals;  
13 and

14 (3) other issues, as determined necessary by the  
15 department [~~council~~], concerning nursing professionals in this  
16 state.

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

19 Sec. 105.007. CLEARINGHOUSE. (a) As part of the  
20 comprehensive health professions resource center, the department  
21 [~~council~~] shall develop and establish a clearinghouse for health  
22 professionals seeking collaborative practice.

23 (b) The department [~~council~~] may:

24 (1) set and collect a reasonable fee to offset the cost  
25 of complying with this section;

26 (2) solicit, receive, and spend grants, gifts, and  
27 donations from public and private sources to comply with this

1 section; and

2 (3) contract with public or private entities in the  
3 performance of the department's [~~its~~] responsibilities under this  
4 section.

5 SECTION 35. Section 105.008, Health and Safety Code, is  
6 amended by amending Subsections (e) and (h) and adding Subsection  
7 (l) to read as follows:

8 (e) The nursing resource section shall contract with an  
9 independent researcher to develop the research design and conduct  
10 the research. The independent researcher must be selected by a  
11 selection committee composed of:

12 (1) [~~one representative elected by a majority of the~~  
13 ~~nursing advisory committee under Section 104.0155, who is the chair~~  
14 ~~of the selection committee,~~

15 [~~(2)~~] one representative designated by the Texas  
16 Health Care Policy Council;

17 (2) [~~(3)~~] the presiding officer of the Texas Board of  
18 Nursing;

19 (3) [~~(4)~~] one representative of the Texas Higher  
20 Education Coordinating Board, designated by the governor;

21 (4) [~~(5)~~] one representative designated by the Texas  
22 Hospital Association;

23 (5) [~~(6)~~] one representative designated by the Texas  
24 Association of Business; and

25 (6) [~~(7)~~] one representative designated by a clinical  
26 competency assessment program that meets the requirements of  
27 Section 301.157(d-8), Occupations Code [~~, and~~

1           ~~[(8) the nurse researcher member of the nursing~~  
2 ~~advisory committee under Section 104.0155].~~

3           (h) The executive commissioner of the Health and Human  
4 Services Commission ~~[nursing advisory committee formed under~~  
5 ~~Section 104.0155]~~ shall oversee ~~[serve as the oversight committee~~  
6 ~~for]~~ the study.

7           (1) This section expires December 31, 2017.

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

10          Sec. 105.009. APPLICATION OF SUNSET ACT TO CENTER. (a) The  
11 comprehensive health professions resource center created by  
12 Section 105.002 is subject to review under Chapter 325, Government  
13 Code (Texas Sunset Act), as if it were a state agency subject to  
14 review under that chapter. If the center is not continued in  
15 existence in accordance with that chapter, the center is abolished  
16 and this chapter expires September 1, 2021.

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

21          SECTION 37. Chapter 112, Health and Safety Code, is amended  
22 by adding Section 112.015 to read as follows:

23          Sec. 112.015. SUNSET PROVISION. The Border Health  
24 Foundation is subject to Chapter 325, Government Code (Texas Sunset  
25 Act). Unless continued in existence as provided by that chapter,  
26 the foundation is abolished and this chapter expires September 1,  
27 2021.

1 SECTION 38. The heading to Chapter 114, Health and Safety  
2 Code, is amended to read as follows:

3 CHAPTER 114. [~~INTERAGENCY~~] OBESITY COORDINATION EFFORT [~~COUNCIL~~]

4 SECTION 39. Section 114.001, Health and Safety Code, is  
5 amended to read as follows:

6 Sec. 114.001. DEFINITION. In this chapter, "institution of  
7 higher education" has the meaning assigned by Section 61.003,  
8 Education Code [~~"council" means the interagency obesity council~~  
9 ~~created by this chapter~~].

10 SECTION 40. Section 114.005, Health and Safety Code, is  
11 amended to read as follows:

12 Sec. 114.005. REVIEW OF AGENCY PROGRAMS. The institutions  
13 of higher education that receive state money for obesity research  
14 [~~council~~] shall jointly review the status of the programs of the  
15 Department of Agriculture, the Department of State Health Services,  
16 and the Texas Education Agency that promote better health and  
17 nutrition and prevent obesity among children and adults in this  
18 state.

