

1-1 By: Schwertner, et al. S.B. No. 538
 1-2 (In the Senate - Filed February 10, 2015; February 18, 2015,
 1-3 read first time and referred to Committee on Health and Human
 1-4 Services; March 23, 2015, reported adversely, with favorable
 1-5 Committee Substitute by the following vote: Yeas 8, Nays 1;
 1-6 March 23, 2015, sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10	X			
1-11	X			
1-12		X		
1-13	X			
1-14	X			
1-15	X			
1-16	X			
1-17	X			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 538 By: Schwertner

1-19 A BILL TO BE ENTITLED
 1-20 AN ACT

1-21 relating to the control of infectious diseases.
 1-22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
 1-23 SECTION 1. Chapter 418, Government Code, is amended by
 1-24 adding Subchapter B-1 to read as follows:
 1-25 SUBCHAPTER B-1. STATE OF INFECTIOUS DISEASE EMERGENCY
 1-26 Sec. 418.031. DECLARATION OF STATE OF INFECTIOUS DISEASE
 1-27 EMERGENCY. (a) The governor by executive order or proclamation
 1-28 may declare a state of infectious disease emergency if the
 1-29 governor, in consultation with the commissioner of state health
 1-30 services and the division, finds that an infectious disease poses a
 1-31 serious and imminent risk to the health and safety of the citizens
 1-32 of this state. An infectious disease poses a serious and imminent
 1-33 risk under this subsection if the commissioner determines that:
 1-34 (1) the disease has resulted or is likely to result in
 1-35 severe or life-threatening illness or death for those infected with
 1-36 the disease; or
 1-37 (2) the disease is not contained by current public
 1-38 health and medical interventions and is resulting in a high rate of
 1-39 morbidity or mortality.
 1-40 (b) An executive order or proclamation issued under this
 1-41 section must include the name of the infectious disease and a
 1-42 description of the threat to public health and safety.
 1-43 (c) An executive order or proclamation shall be
 1-44 disseminated promptly by means intended to bring its contents to
 1-45 the attention of the general public. An order or proclamation
 1-46 shall be filed promptly with the division and the secretary of
 1-47 state.
 1-48 Sec. 418.032. DURATION OF STATE OF EMERGENCY. (a) Except
 1-49 as provided by this section, a state of emergency under this
 1-50 subchapter expires 30 days after the date the executive order or
 1-51 proclamation declaring the state of infectious disease emergency is
 1-52 issued.
 1-53 (b) The governor may set a shorter period for the infectious
 1-54 disease state of emergency if the governor, in consultation with
 1-55 the commissioner of state health services and the division,
 1-56 determines that a shorter period is adequate and appropriate for
 1-57 the control of the infectious disease.
 1-58 (c) The governor may, by executive order or proclamation,
 1-59 terminate the state of infectious disease emergency if the
 1-60 governor, in consultation with the commissioner of state health

2-1 services and the division, finds that there is no longer a serious
 2-2 and imminent risk to the health and safety of the citizens of this
 2-3 state.

2-4 (d) The governor may, by executive order or proclamation,
 2-5 declare successive states of emergency, each not exceeding 30 days,
 2-6 if the governor, in consultation with the commissioner of state
 2-7 health services and the division, finds that the extension of the
 2-8 infectious disease state of emergency is necessary to protect the
 2-9 health and safety of the citizens of this state.

2-10 Sec. 418.033. EFFECT OF DECLARATION. (a) An executive
 2-11 order or proclamation declaring a state of infectious disease
 2-12 emergency gives the commissioner of state health services authority
 2-13 for all state and local public health policy decisions, procedures,
 2-14 and disease control measures necessary to contain the infectious
 2-15 disease emergency. The commissioner shall communicate with and
 2-16 consider input from local health authorities.

2-17 (b) The division shall issue specific statewide
 2-18 preparedness guidelines and procedures for local health and
 2-19 emergency management authorities in the case of a state of
 2-20 infectious disease emergency.

2-21 Sec. 418.034. RULES. The executive commissioner of the
 2-22 Health and Human Services Commission or the public safety director
 2-23 of the department may adopt rules necessary for carrying out the
 2-24 purposes of this subchapter.

2-25 SECTION 2. Section 81.008, Health and Safety Code, is
 2-26 amended to read as follows:

2-27 Sec. 81.008. COMMUNICABLE DISEASE IN ANIMALS; EXCHANGE OF
 2-28 INFORMATION. (a) If the department or a local health authority
 2-29 has reasonable cause to believe that an animal has been infected
 2-30 with, has been exposed to, or is the carrier of a communicable
 2-31 disease, the department, local health authority, or Texas Animal
 2-32 Health Commission may obtain a sample of the animal's blood or other
 2-33 bodily fluid to perform a test for an infectious disease without:

2-34 (1) the permission of the animal's owner; or

2-35 (2) a control order under Section 81.084.

2-36 (b) The Texas Animal Health Commission and the Texas A&M
 2-37 [University] Veterinary Medical Diagnostic Laboratory shall each
 2-38 adopt by rule a memorandum of understanding with the department to
 2-39 exchange information on communicable diseases in animals.

2-40 SECTION 3. Section 81.046, Health and Safety Code, is
 2-41 amended by amending Subsection (b) and adding Subsection (f-1) to
 2-42 read as follows:

2-43 (b) Reports, records, and information relating to cases or
 2-44 suspected cases of diseases or health conditions are not public
 2-45 information under Chapter 552, Government Code, and may not be
 2-46 released or made public on subpoena or otherwise except as provided
 2-47 by Subsections (c), (d), ~~and~~ (f), and (f-1).

2-48 (f-1) The department may release to a first responder, as
 2-49 defined by Section 421.095, Government Code, or a local health
 2-50 authority a person's name and the address of the person's current
 2-51 location if:

2-52 (1) the department reasonably believes that the person
 2-53 is infected with, has been exposed to, or is the carrier of a
 2-54 communicable disease; and

2-55 (2) the communicable disease poses a serious health
 2-56 risk to first responders that do not wear the appropriate personal
 2-57 protective equipment.

2-58 SECTION 4. Section 81.083, Health and Safety Code, is
 2-59 amended by amending Subsections (a), (b), and (e) and adding
 2-60 Subsection (d-1) to read as follows:

2-61 (a) Any person, including a physician, who examines or
 2-62 treats an individual who has a communicable disease, or the
 2-63 department or a local health authority, shall instruct the
 2-64 individual about:

2-65 (1) measures for preventing reinfection and spread of
 2-66 the disease; and

2-67 (2) the necessity for treatment until the individual
 2-68 is cured or free from the infection.

