

SENATE AMENDMENTS

2nd Printing

By: Davis of Harris, Zerwas, Burkett

H.B. No. 2131

A BILL TO BE ENTITLED

AN ACT

relating to the designation of centers of excellence to achieve healthy fetal outcomes in this state.

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

SECTION 1. Chapter 32, Health and Safety Code, is amended by adding Subchapter D to read as follows:

SUBCHAPTER D. CENTERS OF EXCELLENCE

FOR FETAL DIAGNOSIS AND THERAPY

Sec. 32.071. DESIGNATION OF CENTERS OF EXCELLENCE FOR FETAL DIAGNOSIS AND THERAPY. (a) The department, in consultation with the Perinatal Advisory Council established under Section 241.187, shall designate as centers of excellence for fetal diagnosis and therapy one or more health care entities in this state that provide comprehensive maternal, fetal, and neonatal health care for pregnant women with high-risk pregnancies complicated by one or more fetuses with anomalies, with genetic conditions, or with compromise caused by a pregnancy condition or by exposure.

(b) The executive commissioner of the Health and Human Services Commission, in consultation with the department and the Perinatal Advisory Council, shall adopt the rules necessary for a health care entity in this state to be designated as a center of excellence for fetal diagnosis and therapy.

Sec. 32.072. SUBCOMMITTEE. (a) The department, in consultation with the Perinatal Advisory Council, shall appoint a

1 subcommittee of that advisory council to advise the advisory
2 council and the department on the development of rules related to
3 the designations made by the department under this subchapter. As
4 part of its duties under this subsection, the subcommittee
5 specifically shall advise the advisory council and the department
6 regarding the criteria necessary for a health care entity in this
7 state to receive a designation under this subchapter.

8 (b) The subcommittee must consist of individuals with
9 expertise in fetal diagnosis and therapy. A majority of the members
10 of the subcommittee must practice in those areas in a health
11 profession in this state. The subcommittee may include national and
12 international experts.

13 Sec. 32.073. PRIORITY CONSIDERATIONS FOR CENTER
14 DESIGNATIONS. The rules adopted under Section 32.071(b) must
15 prioritize awarding a designation under this subchapter to a health
16 care entity that:

17 (1) offers fetal diagnosis and therapy through an
18 extensive multi-specialty clinical program that is affiliated and
19 collaborates extensively with a medical school in this state and an
20 associated hospital facility that provides advanced maternal and
21 neonatal care in accordance with the rules established under
22 Section 241.183(a)(1);

23 (2) demonstrates a significant commitment to research
24 in and advancing the field of fetal diagnosis and therapy;

25 (3) offers advanced training programs in fetal
26 diagnosis and therapy; and

27 (4) integrates an advanced fetal care program with a

1 program that provides appropriate long-term monitoring and
2 follow-up care for patients.

3 Sec. 32.074. QUALIFICATIONS FOR DESIGNATION. The rules
4 adopted under Section 32.071(b) must ensure that a designation
5 under this subchapter is based directly on a health care entity's
6 ability to:

7 (1) implement and maintain a cohesive
8 multidisciplinary structure for its health care team;

9 (2) monitor short-term and long-term patient
10 diagnostic and therapeutic outcomes; and

11 (3) provide to the department annual reports
12 containing aggregate data on short-term and long-term diagnostic
13 and therapeutic outcomes as requested or required by the department
14 and make those reports available to the public.

15 SECTION 2. (a) The executive commissioner of the Health and
16 Human Services Commission shall adopt the rules required by Section
17 32.071, Health and Safety Code, as added by this Act, not later than
18 March 1, 2018.

19 (b) Not later than September 1, 2018, the Department of
20 State Health Services shall begin awarding designations required by
21 Subchapter D, Chapter 32, Health and Safety Code, as added by this
22 Act, to health care entities establishing eligibility under that
23 subchapter.

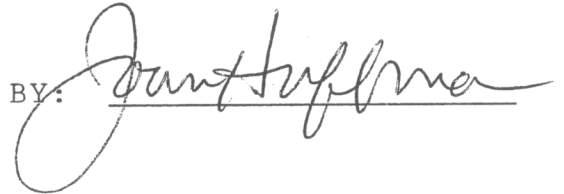
24 SECTION 3. This Act takes effect September 1, 2015.

ADOPTED

MAY 26 2015


Secretary of the Senate

FLOOR AMENDMENT NO. _____

BY: 

1 Amend H.B. No. 2131 (senate committee report) as follows:

2 (1) In added Section 32.071(a), Health and Safety Code (page
3 1, lines 31-35), strike "entities in this state that provide
4 comprehensive maternal, fetal, and neonatal health care for
5 pregnant women with high-risk pregnancies complicated by one or
6 more fetuses with anomalies, with genetic conditions, or with
7 compromise caused by a pregnancy condition or by exposure" and
8 substitute "entities or programs in this state, including
9 institutions of higher education as defined by Section 61.003,
10 Education Code, or the programs of those institutions".

11 (2) In added Section 32.071(b), Health and Safety Code (page
12 1, line 39), between "health care entity" and "in this state",
13 insert "or program".

14 (3) In added Section 32.072(a), Health and Safety Code (page
15 1, line 48), between "health care entity" and "in this", insert "or
16 program".