19 SECTION 41. Sections 114.007(a) and (b), Health and Safety  
20 Code, are amended to read as follows:

21 (a) Not later than January 15 of each even-numbered  
22 [~~odd-numbered~~] year, the institutions of higher education  
23 performing the review under Section 114.005 [~~the council~~] shall  
24 jointly submit a report to the governor, the lieutenant governor,  
25 and the speaker of the house of representatives on the activities of  
26 the institutions [~~council~~] under Section [~~Sections~~] 114.005 [~~and~~  
27 ~~114.006~~] during the preceding two calendar years.

1 (b) A report submitted by the institutions of higher  
2 education [~~council~~] under Subsection (a) must include the following  
3 information regarding discussions of agency programs under Section  
4 114.005:

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

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

10 (3) a report of the progress made by taking these steps  
11 in reaching each program's goals;

12 (4) the areas of improvement that are needed in each  
13 program; and

14 (5) recommendations for future goals or legislation.

15 SECTION 42. Section 115.012, Health and Safety Code, as  
16 added by Chapters 835 (S.B. 1824) and 1133 (H.B. 2196), Acts of the  
17 81st Legislature, Regular Session, 2009, is amended to read as  
18 follows:

19 Sec. 115.012. SUNSET PROVISION. The Interagency Task Force  
20 for Children With Special Needs is subject to Chapter 325,  
21 Government Code (Texas Sunset Act). Unless continued in existence  
22 as provided by that chapter, the task force is abolished and this  
23 chapter expires September 1, 2021 [~~2015~~].

24 SECTION 43. Section 221.005(b), Health and Safety Code, is  
25 amended to read as follows:

26 (b) This chapter does not exempt a corporation or user from  
27 compliance with Chapter [~~104-er~~] 225.

1 SECTION 44. Section 222.022(1), Health and Safety Code, is  
2 amended to read as follows:

3 (1) "Health care facility" means a public or private  
4 hospital, skilled nursing facility, intermediate care facility,  
5 ambulatory surgical center, family planning clinic that performs  
6 ambulatory surgical procedures, rural or urban health initiative  
7 clinic, end stage renal disease facility, or inpatient  
8 rehabilitation facility. The term does not include the office of  
9 physicians or practitioners of the healing arts practicing  
10 individually or in groups or [~~has the meaning assigned by Section~~  
11 ~~104.002, except that the term does not include~~] a chemical  
12 dependency treatment facility licensed by the Department of State  
13 Health Services [~~Texas Commission on Alcohol and Drug Abuse~~].

14 SECTION 45. Section 311.033(d), Health and Safety Code, is  
15 amended to read as follows:

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

19 SECTION 46. Subchapter C, Chapter 311, Health and Safety  
20 Code, is amended by adding Section 311.0331 to read as follows:

21 Sec. 311.0331. FAILURE TO SUBMIT DATA; CIVIL PENALTY. (a)  
22 If the department does not receive necessary data from a hospital as  
23 required by Section 311.033, the department shall send to the  
24 hospital a notice requiring the hospital to submit the data not  
25 later than the 30th day after the date on which the hospital  
26 receives the notice.

27 (b) A hospital that does not submit the data during the

1 period determined under Subsection (a) is subject to a civil  
2 penalty of not more than \$500 for each day after the period that  
3 hospital fails to submit the data.

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

7 SECTION 47. Section 577.016(a), Health and Safety Code, is  
8 amended to read as follows:

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

- 12 (1) department rules;
- 13 (2) this subtitle; or
- 14 (3) Chapter [~~Chapters 104 and~~] 225.

15 SECTION 48. Section 1001.071, Health and Safety Code, is  
16 amended to read as follows:

17 Sec. 1001.071. GENERAL POWERS AND DUTIES OF DEPARTMENT  
18 RELATED TO HEALTH CARE. The department is responsible for  
19 administering human services programs regarding the public health,  
20 including:

- 21 (1) implementing the state's public health care  
22 delivery programs under the authority of the department;
- 23 (2) administering state health facilities, hospitals,  
24 and health care systems;
- 25 (3) developing and providing health care services, as  
26 directed by law;
- 27 (4) providing for the prevention and control of

1 communicable diseases;

2 (5) providing public education on health-related  
3 matters, as directed by law;

4 (6) compiling, collecting, and reporting  
5 health-related information, as directed by law;