2-69 (b) If the department or a health authority has reasonable

3-1 cause to believe that an individual is infected [~~ill~~] with, has been
 3-2 exposed to, or is the carrier of a communicable disease, the
 3-3 department or health authority may order the individual, or the
 3-4 individual's parent, legal guardian, or managing conservator if the
 3-5 individual is a minor, to implement control measures that are
 3-6 reasonable and necessary to prevent the introduction,
 3-7 transmission, and spread of the disease in this state. The order
 3-8 may require the individual to remain in a health care facility or
 3-9 other location, including the individual's home.

3-10 (d-1) A peace officer, including a sheriff or constable, may
 3-11 use reasonable force to:

3-12 (1) secure an individual subject to an order issued
 3-13 under Subsection (b); and

3-14 (2) except as directed by the department or the health
 3-15 authority, prevent the individual from leaving the facility or
 3-16 other location designated in the order.

3-17 (e) An individual may be subject to emergency detention
 3-18 under Section 81.0891 or court orders under Subchapter G if the
 3-19 individual is infected with, has been exposed to, or is the carrier
 3-20 of or is reasonably suspected of being infected with, having been
 3-21 exposed to, or being the carrier of a communicable disease that
 3-22 presents an immediate threat to the public health and:

3-23 (1) the individual, or the individual's parent, legal
 3-24 guardian, or managing conservator if the individual is a minor,
 3-25 does not comply with the written orders of the department or a
 3-26 health authority under this section; or

3-27 (2) a public health disaster exists, regardless of
 3-28 whether the department or health authority has issued a written
 3-29 order and the individual has indicated that the individual will not
 3-30 voluntarily comply with control measures.

3-31 SECTION 5. Section 81.084(j), Health and Safety Code, is
 3-32 amended to read as follows:

3-33 (j) In this section, "property" means:

3-34 (1) an object;
 3-35 (2) a parcel of land; [~~or~~]
 3-36 (3) an animal; or
 3-37 (4) a structure [~~, animal,~~] or other property on a
 3-38 parcel of land.

3-39 SECTION 6. Sections 81.086(b), (c), and (i), Health and
 3-40 Safety Code, are amended to read as follows:

3-41 (b) If the department or health authority has reasonable
 3-42 cause to believe that a carrier or conveyance has departed from or
 3-43 traveled through an area infected or contaminated with a
 3-44 communicable disease or that an individual transported by the
 3-45 carrier or conveyance is infected with, has been exposed to, or is
 3-46 the carrier of a communicable disease, the department or health
 3-47 authority may order the owner, operator, or authorized agent in
 3-48 control of the carrier or conveyance to:

3-49 (1) stop the carrier or conveyance at a port of entry
 3-50 or place of first landing or first arrival in this state; and

3-51 (2) provide information on passengers and cargo
 3-52 manifests that includes the details of:

3-53 (A) any illness suspected of being communicable
 3-54 that occurred during the journey;

3-55 (B) any condition on board the carrier or
 3-56 conveyance during the journey that may lead to the spread of
 3-57 disease; and

3-58 (C) any control measures imposed on the carrier
 3-59 or conveyance, its passengers or crew, or its cargo or any other
 3-60 object on board during the journey.

3-61 (c) The department or health authority may impose necessary
 3-62 technically feasible control measures under Section 81.083 or
 3-63 81.084 to prevent the introduction and spread of communicable
 3-64 disease in this state if the department or health authority, after
 3-65 inspection, has reasonable cause to believe that a carrier or
 3-66 conveyance:

3-67 (1) [~~that~~] has departed from or traveled through an
 3-68 infected or contaminated area and:

3-69 (A) [~~(1)~~] is or may be infected or contaminated

4-1 with a communicable disease; or
 4-2 (B) [~~(2)~~] has cargo or an object on board that is
 4-3 or may be infected or contaminated with a communicable disease; or
 4-4 (2) [~~(3)~~] has an individual on board who is infected
 4-5 with, has been exposed to, or is the carrier of[~~7~~] a communicable
 4-6 disease.

4-7 (i) The department or health authority may require an
 4-8 individual transported by carrier or conveyance who the department
 4-9 or health authority has reasonable cause to believe is infected
 4-10 with, has been exposed to, or is the carrier of a communicable
 4-11 disease to be isolated from other travelers and to disembark with
 4-12 the individual's personal effects and baggage at the first location
 4-13 equipped with adequate investigative and disease control
 4-14 facilities, whether the person is in transit through this state or
 4-15 to an intermediate or ultimate destination in this state. The
 4-16 department or health authority may investigate and, if necessary,
 4-17 isolate or involuntarily hospitalize the individual until the
 4-18 department or health authority approves the discharge as authorized
 4-19 by Section 81.083.

4-20 SECTION 7. Subchapter E, Chapter 81, Health and Safety
 4-21 Code, is amended by adding Sections 81.0891, 81.0892, 81.0893,
 4-22 81.0894, and 81.0895 to read as follows:

4-23 Sec. 81.0891. EMERGENCY DETENTION OF INDIVIDUAL SUBJECT TO
 4-24 CONTROL ORDER. (a) A peace officer, without a warrant, may take an
 4-25 individual into custody if the officer has reason to believe and
 4-26 does believe that:

4-27 (1) the individual is subject to a written control
 4-28 order under Section 81.083 issued in response to a communicable
 4-29 disease that the commissioner of state health services has
 4-30 determined poses a serious and imminent risk to health and safety
 4-31 because the disease:

4-32 (A) has resulted or is likely to result in severe
 4-33 or life-threatening illness or death for those infected with the
 4-34 disease; or

4-35 (B) is not contained by current public health and
 4-36 medical interventions and is resulting in a high rate of morbidity
 4-37 or mortality;

4-38 (2) the individual, or the individual's parent, legal
 4-39 guardian, or managing conservator if the individual is a minor, is
 4-40 not complying with or does not intend to comply with the control
 4-41 order; and

4-42 (3) there is a substantial risk of serious harm to
 4-43 others unless the individual is immediately detained.

4-44 (b) A substantial risk of serious harm to others under
 4-45 Subsection (a)(3) may be demonstrated by:

4-46 (1) a violation of a control order issued in response
 4-47 to a communicable disease described by Subsection (a)(1) by the
 4-48 individual or, if the individual is a minor, the individual's
 4-49 parent, legal guardian, or managing conservator;

4-50 (2) evidence of signs or symptoms of illness
 4-51 consistent with the signs or symptoms of a communicable disease
 4-52 described by Subsection (a)(1), to the extent that the person
 4-53 cannot remain at liberty; or

4-54 (3) information provided to the peace officer by the
 4-55 local health authority that issued the control order or the
 4-56 department.

