

Amend SB 200 by adding the following appropriately numbered SECTIONS to the bill and renumbering subsequent SECTIONS of the bill accordingly.

SECTION 1. (a) The Health and Human Services Commission shall develop a strategic plan to significantly reduce morbidity and mortality from human papillomavirus-associated cancer.

(b) In developing the strategic plan, the Health and Human Services Commission shall collaborate with the Department of State Health Services and the Cancer Prevention and Research Institute of Texas and may convene any necessary workgroups. The members of a workgroup may include:

(1) health care providers specializing in human papillomavirus-associated cancer prevention, screening, treatment, or research;

(2) physicians specializing in primary care, pediatrics, or obstetrics and gynecology;

(3) mid-level health care practitioners;

(4) cancer epidemiologists;

(5) representatives of general academic teaching institutions as defined by Section 61.003, Education Code, medical and dental units as defined by Section 61.003, Education Code, and medical schools as defined by Section 61.501, Education Code;

(6) middle school, high school, or college health educators;

(7) human papillomavirus-associated cancer survivors;

(8) representatives from geographic areas or other population groups at higher risk of human papillomavirus-associated cancer;

(9) public advocates concerned with issues related to vaccine-preventable diseases;

(10) representatives of community-based and faith-based organizations involved in providing education, awareness, or support relating to human papillomavirus-associated cancer; or

(11) other people the department determines are necessary.

(c) In developing the strategic plan, the Department of

State Health Services shall:

(1) identify barriers to effective prevention, screening, and treatment for human papillomavirus-associated cancer, including specific barriers affecting providers and patients;

(2) identify methods, other than a mandate, to increase the number of people vaccinated against human papillomavirus;

(3) identify methods to increase use of evidence-based screening to enhance the number of people screened regularly for human papillomavirus-associated cancer;

(4) review current technologies and best practices for human papillomavirus-associated cancer screening;

(5) review technology available to diagnose and prevent infection by human papillomavirus;

(6) develop methods for creating partnerships with public and private entities to increase awareness of human papillomavirus-associated cancer and of the importance of vaccination education and regular screening;

(7) review current prevention, screening, treatment, and related activities in this state and identify areas in which the services for those activities are lacking;

(8) estimate the annual direct and indirect state health care costs attributable to human papillomavirus-associated cancers;

(9) identify actions necessary to increase vaccination and screening rates and reduce the morbidity and mortality from human papillomavirus-associated cancer and establish a schedule for implementing those actions; and

(10) make recommendations to the legislature on policy changes and funding needed to implement the strategic plan.

(d) Not later than December 31, 2016, the Health and Human Services Commission shall deliver to the governor and members of the legislature the strategic plan and recommendations on goal implementation and schedule compliance related to the strategic plan.

(e) This section expires January 1, 2017.

SECTION 2. This Act takes effect September 1, 2015.