6 (7) acting as the lead agency for implementation of  
7 state policies regarding the human immunodeficiency virus and  
8 acquired immunodeficiency syndrome and administering programs  
9 related to the human immunodeficiency virus and acquired  
10 immunodeficiency syndrome;

11 (8) investigating the causes of injuries and methods  
12 of prevention;

13 (9) administering a grant program to provide  
14 appropriated money to counties, municipalities, public health  
15 districts, and other political subdivisions for their use to  
16 provide or pay for essential public health services;

17 (10) administering the registration of vital  
18 statistics;

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

22 (12) implementing established standards and  
23 procedures for the management and control of sanitation and for  
24 health protection measures;

25 (13) enforcing regulations regarding radioactive  
26 materials;

27 (14) enforcing regulations regarding food, bottled



1 and vended drinking water, drugs, cosmetics, and health devices;

2 (15) enforcing regulations regarding food service  
3 establishments, retail food stores, mobile food units, and roadside  
4 food vendors; and

5 (16) enforcing regulations controlling hazardous  
6 substances in households and workplaces.

7 SECTION 49. Chapter 1001, Health and Safety Code, is  
8 amended by adding Subchapter G to read as follows:

9 SUBCHAPTER G. SUBMISSION AND COLLECTION OF HEALTH CARE DATA

10 Sec. 1001.171. DEFINITION. In this subchapter, "rural  
11 provider" means a provider:

12 (1) located in a county:

13 (A) with a population of 35,000 or less; or

14 (B) with a population of more than 35,000, that  
15 has 100 or fewer licensed hospital beds, and that is not located in  
16 an area that is delineated as an urbanized area by the United States  
17 Census Bureau; and

18 (2) that is not a state-owned hospital or a hospital  
19 that is managed or owned, directly or indirectly, by an individual,  
20 association, partnership, corporation, or other legal entity that  
21 owns or manages one or more other hospitals.

22 Sec. 1001.172. DATA SUBMISSION AND COLLECTION. (a) The  
23 department may collect and, except as provided by Subsections (c)  
24 and (d), providers shall submit to the department or another entity  
25 as determined by the department all data required by this section.  
26 The data must be collected according to uniform submission formats,  
27 coding systems, and other technical specifications necessary to

1 make the incoming data substantially valid, consistent,  
2 compatible, and manageable using electronic data processing, if  
3 available.

4 (b) The executive commissioner shall adopt rules to  
5 implement the data submission requirements imposed by Subsection  
6 (a) in appropriate stages to allow for the development of efficient  
7 systems for the collection and submission of the data. A rule  
8 adopted by the executive commissioner that requires submission of a  
9 data element that was not required to be submitted before adoption  
10 of the rule:

11 (1) may not take effect before the 90th day after the  
12 date the rule is adopted; and

13 (2) must take effect not later than the first  
14 anniversary after the date the rule is adopted.

15 (c) A rural provider may provide the data required by this  
16 subchapter.

17 (d) A hospital may provide the data required by this  
18 subchapter if the hospital:

19 (1) is exempt from state franchise, sales, ad valorem,  
20 or other state or local taxes; and

21 (2) does not seek or receive reimbursement for  
22 providing health care services to patients from any source,  
23 including:

24 (A) the patient or any person legally obligated  
25 to support the patient;

26 (B) a third-party payor; and

27 (C) Medicaid, Medicare, or any other federal,

1 state, or local program for indigent health care.

2 (e) The department may not collect data from:

3 (1) an individual physician; or

4 (2) except to the extent the entity owns and operates a  
5 health care facility in this state, an entity that is composed  
6 entirely of physicians and that is:

7 (A) formed under Title 7, Business Organizations  
8 Code;

9 (B) a professional association organized under  
10 the former Texas Professional Association Act (Article 1528f,  
11 Vernon's Texas Civil Statutes) or formed under the Texas  
12 Professional Association Law, as described by Section 1.008,  
13 Business Organizations Code;

14 (C) a limited liability partnership organized  
15 under former Section 3.08, Texas Revised Partnership Act (Article  
16 6132b-3.08, Vernon's Texas Civil Statutes) or described by  
17 Subchapter J, Chapter 152, Business Organizations Code; or

18 (D) a limited liability company organized under  
19 the former Texas Limited Liability Company Act (Article 1528n,  
20 Vernon's Texas Civil Statutes) or formed under the Texas Limited  
21 Liability Company Law, as described by Section 1.008, Business  
22 Organizations Code.