4-57 (c) The peace officer may form the belief that the
 4-58 individual may be subject to emergency detention under this
 4-59 section:

4-60 (1) on information and belief from the local health
 4-61 authority that issued the control order or the department; or

4-62 (2) on the basis of the condition of the individual or
 4-63 the circumstances under which the individual is found.

4-64 (d) A peace officer who takes an individual into custody
 4-65 under Subsection (a) shall immediately transport or, if the
 4-66 individual's suspected illness may pose a serious health risk to
 4-67 the peace officer, arrange for transportation of the individual to:

4-68 (1) the nearest appropriate health facility, as
 4-69 determined by the department; or

5-1 (2) a location considered suitable by the department
5-2 or local health authority, including the individual's home.

5-3 (e) In determining whether a health facility or location is
5-4 appropriate for detention of a particular individual under
5-5 Subsection (d), the department or local health authority shall, to
5-6 the extent possible while still protecting the public health,
5-7 attempt to keep family units together.

5-8 (f) In determining whether a health facility is appropriate
5-9 for the detention of a person under Subsection (d)(1), the
5-10 department shall consider the facility's capacity and resources and
5-11 whether the facility is designated as a facility for containment
5-12 and treatment of communicable diseases.

5-13 (g) A peace officer who takes an individual into custody
5-14 under Subsection (a) shall immediately inform the individual orally
5-15 in simple, nontechnical terms:

- 5-16 (1) of the reason for the detention;
- 5-17 (2) of the individual's rights under Section 81.0895;

5-18 and
5-19 (3) that a staff member of the health facility, or the
5-20 department or local health authority if the individual is detained
5-21 at a location under Subsection (d)(2), will inform the individual
5-22 of the individual's rights under Section 81.0895 not later than 24
5-23 hours after the time the individual is admitted to the facility or
5-24 detained at the other location, as applicable.

5-25 Sec. 81.0892. PEACE OFFICER'S NOTIFICATION OF DETENTION.

5-26 (a) A peace officer shall immediately file with a health facility,
5-27 or the local health authority or the department if the individual is
5-28 detained at a location under Section 81.0891(d)(2), a notification
5-29 of detention after transporting an individual to that facility or
5-30 location under Section 81.0891.

5-31 (b) The notification of detention must contain:
5-32 (1) a statement that the officer has reason to believe
5-33 and does believe that:

5-34 (A) the individual is the subject of a
5-35 communicable disease control order under Section 81.083 in response
5-36 to a communicable disease described by Section 81.0891(a)(1);

5-37 (B) the individual, or the individual's parent,
5-38 legal guardian, or managing conservator if the individual is a
5-39 minor, is not complying with or does not intend to comply with the
5-40 control order;

5-41 (C) the individual evidences a substantial risk
5-42 of serious harm to others; and

5-43 (D) the risk of harm is imminent unless the
5-44 person is immediately detained;

5-45 (2) a statement that the officer's beliefs are based on
5-46 specific recent behavior, overt acts, attempts, statements, or
5-47 threats that were observed by or reliably reported to the officer;
5-48 and

5-49 (3) a detailed description of the specific behavior,
5-50 overt acts, attempts, statements, or threats and, if applicable,
5-51 the name of the person who reported or observed the behavior, acts,
5-52 attempts, statements, or threats.

5-53 (c) If the individual is detained at a health facility under
5-54 Section 81.0891(d)(1), the facility in which the individual is
5-55 detained shall include in the detained individual's file the
5-56 notification of detention described by this section.

5-57 (d) The peace officer shall give the notification of
5-58 detention on the following form:

5-59 Notification--Communicable Disease Emergency Detention
5-60 NO. _____
5-61 DATE: _____ TIME: _____
5-62 THE STATE OF TEXAS
5-63 FOR THE BEST INTEREST AND PROTECTION OF:
5-64 _____

5-65 NOTIFICATION OF COMMUNICABLE DISEASE EMERGENCY DETENTION

5-66 Now comes _____, a peace officer with
5-67 (name of agency) _____, of the State of
5-68 Texas, and states as follows:

5-69 1. I have reason to believe and do believe that (name of individual

6-1 to be detained) _____ is the subject of a
6-2 control order under Section 81.083, Health and Safety Code, issued
6-3 in response to a communicable disease determined by the
6-4 commissioner of state health services to pose a serious and
6-5 imminent risk to health and safety.

6-6 2. I have reason to believe and do believe that the above-named
6-7 individual (or, if applicable, the minor individual's parent, legal
6-8 guardian, or managing conservator) is not complying with or does
6-9 not intend to comply with the control order based on the following:

6-10 _____
6-11 _____
6-12 _____
6-13 _____

6-14 3. I have reason to believe and do believe that the above-named
6-15 individual evidences a substantial risk of serious harm to others
6-16 based on the following:

6-17 _____
6-18 _____
6-19 _____
6-20 _____

6-21 4. I have reason to believe and do believe that the risk of harm is
6-22 imminent unless the above-named individual is immediately
6-23 detained.

6-24 5. My beliefs are based on the following recent behavior, overt
6-25 acts, attempts, statements, or threats observed by me or reliably
6-26 reported to me:

6-27 _____
6-28 _____
6-29 _____
6-30 _____

6-31 6. The names and addresses of those persons who reported or
6-32 observed recent behavior, overt acts, attempts, statements, or
6-33 threats of the above-named person are (if applicable):

6-34 _____
6-35 _____
6-36 _____
6-37 _____

6-38 For the above reasons, I present this notification to (name of
6-39 health facility or local health authority or department)
6-40 _____ for the detention of (name of individual
6-41 to be detained) _____.

6-42 7. Was the individual restrained in any way? Yes No

6-43 _____ BADGE NO. _____

6-44 PEACE OFFICER'S SIGNATURE _____

6-45 Address: _____ Zip Code: _____

6-46 Telephone: _____

6-47 (e) A health facility, local health authority, or the
6-48 department may not require a peace officer to execute any form other
6-49 than the form provided by Subsection (d) as a condition of accepting
6-50 for temporary admission an individual detained under Section
6-51 81.0891.

6-52 Sec. 81.0893. ACCEPTANCE OF PERSON. A health facility
6-53 shall temporarily accept an individual for whom a peace officer
6-54 files a notification of detention under Section 81.0892(a).

6-55 Sec. 81.0894. RELEASE FROM DETENTION. (a) An individual
6-56 detained under Section 81.0891 may be detained in custody for not
6-57 longer than 48 hours after the time the individual is presented to
6-58 the health facility or location unless a written order for further
6-59 custody or detention is obtained under Subchapter G.