17 (4) In added Section 32.073, Health and Safety Code (page 1,
18 line 58), between "care entity" and "that", insert "or program".

19 (5) In added Section 32.073(1), Health and Safety Code (page
20 2, lines 2-3), strike "the rules established under Section
21 241.183(a)(1)" and substitute "its level of care designation
22 received under Section 241.182".

23 (6) Strike added Section 32.074, Health and Safety Code
24 (page 2, lines 11-22), and substitute the following:

25 Sec. 32.074. QUALIFICATIONS FOR DESIGNATION. The rules
26 adopted under Section 32.071(b) must ensure that a health care
27 entity or program that receives a center of excellence designation
28 under this subchapter:

29 (1) provides or is affiliated with a hospital facility

1 that provides advanced maternal and neonatal care in accordance
2 with its level of care designation received under Section 241.182;

3 (2) implements and maintains a multidisciplinary
4 health care team, including maternal fetal medicine specialists,
5 pediatric and surgical specialists, neonatologists, nurses with
6 specialized maternal and neonatal training, and other ancillary and
7 support staff as appropriate to provide maternal, fetal, and
8 neonatal services;

9 (3) establishes minimum criteria for medical staff,
10 nursing staff, and ancillary and support personnel;

11 (4) measures short-term and long-term patient
12 diagnostic and therapeutic outcomes; and

13 (5) provides to the department annual reports
14 containing aggregate data on short-term and long-term diagnostic
15 and therapeutic outcomes as requested or required by the department
16 and makes those reports available to the public.

17 (7) In SECTION 2(a) of the bill (page 2, line 26), strike
18 "March 1, 2018" and substitute "March 1, 2017".

19 (8) In SECTION 2(b) of the bill (page 2, line 27), strike
20 "September 1, 2018" and substitute "September 1, 2017".

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

May 27, 2015

TO: Honorable Joe Straus, Speaker of the House, House of Representatives

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: **HB2131** by Davis, Sarah (Relating to the designation of centers of excellence to achieve healthy fetal outcomes in this state.), **As Passed 2nd House**

No significant fiscal implication to the State is anticipated.

The bill would amend Chapter 32 of the Health and Safety Code to require the Department of State Health Services (DSHS) to designate certain entities or programs as centers of excellence for fetal diagnosis and therapy. The bill would require the Health and Human Services Commission (HHSC) to adopt rules related to the designation of entities or programs. The bill would require that DSHS appoint a subcommittee of the Perinatal Advisory Council to advise the advisory council and DSHS on the criteria necessary for the designation of entities or programs. Based on the LBB's analysis of HHSC and DSHS, duties and responsibilities associated with the implementation of the bill could be reasonably absorbed within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 537 State Health Services, Department of, 529 Health and Human Services Commission

LBB Staff: UP, ADe, NB, WP, VJC

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

May 19, 2015

TO: Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2131 by Davis, Sarah (Relating to the designation of centers of excellence to achieve healthy fetal outcomes in this state.), **As Engrossed**

<p>No significant fiscal implication to the State is anticipated.</p>
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The bill would amend Chapter 32 of the Health and Safety Code to require the Department of State Health Services (DSHS) to designate health care entities meeting certain criteria as centers of excellence for fetal diagnosis and therapy. The bill would require the Health and Human Services Commission (HHSC) to adopt rules related to the designation of health care entities. The bill would require that DSHS appoint a subcommittee of the Perinatal Advisory Council to advise the advisory council and DSHS on the criteria necessary for the designation of health care entities. Based on the LBB's analysis of HHSC and DSHS, duties and responsibilities associated with the implementation of the bill could be reasonably absorbed within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, ADe, NB, WP, VJC

**LEGISLATIVE BUDGET BOARD
Austin, Texas**

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 16, 2015

TO: Honorable Myra Crownover, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2131 by Davis, Sarah (Relating to the designation of centers of excellence to achieve healthy fetal outcomes in this state.), **Committee Report 1st House, Substituted**

No significant fiscal implication to the State is anticipated.

The bill would amend Chapter 32 of the Health and Safety Code to require the Department of State Health Services (DSHS) to designate health care entities meeting certain criteria as centers of excellence for fetal diagnosis and therapy. The bill would require the Health and Human Services Commission (HHSC) to adopt rules establishing the criteria. The bill would require that HHSC appoint the Fetal Diagnosis and Therapy Advisory Council to advise DSHS on the designation of health care entities. Based on the LBB's analysis of HHSC and DSHS, duties and responsibilities associated with the implementation of the bill could be reasonably absorbed within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, NB, WP, ADe, VJC

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 4, 2015

TO: Honorable Myra Crownover, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2131 by Davis, Sarah (Relating to the designation of centers of excellence for fetal care and healthy outcomes in this state.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would amend Chapter 241, Health and Safety Code to require the Department of State Health Services (DSHS) to designate licensed hospitals meeting certain criteria as centers of excellence for fetal care and healthy outcomes. The bill would require the Health and Human Services Commission (HHSC) to adopt rules establishing the criteria. Based on the LBB's analysis of HHSC and DSHS, duties and responsibilities associated with the implementation of the bill could be reasonably absorbed within existing resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, NB, WP, ADe, VJC