23 (e-1) Subsection (e) does not prohibit the release of data  
24 about physicians using uniform physician identifiers collected  
25 from a health care facility under this subchapter.

26 (f) The department is the single collection point for the  
27 receipt of data from providers. The department may transfer

1 collection of any data required to be collected by the department  
2 under any other law to the statewide health care data collection  
3 system.

4 (g) The department may not require a provider to submit data  
5 more frequently than quarterly. A provider may submit data more  
6 frequently than quarterly.

7 (h) The department shall coordinate data collection with  
8 the data collection formats used by federally qualified health  
9 centers. To satisfy the requirements of this subchapter:

10 (1) a federally qualified health center shall submit  
11 annually to the department a copy of the Medicaid cost report of  
12 federally qualified health centers; and

13 (2) a provider receiving federal funds under 42 U.S.C.  
14 Section 254b, 254c, or 256 shall submit annually to the department a  
15 copy of the Bureau of Common Reporting Requirements data report  
16 developed by the United States Public Health Service.

17 (i) The department shall coordinate data collection with  
18 the data submission formats used by hospitals and other providers.  
19 The department shall accept data in the format developed by the  
20 American National Standards Institute or its successors or other  
21 nationally accepted standardized forms that hospitals and other  
22 providers use for other complementary purposes.

23 (j) The executive commissioner by rule shall develop  
24 reasonable alternate data submission procedures for providers that  
25 do not possess electronic data processing capacity.

26 (k) The department shall collect health care data elements  
27 relating to payer type, the racial and ethnic background of

1 patients, and the use of health care services by consumers. The  
2 department shall prioritize data collection efforts on inpatient  
3 and outpatient surgical and radiological procedures from  
4 hospitals, ambulatory surgical centers, and freestanding radiology  
5 centers.

6 (1) To the extent feasible, the department shall obtain from  
7 public records the information that is available from those  
8 records.

9 (m) A provider of a health benefit plan shall annually  
10 submit to the department aggregate data by service area required by  
11 the Health Plan Employer Data and Information Set as operated by the  
12 National Committee for Quality Assurance. The department may  
13 approve the submission of data in accordance with other methods  
14 generally used by the health benefit plan industry. If the Health  
15 Plan Employer Data and Information Set does not generally apply to a  
16 health benefit plan, the department shall require submission of  
17 data in accordance with other methods. This subsection does not  
18 relieve a health care facility that provides services under a  
19 health benefit plan from the requirements of this subchapter.  
20 Information submitted under this section:

21 (1) is subject to Section 1001.174; and

22 (2) is not subject to Section 1001.173.

23 Sec. 1001.173. COLLECTION AND DISSEMINATION OF PROVIDER  
24 QUALITY DATA. (a) Subject to Section 1001.172, the department  
25 shall collect data reflecting provider quality based on a  
26 methodology and review process established in department rules.  
27 The methodology must identify and measure quality standards and

1 adhere to any federal mandates.

2 (b) The department shall study and analyze initial  
3 methodologies for obtaining provider quality data, including  
4 outcome data.

5 (c) Provider quality data for reports shall be published and  
6 made available to the public, on a time schedule the department  
7 considers appropriate.

8 (d) If the department determines that provider quality data  
9 to be published under Subsection (c) does not provide the intended  
10 result or is inaccurate or inappropriate for dissemination, the  
11 department is not required to publish the data or reports based in  
12 whole or in part on the data. This subsection does not affect the  
13 release of public use data in accordance with Section 1001.174 or  
14 the release of information submitted under Section 1001.172(m).

15 (e) The executive commissioner shall adopt rules allowing a  
16 provider to submit concise written comments regarding any specific  
17 provider quality data to be released concerning the provider. The  
18 department shall make the comments available to the public and in an  
19 electronic form accessible through the Internet. The comments  
20 shall be attached to any public release of provider quality data.  
21 Providers shall submit the comments to the department to be  
22 attached to the public release of provider quality data in the same  
23 format as the provider quality data that is to be released.

24 (f) The methodology adopted by the department for measuring  
25 quality shall include case-mix qualifiers, severity adjustment  
26 factors, adjustments for medical education and research, and any  
27 other factors necessary to accurately reflect provider quality.