6-60 (b) If the 48-hour period ends on a Saturday, Sunday, legal
6-61 holiday, or before 4 p.m. on the first succeeding business day, the
6-62 individual may be detained until 4 p.m. on the first succeeding
6-63 business day. If the 48-hour period ends at a different time, the
6-64 individual may be detained only until 4 p.m. on the day the 48-hour
6-65 period ends.

6-66 (c) If extremely hazardous weather conditions exist or a
6-67 disaster occurs, the presiding judge or magistrate may, by written
6-68 order made each day, extend by an additional 24 hours the period
6-69 during which the individual may be detained. The written order must

7-1 declare that an emergency exists because of the weather or the
 7-2 occurrence of a disaster.

7-3 Sec. 81.0895. RIGHTS OF INDIVIDUALS DETAINED. (a) An
 7-4 individual subject to emergency detention under Section 81.0891 has
 7-5 the right:

7-6 (1) to be advised of the location of detention, the
 7-7 reasons for the detention, and the fact that the detention could
 7-8 result in a longer period of court-ordered management;

7-9 (2) to a reasonable opportunity to communicate with
 7-10 and retain an attorney;

7-11 (3) to be released from a health facility as provided
 7-12 by Section 81.0894;

7-13 (4) to be advised that communications with a health
 7-14 professional, local health authority, or the department may be used
 7-15 in proceedings for further detention; and

7-16 (5) to a reasonable opportunity to communicate with a
 7-17 relative or other responsible person who has a proper interest in
 7-18 the individual's welfare.

7-19 (b) An individual detained under Section 81.0891 must:

7-20 (1) immediately be informed, orally in simple,
 7-21 nontechnical terms, of the individual's rights under this section
 7-22 by the peace officer at the time the peace officer takes the
 7-23 individual into custody under Section 81.0891; and

7-24 (2) not later than 24 hours after the time the
 7-25 individual is admitted to a health facility or detained in another
 7-26 location, as applicable, be informed of the rights provided by this
 7-27 section and this subchapter:

7-28 (A) orally in simple, nontechnical terms and in
 7-29 writing in the person's primary language, if possible; or

7-30 (B) through the use of a means reasonably
 7-31 calculated to communicate with a hearing or visually impaired
 7-32 individual, if applicable.

7-33 (c) The executive commissioner of the Health and Human
 7-34 Services Commission by rule shall prescribe the manner in which the
 7-35 individual is informed of the individual's rights under this
 7-36 subchapter.

7-37 SECTION 8. The heading to Subchapter G, Chapter 81, Health
 7-38 and Safety Code, is amended to read as follows:

7-39 SUBCHAPTER G. COURT ORDERS FOR MANAGEMENT OF PERSONS WHO ARE
 7-40 INFECTED WITH, EXPOSED TO, OR CARRIERS OF COMMUNICABLE DISEASES

7-41 SECTION 9. Section 81.151(e), Health and Safety Code, is
 7-42 amended to read as follows:

7-43 (e) A single application may be filed for a group if:

7-44 (1) the department or health authority reasonably
 7-45 suspects that a group of five or more persons are infected with,
 7-46 have been [has been] exposed to, or are carriers of [infected with]
 7-47 a communicable disease; and

7-48 (2) each person in the group meets the criteria of this
 7-49 chapter for court orders for the management of a person who is
 7-50 infected with, has been exposed to, or is a carrier of a
 7-51 communicable disease.

7-52 SECTION 10. Section 81.1511, Health and Safety Code, is
 7-53 amended to read as follows:

7-54 Sec. 81.1511. APPLICABILITY OF SUBCHAPTER TO GROUP. To the
 7-55 extent possible, and except as otherwise provided, if a group
 7-56 application is filed under Section 81.151(e), the provisions of
 7-57 this subchapter apply to the group in the same manner as they apply
 7-58 to an individual, except that:

7-59 (1) except as provided by Subdivision (2), any
 7-60 statement or determination regarding the condition [conduct] or
 7-61 status of a person must be made in regard to the majority of the
 7-62 members of the group;

7-63 (2) any finding or statement related to compliance
 7-64 with orders under Section 81.083 must be made for the entire group;

7-65 (3) any notice required to be provided to a person
 7-66 must:

7-67 (A) in addition to being sent to each individual
 7-68 in the group for whom the department or health authority has an
 7-69 address, be published in a newspaper of general circulation in the

8-1 county that includes the area of the suspected contamination and
8-2 any other county in which the department or health authority
8-3 suspects a member of the group resides;

8-4 (B) state that the group is appointed an attorney
8-5 but that a member of the group is entitled to the member's own
8-6 attorney on request; and

8-7 (C) include instructions for any person who
8-8 reasonably suspects that the person was at the place of the
8-9 suspected exposure at the time of the suspected exposure to provide
8-10 the person's name, address, and county of residence to the
8-11 department or health authority; and

8-12 (4) an affidavit of medical evaluation for the group
8-13 may be based on evaluation of one or more members of the group if the
8-14 physician reasonably believes that the condition of the individual
8-15 or individuals represents the condition of the majority of the
8-16 members of the group.

8-17 SECTION 11. Section 81.152, Health and Safety Code, is
8-18 amended to read as follows:

8-19 Sec. 81.152. FORM OF APPLICATION. (a) An application for
8-20 a court order for the management of a person who is infected with,
8-21 has been exposed to, or is a carrier of a communicable disease must
8-22 be styled using the person's initials and not the person's full
8-23 name.

8-24 (b) The application must state whether the application is
8-25 for temporary or extended management of a person who is infected
8-26 with, has been exposed to, or is a carrier of a communicable
8-27 disease.

8-28 (c) Any application must contain the following information
8-29 according to the applicant's information and belief:

8-30 (1) the person's name and address;

8-31 (2) the person's county of residence in this state;

8-32 (3) a statement that the person is infected with, has
8-33 been exposed to, or is the carrier of or is reasonably suspected of
8-34 being infected with, having been exposed to, or being the carrier of
8-35 a communicable disease that presents a threat to public health and
8-36 that the person meets the criteria of this chapter for court orders
8-37 for the management of a person with a communicable disease; and

8-38 (4) a statement, to be included only in an application
8-39 for inpatient treatment, that the person fails or refuses to comply
8-40 with written orders of the department or health authority under
8-41 Section 81.083, if applicable.

