BILL ANALYSIS

C.S.H.B. 3404 By: Thompson, Senfronia Defense & Veterans' Affairs Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties note that in the United States, there are over two million veterans who served in the recent conflicts in Iraq and Afghanistan. Relevant data shows that approximately 300,000 of those veterans currently suffer from post-traumatic stress disorder and other co-occurring disorders. The cost of care for these veterans over two years is estimated to be between \$4 billion and \$6.2 billion. Interested parties note that Houston and the surrounding area is home to approximately 370,000 veterans, of whom approximately 22,000 were deployed in the conflicts in Iraq or Afghanistan. In addition, Texas is home to approximately 25 percent of all veterans nationwide. C.S.H.B. 3404 seeks to provide a study regarding effective and efficient treatment of Texas veterans.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

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. 3404 requires the Health and Human Services Commission (HHSC) to conduct a study on the benefits of providing integrated care to veterans with post-traumatic stress disorder. The bill authorizes HHSC, in conducting the study, to coordinate with a university with expertise in behavioral health or post-traumatic stress disorder. The bill requires the study to evaluate the benefits of involving family members in the treatment of a veteran diagnosed with post-traumatic stress disorder and using a standardized comprehensive trauma and post-traumatic stress disorder assessment to identify and target evidence-based treatment services to provide integrated care for such a veteran. The bill requires HHSC, not later than December 1, 2016, to submit a report containing the results of the study to the governor, lieutenant governor, and speaker of the house of representatives. The bill requires the report to include the number of people served and the type of integrated care provided through the study. The bill's provisions expire September 1, 2017.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 3404 may differ from the original in minor or nonsubstantive ways, the

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following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

SECTION 1. (a) The Health and Human Services Commission shall conduct a study on the benefits of providing integrated care to veterans with post-traumatic stress disorder. The Health and Human Services Commission may coordinate with a university with expertise in behavioral health or post-traumatic stress disorder. The study must evaluate the benefits of:

- (1) using a standardized comprehensive trauma and post-traumatic stress disorder assessment to identify and target evidencebased treatment services to provide integrated care for veterans diagnosed with post-traumatic stress disorder; and
- (2) involving family members in the treatment of a veteran diagnosed with post-traumatic stress disorder.
- (b) Not later than December 1, 2016, the Health and Human Services Commission shall submit a report containing the results of the study conducted under Subsection (a) of this section to the governor, lieutenant governor, and speaker of the house of representatives. The report must include the number of people served and the type of integrated care provided through the study.

SECTION 2. This Act expires September 1, 2019.

SECTION 3. This Act takes effect September 1, 2015.

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Substantially the same as introduced version.

SECTION 2. This Act expires September 1, 2017.

SECTION 3. Same as introduced version.

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