1 (g) In addition to the requirements of this section, any  
2 release of provider quality data shall comply with Sections  
3 1001.174(g) and (h).

4 (h) A provider quality data report may not identify an  
5 individual physician by name. A provider quality data report must  
6 identify a physician by the uniform physician identifier designated  
7 by the department under Section 1001.174(c).

8 (i) The department shall release provider quality data in an  
9 aggregate form without uniform physician identifiers if:

10 (1) the data relates to a rural provider; or

11 (2) the cell size of the data is less than the minimum  
12 size established by department rule that would enable  
13 identification of an individual patient or physician.

14 Sec. 1001.174. DISSEMINATION OF PUBLIC USE DATA AND  
15 DEPARTMENT PUBLICATIONS. (a) The department shall promptly  
16 provide public use data and data collected in accordance with  
17 Section 1001.172(m) to those requesting it. The public use data  
18 does not include provider quality data prescribed by Section  
19 1001.173 or confidential data prescribed by Section 1001.176.

20 (b) Subject to the restrictions on access to department data  
21 prescribed by Sections 1001.173 and 1001.176, and using the public  
22 use data and other data, records, and matters of record available to  
23 the department, the department shall prepare and issue reports to  
24 the governor, the legislature, and the public as provided by this  
25 section. The department must issue the reports at least annually.

26 (c) Subject to the restrictions on access to department data  
27 prescribed by Sections 1001.173 and 1001.176, the department shall

1 use public use data to prepare and issue reports that provide  
2 information relating to providers, including the incidence rate of  
3 selected medical or surgical procedures. The reports must provide  
4 the data in a manner that identifies individual providers,  
5 including individual physicians, and that identifies and compares  
6 data elements for all providers. An individual physician may not be  
7 identified by name. An individual physician shall be identified by  
8 uniform physician identifiers. The executive commissioner by rule  
9 shall designate the characters to be used as uniform physician  
10 identifiers.

11 (d) The department shall use public use data to prepare and  
12 issue reports that provide information for review and analysis by  
13 the commission relating to services that are provided:

14 (1) in a niche hospital, as that term is defined by  
15 Section 105.002, Occupations Code; and

16 (2) by a physician with an ownership interest in the  
17 niche hospital.

18 (e) Subsection (d) does not apply to an ownership interest  
19 in publicly available shares of a registered investment company,  
20 including a mutual fund, that owns publicly traded equity  
21 securities or debt obligations issued by a niche hospital or an  
22 entity that owns a niche hospital.

23 (f) The department shall adopt procedures to establish the  
24 accuracy and consistency of the public use data before releasing  
25 the public use data to the public.

26 (g) If public use data is requested from the department  
27 about a specific provider, the department shall notify the provider



1 about the release of the data. A provider may not interfere with  
2 the release of the data.

3 (h) A report issued by the department shall include a  
4 reasonable review and comment period for the affected providers  
5 before public release of the report.

6 (i) The executive commissioner shall adopt rules allowing a  
7 provider to submit concise written comments regarding any specific  
8 public use data to be released concerning the provider. The  
9 department shall make the comments available to the public and in an  
10 electronic form accessible through the Internet. The comments  
11 shall be attached to any public release of the public use data. A  
12 provider shall submit the comments to the department to be attached  
13 to the public release of public use data in the same format as the  
14 public use data that is to be released.

15 (j) Electronic media containing public use data and  
16 provider quality reports that is released to the public must  
17 include general consumer education material, including an  
18 explanation of the benefits and limitations of the information  
19 provided in the public use data and provider quality reports.

20 (k) The department shall release public use data in an  
21 aggregate form without uniform physician identifiers if:

- 22 (1) the data relates to a rural provider; or  
23 (2) the cell size of the data is less than the minimum  
24 size established by department rule that would enable  
25 identification of an individual patient or physician.

26 Sec. 1001.175. COMPUTER ACCESS TO DATA. (a) The department  
27 shall provide for computer-to-computer access to the public use

1 data. A report must maintain patient confidentiality as provided  
2 by Section 1001.176.

3 (b) The department may charge a person requesting public use  
4 or provider quality data a fee for the data. The fee:

5 (1) may reflect the quantity of information provided  
6 and the expense incurred by the department in collecting and  
7 providing the data; and

8 (2) must be set at a level that will raise revenue  
9 sufficient for the department's operations under this subchapter.