8-42 (d) A group application must contain the following
8-43 information according to the applicant's information and belief:

8-44 (1) a description of the group and the location where
8-45 the members of the group may be found;

8-46 (2) a narrative of how the members of the group have
8-47 become infected with, were [has been] exposed to, or became
8-48 carriers of the communicable disease [infected];

8-49 (3) an estimate of how many persons are included in the
8-50 group;

8-51 (4) to the extent known, a list containing the name,
8-52 address, and county of residence in this state of each member of the
8-53 group;

8-54 (5) if the applicant is unable to obtain the name and
8-55 address of each member of the group:

8-56 (A) a statement that the applicant has sought
8-57 each of the unknown names and addresses; and

8-58 (B) the reason that the names and addresses are
8-59 unavailable; and

8-60 (6) a statement, to be included only in an application
8-61 for inpatient treatment, that the members of the group fail or
8-62 refuse to comply with written orders of the department or health
8-63 authority under Section 81.083, if applicable.

8-64 SECTION 12. Section 81.153(a), Health and Safety Code, is
8-65 amended to read as follows:

8-66 (a) The judge shall appoint an attorney to represent a
8-67 person not later than the 24th hour after the time an application
8-68 for a court order for the management of a person who is infected
8-69 with, has been exposed to, or is the carrier of a communicable

9-1 disease is filed if the person does not have an attorney. The judge
 9-2 shall also appoint a language or sign interpreter if necessary to
 9-3 ensure effective communication with the attorney in the person's
 9-4 primary language.

9-5 SECTION 13. Section 81.158(a), Health and Safety Code, is
 9-6 amended to read as follows:

9-7 (a) An affidavit of medical evaluation must be dated and
 9-8 signed by the commissioner or the commissioner's designee, or by a
 9-9 health authority with the concurrence of the commissioner or the
 9-10 commissioner's designee. The certificate must include:

9-11 (1) the name and address of the examining physician,
 9-12 if applicable;

9-13 (2) the name and address of the person examined or to
 9-14 be examined;

9-15 (3) the date and place of the examination, if
 9-16 applicable;

9-17 (4) a brief diagnosis of the examined person's
 9-18 physical and mental condition, if applicable;

9-19 (5) the period, if any, during which the examined
 9-20 person has been under the care of the examining physician;

9-21 (6) an accurate description of the health treatment,
 9-22 if any, given by or administered under the direction of the
 9-23 examining physician; and

9-24 (7) the opinion of the health authority or department
 9-25 and the reason for that opinion, including laboratory reports,
 9-26 that:

9-27 (A) the examined person is infected with, has
 9-28 been exposed to, or is the carrier of or is reasonably suspected of
 9-29 being infected with, having been exposed to, or being the carrier of
 9-30 a communicable disease that presents a threat to public health; and

9-31 (B) as a result of that communicable disease the
 9-32 examined person:

9-33 (i) is likely to cause serious harm to self
 9-34 [~~himself~~]; or

9-35 (ii) will, if not examined, observed, or
 9-36 treated, continue to endanger public health.

9-37 SECTION 14. Section 81.159(a), Health and Safety Code, is
 9-38 amended to read as follows:

9-39 (a) The commissioner shall designate health care facilities
 9-40 throughout the state that are capable of providing services for the
 9-41 examination, observation, isolation, or treatment of persons
 9-42 having or suspected of being infected with, having been exposed to,
 9-43 or being a carrier of [~~having~~] a communicable disease. However, the
 9-44 commissioner may not designate:

9-45 (1) a nursing home or custodial care home required to
 9-46 be licensed under Chapter 242; or

9-47 (2) an intermediate care facility for persons with an
 9-48 intellectual or developmental disability [~~the mentally retarded~~]
 9-49 required to be licensed under Chapter 252.

9-50 SECTION 15. Sections 81.161(a) and (c), Health and Safety
 9-51 Code, are amended to read as follows:

9-52 (a) A motion for an order of protective custody may be filed
 9-53 only in the court in which an application for a court order for the
 9-54 management of a person who is infected with, has been exposed to, or
 9-55 is the carrier of a communicable disease is pending.

9-56 (c) The motion must state that:

9-57 (1) the department or health authority has reason to
 9-58 believe and does believe that the person meets the criteria
 9-59 authorizing the court to order protective custody; and

9-60 (2) the belief is derived from:

9-61 (A) the representations of a credible person;

9-62 (B) the condition [~~conduct~~] of the person who is
 9-63 the subject of the motion; or

9-64 (C) the circumstances under which the person is
 9-65 found.

9-66 SECTION 16. Sections 81.162(a) and (f), Health and Safety
 9-67 Code, are amended to read as follows:

9-68 (a) The judge or designated magistrate may issue a
 9-69 protective custody order if the judge or magistrate determines:

10-1 (1) that the health authority or department has stated
10-2 its opinion and the detailed basis for its opinion that the person
10-3 is infected with, has been exposed to, or is the carrier of or is
10-4 reasonably suspected of being infected with, having been exposed
10-5 to, or being the carrier of a communicable disease that presents an
10-6 immediate threat to the public health; and

10-7 (2) that the person fails or refuses to comply with the
10-8 written orders of the health authority or the department under
10-9 Section 81.083, if applicable.

10-10 (f) Notwithstanding Section 81.161 or Subsection (c), a
10-11 judge or magistrate may issue a temporary protective custody order
10-12 before the filing of an application for a court order for the
10-13 management of a person who is infected with, has been exposed to, or
10-14 is a carrier of a communicable disease under Section 81.151 if:

10-15 (1) the judge or magistrate takes testimony that an
10-16 application under Section 81.151, together with a motion for
10-17 protective custody under Section 81.161, will be filed with the
10-18 court on the next business day; and

10-19 (2) the judge or magistrate determines based on
10-20 evidence taken under Subsection (d) that there is probable cause to
10-21 believe that the person presents a substantial risk of serious harm
10-22 to self [himself] or others to the extent that the person cannot be
10-23 at liberty pending the filing of the application and motion.

10-24 SECTION 17. Section 81.165(a), Health and Safety Code, is
10-25 amended to read as follows:

10-26 (a) A hearing must be held to determine if:

10-27 (1) there is probable cause to believe that a person
10-28 under a protective custody order presents a substantial risk of
10-29 serious harm to the person [himself] or others to the extent that
10-30 the person cannot be at liberty pending the hearing on a court order
10-31 for the management of a person with a communicable disease; and

10-32 (2) the health authority or department has stated its
10-33 opinion and the detailed basis for its opinion that the person is
10-34 infected with, has been exposed to, or is the carrier of or is
10-35 reasonably suspected of being infected with, having been exposed
10-36 to, or being the carrier of a communicable disease that presents an
10-37 immediate threat to public health.

10-38 SECTION 18. Section 81.166(d), Health and Safety Code, is
10-39 amended to read as follows:

10-40 (d) The notification of probable cause hearing shall read as
10-41 follows:

(Style of Case)

NOTIFICATION OF PROBABLE CAUSE HEARING

10-42 On this the _____ day of _____, 20__ [~~19__~~], the
10-43 undersigned hearing officer heard evidence concerning the need for
10-44 protective custody of _____ (hereinafter referred to as
10-45 proposed patient). The proposed patient was given the opportunity
10-46 to challenge the allegations that the proposed patient [~~s~~he]
10-47 presents a substantial risk of serious harm to self or others.

10-48 The proposed patient and the proposed patient's [his or her]
10-49 attorney _____ have been given written notice
10-50 that the proposed patient was placed under an order of protective
10-51 custody and the reasons for such order on _____ (date of
10-52 notice).

10-53 I have examined the affidavit of medical evaluation and
10-54 _____ (other evidence considered). Based on this
10-55 evidence, I find that there is probable cause to believe that the
10-56 proposed patient presents a substantial risk of serious harm to
10-57 self [himself or herself] (yes ____ or no ____) or others (yes ____
10-58 or no ____) such that the proposed patient [~~s~~he] cannot be at
10-59 liberty pending final hearing because the proposed patient [~~s~~he]
10-60 is infected with, has been exposed to, or is the carrier of or is
10-61 reasonably suspected of being infected with, having been exposed
10-62 to, or being the carrier of a communicable disease that presents an
10-63 immediate threat to the public health and the proposed patient
10-64 [~~s~~he] has failed or refused to comply with the orders of the
10-65 health authority or the Texas Department of Health delivered on
10-66 _____ (date of service) _____.

10-67 SECTION 19. Section 81.167(a), Health and Safety Code, is
10-68
10-69

11-1 amended to read as follows:

11-2 (a) The head of a facility or the facility head's designee
11-3 shall detain a person under a protective custody order in the
11-4 facility pending a court order for the management of a person who is
11-5 infected with, has been exposed to, or is a carrier of a
11-6 communicable disease or until the person is released or discharged
11-7 under Section 81.168.

11-8 SECTION 20. Section 81.168(c), Health and Safety Code, is
11-9 amended to read as follows:

11-10 (c) The head of a facility shall discharge a person held
11-11 under a protective custody order if:

11-12 (1) the head of the facility does not receive notice
11-13 within 72 hours after detention begins, excluding Saturdays,
11-14 Sundays, legal holidays, the period prescribed by Section 81.165(b)
11-15 for an extreme weather emergency, and the duration of a public
11-16 health disaster, that a probable cause hearing was held and the
11-17 person's continued detention was authorized;

11-18 (2) a final court order for the management of a person
11-19 who is infected with, has been exposed to, or is a carrier of a
11-20 communicable disease has not been entered within the time
11-21 prescribed by Section 81.154; or

11-22 (3) the health authority or commissioner determines
11-23 that the person no longer meets the criteria for protective custody
11-24 prescribed by Section 81.162.

11-25 SECTION 21. Section 81.169(a), Health and Safety Code, is
11-26 amended to read as follows:

11-27 (a) Except as provided by Subsection (b), the judge may hold
11-28 a hearing on an application for a court order for the management of
11-29 a person who is infected with, has been exposed to, or is a carrier
11-30 of a communicable disease at any suitable location in the county.
11-31 The hearing should be held in a physical setting that is not likely
11-32 to have a harmful effect on the public or the person.

11-33 SECTION 22. Section 81.170(f), Health and Safety Code, is
11-34 amended to read as follows:

11-35 (f) The jury shall determine if the person is infected with,
11-36 has been exposed to, or is the carrier of or is reasonably suspected
11-37 of being infected with, having been exposed to, or being the carrier
11-38 of a communicable disease that presents a threat to the public
11-39 health and, if the application is for inpatient treatment, has
11-40 refused or failed to follow the orders of the health authority. The
11-41 jury may not make a finding about the type of services to be
11-42 provided to the person.

11-43 SECTION 23. Section 81.171(a), Health and Safety Code, is
11-44 amended to read as follows:

11-45 (a) The court shall enter an order denying an application
11-46 for a court order for temporary or extended management if after a
11-47 hearing the judge or jury fails to find, from clear and convincing
11-48 evidence, that the person:

11-49 (1) is infected with, has been exposed to, or is the
11-50 carrier of or is reasonably suspected of being infected with,
11-51 having been exposed to, or being the carrier of a communicable
11-52 disease that presents a threat to the public health;

11-53 (2) has refused or failed to follow the orders of the
11-54 health authority if the application is for inpatient treatment; and

11-55 (3) meets the applicable criteria for orders for the
11-56 management of a person who is infected with, has been exposed to, or
11-57 is a carrier of a communicable disease.

11-58 SECTION 24. Section 81.172(a), Health and Safety Code, is
11-59 amended to read as follows:

11-60 (a) The judge or jury may determine that a person requires
11-61 court-ordered examination, observation, isolation, or treatment
11-62 only if the judge or jury finds, from clear and convincing evidence,
11-63 that:

11-64 (1) the person is infected with, has been exposed to,
11-65 or is the carrier of or is reasonably suspected of being infected
11-66 with, having been exposed to, or being the carrier of a communicable
11-67 disease that presents a threat to the public health and, if the
11-68 application is for inpatient treatment, has failed or refused to
11-69 follow the orders of the health authority or department; and

12-1 (2) as a result of the communicable disease the
12-2 person:

12-3 (A) is likely to cause serious harm to self
12-4 [~~himself~~]; or

12-5 (B) will, if not examined, observed, isolated, or
12-6 treated, continue to endanger public health.

12-7 SECTION 25. Section 81.174(a), Health and Safety Code, is
12-8 amended to read as follows:

12-9 (a) The judge shall dismiss the jury, if any, after a
12-10 hearing in which a person is found:

12-11 (1) to be infected with, to have been exposed to, or to
12-12 be the carrier of or to be reasonably suspected of being infected
12-13 with, having been exposed to, or being a carrier of a communicable
12-14 disease;

12-15 (2) to have failed or refused to follow the orders of a
12-16 health authority or the department if the application is for
12-17 inpatient treatment; and

12-18 (3) to meet the criteria for orders for the management
12-19 of a patient who is infected with, has been exposed to, or is a
12-20 carrier of a communicable disease.