10 (c) The department may not charge a fee for providing public  
11 use data to a state agency.

12 Sec. 1001.176. CONFIDENTIALITY AND GENERAL ACCESS TO DATA.

13 (a) The department and commission shall use data received by the  
14 department under this subchapter for the benefit of the public.  
15 Subject to specific limitations established by this subchapter and  
16 executive commissioner rule, the department shall make  
17 determinations on requests for information in favor of access.

18 (b) The executive commissioner by rule shall designate the  
19 characters to be used as uniform patient identifiers. The basis for  
20 assignment of the characters and the manner in which the characters  
21 are assigned are confidential.

22 (c) Unless specifically authorized by this subchapter, the  
23 department may not release and a person may not gain access to any  
24 data obtained under this subchapter that:

25 (1) could reasonably be expected to reveal the  
26 identity of a patient;

27 (2) could reasonably be expected to reveal the

1 identity of a physician;

2 (3) discloses a provider discount or a differential  
3 between payments and billed charges;

4 (4) relates to actual payments to an identified  
5 provider made by a payer; or

6 (5) is submitted to the department in a uniform  
7 submission format that is not included in the public use data set  
8 established, except in accordance with Section 1001.177.

9 (d) Except as provided by this section, all data collected  
10 and used by the department under this subchapter is subject to the  
11 confidentiality provisions and criminal penalties of:

12 (1) Section 81.103;

13 (2) Section 311.037; and

14 (3) Section 159.002, Occupations Code.

15 (e) Data on patients and compilations produced from the data  
16 collected that identifies a patient is not:

17 (1) subject to discovery, subpoena, or any other means  
18 of legal compulsion for release to any person or entity except as  
19 provided by this section; or

20 (2) admissible in any civil, administrative, or  
21 criminal proceeding.

22 (f) Data on physicians and compilations produced from the  
23 data collected that identifies a physician 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 (g) Unless specifically authorized by this subchapter, the  
3 department may not release data elements in a manner that will  
4 reveal the identity of a patient or a physician.

5 (h) Subsections (c) and (g) do not prohibit the release of a  
6 uniform physician identifier in conjunction with:

7 (1) a provider quality report in accordance with  
8 Section 1001.173; or

9 (2) associated public use data in accordance with  
10 Section 1001.174.

11 (i) Notwithstanding any other law and except as provided by  
12 this section, the department may provide information made  
13 confidential by this section to the commission or a health and human  
14 services agency as defined by Section 531.001, Government Code,  
15 provided that the receiving agency has appropriate controls in  
16 place to ensure the confidentiality of any personal information  
17 contained in the information shared by the department under this  
18 subsection is subject to the limits of further disclosure described  
19 by Subsection (f).

20 (j) The executive commissioner by rule shall develop and  
21 implement a mechanism to comply with Subsections (c)(1) and (2).

22 (k) The department may disclose data collected under this  
23 subchapter that is not included in public use data to any department  
24 or commission program if the disclosure is reviewed and approved by  
25 the institutional review board under Section 1001.177.

26 (l) Confidential data collected under this subchapter that  
27 is disclosed to a department or commission program remains subject

1 to the confidentiality provisions of this subchapter and other  
2 applicable law. The department shall identify the confidential  
3 data that is disclosed to a program under Subsection (k). The  
4 program shall maintain the confidentiality of the disclosed  
5 confidential data.

6 (m) The following provisions do not apply to the disclosure  
7 of data to a department or commission program:

- 8 (1) Section 81.103;
- 9 (2) Sections 1001.173(g) and (h);
- 10 (3) Sections 1001.174(g) and (h);
- 11 (4) Section 311.037; and
- 12 (5) Section 159.002, Occupations Code.

13 (n) Nothing in this section authorizes the disclosure of  
14 physician identifying data.

15 Sec. 1001.177. INSTITUTIONAL REVIEW BOARD. (a) The  
16 department shall establish an institutional review board to review  
17 and approve requests for access to data not contained in public use  
18 data.

19 (b) The members of the institutional review board must have  
20 experience and expertise in ethics, patient confidentiality, and  
21 health care data.

22 (c) To assist the institutional review board in determining  
23 whether to approve a request for information, the executive  
24 commissioner shall adopt rules similar to the federal Centers for  
25 Medicare and Medicaid Services' guidelines on releasing data.