12-21 SECTION 26. Section 81.176, Health and Safety Code, is
12-22 amended to read as follows:

12-23 Sec. 81.176. DESIGNATION OF FACILITY. In a court order for
12-24 the temporary or extended management of a person who is infected
12-25 with, has been exposed to, or is a carrier of a communicable disease
12-26 specifying inpatient care, the court shall commit the person to a
12-27 health care facility designated by the commissioner or a health
12-28 authority in accordance with Section 81.159.

12-29 SECTION 27. Section 81.183(b), Health and Safety Code, is
12-30 amended to read as follows:

12-31 (b) The court shall appoint an attorney to represent the
12-32 person if a hearing is scheduled. The person shall be given notice
12-33 of the matters to be considered at the hearing. The notice must
12-34 comply with the requirements of Section 81.155 for notice before a
12-35 hearing on an application for court orders for the management of a
12-36 person who is infected with, has been exposed to, or is a carrier of
12-37 a communicable disease.

12-38 SECTION 28. Section 81.186(a), Health and Safety Code, is
12-39 amended to read as follows:

12-40 (a) The court may modify an order for outpatient services at
12-41 the modification hearing if the court determines that the person
12-42 continues to meet the applicable criteria for court orders for the
12-43 management of a person who is infected with, has been exposed to, or
12-44 is a carrier of a communicable disease and that:

12-45 (1) the person has not complied with the court's order;
12-46 or

12-47 (2) the person's condition has deteriorated to the
12-48 extent that outpatient services are no longer appropriate.

12-49 SECTION 29. Section 81.188(a), Health and Safety Code, is
12-50 amended to read as follows:

12-51 (a) The court may set aside an order for the management of a
12-52 person who is infected with, has been exposed to, or is a carrier of
12-53 a communicable disease and grant a motion for rehearing for good
12-54 cause shown.

12-55 SECTION 30. Section 81.190(d), Health and Safety Code, is
12-56 amended to read as follows:

12-57 (d) The hearing is held before the court and without a jury.
12-58 The hearing must be held in accordance with the requirements for a
12-59 hearing on an application for a court order for the management of a
12-60 person who is infected with, has been exposed to, or is a carrier of
12-61 a communicable disease.

12-62 SECTION 31. Section 81.191(a), Health and Safety Code, is
12-63 amended to read as follows:

12-64 (a) An appeal from an order for the management of a person
12-65 who is infected with, has been exposed to, or is a carrier of a
12-66 communicable disease, or from a renewal or modification of an
12-67 order, must be filed in the court of appeals for the county in which
12-68 the order is entered.

12-69 SECTION 32. Section 81.193(a), Health and Safety Code, is

13-1 amended to read as follows:

13-2 (a) The head of a facility may permit a person admitted to
13-3 the facility under order for extended inpatient management of a
13-4 person who is infected with, has been exposed to, or is a carrier of
13-5 a communicable disease to leave the facility under a pass.

13-6 SECTION 33. Chapter 81, Health and Safety Code, is amended
13-7 by adding Subchapters J and K to read as follows:

13-8 SUBCHAPTER J. TASK FORCE ON INFECTIOUS DISEASE PREPAREDNESS AND
13-9 RESPONSE

13-10 Sec. 81.401. DEFINITION. In this subchapter, "task force"
13-11 means the Task Force on Infectious Disease Preparedness and
13-12 Response.

13-13 Sec. 81.402. PURPOSE AND FINDINGS. The legislature finds
13-14 that:

13-15 (1) infectious diseases are responsible for more
13-16 deaths worldwide than any other single cause;

13-17 (2) the State of Texas has a responsibility to
13-18 safeguard and protect the health and well-being of its citizens
13-19 from the spread of infectious diseases;

13-20 (3) on September 30, 2014, the first case of Ebola
13-21 diagnosed in the United States occurred in Dallas, Texas;

13-22 (4) addressing infectious diseases requires the
13-23 coordination and cooperation of multiple governmental entities at
13-24 the local, state, and federal levels;

13-25 (5) public health and medical preparedness and
13-26 response guidelines are crucial to protect the safety and welfare
13-27 of our citizens; and

13-28 (6) Texas has nationally recognized infectious
13-29 disease experts and other highly trained professionals across the
13-30 state with the experience needed to minimize any potential risk to
13-31 the people of Texas.

13-32 Sec. 81.403. TASK FORCE; DUTIES. (a) The Task Force on
13-33 Infectious Disease Preparedness and Response is created as an
13-34 advisory panel to the governor.

13-35 (b) The task force shall:

13-36 (1) provide expert, evidence-based assessments,
13-37 protocols, and recommendations related to state responses to
13-38 infectious diseases, including Ebola; and

13-39 (2) serve as a reliable and transparent source of
13-40 information and education for Texas leadership and citizens.

13-41 Sec. 81.404. APPOINTMENT OF MEMBERS; TERMS. (a) The
13-42 governor may appoint members of the task force as necessary,
13-43 including members from relevant state agencies, members with
13-44 expertise in infectious diseases and other issues involved in the
13-45 prevention of the spread of infectious diseases, and members from
13-46 institutions of higher education in this state. The governor shall
13-47 appoint to the task force:

13-48 (1) at least one member who is a representative of a
13-49 local health authority serving a rural area; and

13-50 (2) at least one member who is a representative of a
13-51 local health authority serving an urban area.

13-52 (b) The governor shall appoint a director of the task force
13-53 from among the members of the task force.

13-54 (c) The governor may fill any vacancy that occurs on the
13-55 task force and may appoint additional members as needed.

13-56 (d) Members of the task force serve at the pleasure of the
13-57 governor.

13-58 (e) A state or local employee appointed to the task force
13-59 shall perform any duties required by the task force in addition to
13-60 the regular duties of the employee.

13-61 Sec. 81.405. REPORTS. The task force may make written
13-62 reports on its findings and recommendations, including legislative
13-63 recommendations, to the governor and legislature.

13-64 Sec. 81.406. MEETINGS. (a) The task force shall meet at
13-65 times and locations as determined by the director of the task force.

13-66 (b) The task force may meet telephonically.

13-67 (c) The task force may hold public hearings to gather
13-68 information. The task force shall endeavor to meet in various parts
13-69 of the state to encourage local input.

14-1 (d) The task force may meet in executive session to discuss
 14-2 matters that are confidential by state or federal law or to ensure
 14-3 public security or law enforcement needs.

14-4 Sec. 81.407. ADMINISTRATIVE SUPPORT. State agencies with
 14-5 members on the task force shall provide administrative support for
 14-6 the task force.

14-7 Sec. 81.408. REIMBURSEMENT. Task force members serve
 14-8 without compensation and are not entitled to reimbursement for
 14-9 travel expenses.

14-10 SUBCHAPTER K. STATEWIDE INFECTIOUS DISEASE CONTROL MEASURES;
 14-11 PREPARATION

14-12 Sec. 81.451. PERSONAL PROTECTIVE EQUIPMENT. (a) In this
 14-13 section, "personal protective equipment" means specialized
 14-14 clothing or equipment worn for protection against infectious
 14-15 materials.

14-16 (b) The department shall establish a stockpile, or regional
 14-17 stockpiles, of personal protective equipment to support responses
 14-18 to infectious disease emergencies in the state, if funds are
 14-19 appropriated for the purposes of this section.

14-20 Sec. 81.452. MOBILE APPLICATION. The department may
 14-21 contract to establish a mobile application for wireless
 14-22 communications devices that might be used by health officials and
 14-23 health care providers to monitor the spread of an infectious
 14-24 disease in real time.

14-25 Sec. 81.453. PORTABLE MEDICAL WASTE TREATMENT. The
 14-26 department, the Texas Department of Transportation, and the Texas
 14-27 Commission on Environmental Quality shall:

14-28 (1) evaluate portable treatment options for medical
 14-29 waste to render pathogens in that waste noninfectious; and

14-30 (2) develop procedures to rapidly deploy the portable
 14-31 treatment options through vendor contracts or state purchase.

14-32 SECTION 34. Subchapter B, Chapter 716, Health and Safety
 14-33 Code, is amended by adding Section 716.055 to read as follows:

14-34 Sec. 716.055. EXCEPTION: DEPARTMENT OF STATE HEALTH
 14-35 SERVICES AUTHORIZATION. (a) A crematory establishment may
 14-36 cremate the deceased person's human remains without receipt of a
 14-37 cremation authorization form signed by the authorizing agent if the
 14-38 Department of State Health Services certifies that:

14-39 (1) the deceased person was infected with, was exposed
 14-40 to, or was a carrier of a communicable disease that presents a
 14-41 threat to public health; and

14-42 (2) burial of the body would pose a public health risk.

14-43 (b) The Texas Funeral Service Commission may adopt rules
 14-44 necessary to implement this section.

14-45 SECTION 35. The heading to Section 716.204, Health and
 14-46 Safety Code, is amended to read as follows:

14-47 Sec. 716.204. IMMUNITY FROM CRIMINAL AND CIVIL LIABILITY[+
 14-48 WRITTEN DIRECTIONS].

14-49 SECTION 36. Section 716.204, Health and Safety Code, is
 14-50 amended by adding Subsection (c) to read as follows:

14-51 (c) If Section 716.055(a) applies, a cemetery organization,
 14-52 a business operating a crematory or columbarium, a funeral
 14-53 director, an embalmer, or a funeral establishment is not criminally
 14-54 liable or liable in a civil action for cremating the human remains
 14-55 of a deceased person.

14-56 SECTION 37. The Department of State Health Services, the
 14-57 Texas Animal Health Commission, the Texas A&M Veterinary Medical
 14-58 Diagnostic Laboratory, and the Texas A&M College of Veterinary
 14-59 Medicine and Biomedical Sciences shall:

14-60 (1) review documents published or updated by the
 14-61 federal Centers for Disease Control and Prevention and the United
 14-62 States Department of Agriculture providing guidance on infection
 14-63 control measures, including quarantine, for pets and livestock
 14-64 animals exposed to infectious diseases;

14-65 (2) incorporate the recommendations of the federal
 14-66 Centers for Disease Control and Prevention and the United States
 14-67 Department of Agriculture in developing and revising guidelines for
 14-68 this state to use in preventing the spread of infectious disease
 14-69 through pets and livestock;

15-1 (3) evaluate the current facilities and capabilities
15-2 of this state to implement the guidelines adopted under Subdivision
15-3 (2) of this section, including an evaluation of the sufficiency and
15-4 capacity of available quarantine facilities;

15-5 (4) solicit public feedback in developing any
15-6 recommendations for legislative, administrative, or executive
15-7 action to address perceived problems; and

15-8 (5) submit a report on any findings, evaluations, and
15-9 recommendations to the governor and the legislature not later than
15-10 December 1, 2016.

15-11 SECTION 38. (a) Not later than December 1, 2015, the
15-12 Department of State Health Services shall submit a report to the
15-13 legislature regarding the preparedness of this state for containing
15-14 an infectious disease outbreak.

15-15 (b) The report under this section must include:

15-16 (1) any progress that the department has made on
15-17 implementing recommendations of the Task Force on Infectious
15-18 Disease Preparedness and Response;

15-19 (2) recommendations for statutory changes that are
15-20 necessary to enable the department to implement the recommendations
15-21 of the Task Force on Infectious Disease Preparedness and Response;

15-22 (3) a cost analysis for the implementation of any
15-23 recommendations of the Task Force on Infectious Disease
15-24 Preparedness and Response that the department determines are not
15-25 possible to implement using existing resources;

15-26 (4) an evaluation of portable medical waste treatment
15-27 options under Section 81.453, Health and Safety Code, as added by
15-28 this Act, proposed procedures for deploying the portable treatment
15-29 options, any projected costs for those treatments, and any
15-30 legislative recommendations necessary to implement any proposed
15-31 portable medical waste treatment solutions; and

15-32 (5) any recommendations for legislation or other
15-33 measures that would assist the department in preparing for an
15-34 infectious disease outbreak.

15-35 (c) The Department of State Health Services shall
15-36 coordinate with other state agencies as necessary to complete the
15-37 report under this section. The report must specify if the
15-38 department determines that a recommendation be implemented by
15-39 another state agency.

15-40 SECTION 39. (a) On the effective date of this Act, a member
15-41 serving on the Task Force on Infectious Disease Preparedness and
15-42 Response created by executive order of the governor continues to
15-43 serve on the Task Force on Infectious Disease Preparedness and
15-44 Response under Subchapter J, Chapter 81, Health and Safety Code, as
15-45 added by this Act.

15-46 (b) As soon as practicable after the effective date of this
15-47 Act, the governor shall make any appointments to the Task Force on
15-48 Infectious Disease Preparedness and Response required under
15-49 Subchapter J, Chapter 81, Health and Safety Code, as added by this
15-50 Act.

15-51 SECTION 40. This Act takes effect immediately if it
15-52 receives a vote of two-thirds of all the members elected to each
15-53 house, as provided by Section 39, Article III, Texas Constitution.
15-54 If this Act does not receive the vote necessary for immediate
15-55 effect, this Act takes effect September 1, 2015.

15-56 * * * * *