26 (d) A request for information, other than public use data,  
27 must be made on the form prescribed by the department.

1       (e) Any approval to release information under this section  
2 must require that the confidentiality provisions of this subchapter  
3 be maintained and that any subsequent use of the information  
4 conform to the confidentiality provisions of this subchapter.

5       Sec. 1001.1775. LIST OF PURCHASERS OR RECIPIENTS OF DATA.

6 The department shall post on the department's Internet website a  
7 list of each entity that purchases or receives data collected under  
8 this subchapter.

9       Sec. 1001.178. CIVIL PENALTY. (a) A person who knowingly  
10 or negligently releases data in violation of this subchapter is  
11 liable for a civil penalty of not more than \$10,000.

12       (b) A person who fails to supply available data under  
13 Sections 1001.172 and 1001.173 is liable for a civil penalty of not  
14 less than \$1,000 or more than \$10,000 for each violation.

15       (c) If requested by the department, the attorney general  
16 shall enforce this subchapter.

17       (d) The venue of an action brought under this section is in  
18 Travis County.

19       (e) A civil penalty recovered in a suit instituted by the  
20 attorney general under this subchapter shall be deposited in the  
21 general revenue fund to the credit of the health care information  
22 account.

23       Sec. 1001.179. CRIMINAL PENALTY. (a) A person commits an  
24 offense if the person:

25               (1) knowingly accesses data in violation of this  
26 subchapter; or

27               (2) releases data, with criminal negligence, in

1 violation of this subchapter.

2 (b) An offense under this section is a state jail felony.

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

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

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

11 SECTION 50. Section 56.3075(a), Education Code, is amended  
12 to read as follows:

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

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

26 (2) has completed at least one-half of the work toward  
27 a degree or certificate that fulfills the educational requirement

1 for licensure or certification; and

2 (3) meets all the requirements to receive a grant  
3 award under Section 56.307.

4 SECTION 51. Section 56.4075(a), Education Code, is amended  
5 to read as follows:

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

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

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

19 (3) meets all the requirements to receive a grant  
20 award under Section 56.407.

21 SECTION 52. Section 501.253(a), Insurance Code, is amended  
22 to read as follows:

23 (a) The office is entitled to information that is  
24 confidential under a law of this state, including Section 843.006  
25 of this code, Subchapter G, Chapter 1001 [~~108~~], Health and Safety  
26 Code, and Chapter 552, Government Code.

27 SECTION 53. Section 301.157(h), Occupations Code, is



1 amended to read as follows:

2 (h) The board, in collaboration with the nursing educators,  
3 the Texas Higher Education Coordinating Board, and the Department  
4 of State Health Services [~~Texas Health Care Policy Council~~], shall  
5 implement, monitor, and evaluate a plan for the creation of  
6 innovative nursing education models that promote increased  
7 enrollment in this state's nursing programs.

8 SECTION 54. (a) The following laws are repealed:

- 9 (1) Chapter 104, Health and Safety Code;  
10 (2) Chapter 108, Health and Safety Code; and  
11 (3) Sections 114.002, 114.003, 114.004, 114.006,  
12 114.007(c), and 114.008, Health and Safety Code.

13 (b) Effective September 1, 2014, the following laws are  
14 repealed:

- 15 (1) Section 1001.171, Health and Safety Code, as added  
16 by this Act; and  
17 (2) Section 1001.172(c), Health and Safety Code, as  
18 added by this Act.

19 SECTION 55. On September 1, 2013:

20 (1) the statewide health coordinating council is  
21 abolished;

22 (2) all property in the custody of the statewide  
23 health coordinating council is transferred to the Department of  
24 State Health Services; and

25 (3) all contracts, leases, rights, and obligations of  
26 the statewide health coordinating council are transferred to the  
27 Department of State Health Services.

1 SECTION 56. On September 1, 2013:

2 (1) the Interagency Obesity Council is abolished;

3 (2) all property in the custody of the Interagency  
4 Obesity Council is transferred to the Department of State Health  
5 Services; and

6 (3) all contracts, leases, rights, and obligations of  
7 the Interagency Obesity Council are transferred to the Department  
8 of State Health Services.

9 SECTION 57. Except as otherwise provided by this Act, this  
10 Act takes effect September 1, 2013.