| **House Bill 2578**  Senate Amendments  Section-by-Section Analysis | | |
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| HOUSE VERSION | SENATE VERSION (CS) | CONFERENCE |
| No equivalent provision. | ARTICLE 1. CONSOLIDATION OF HEALTH AND HUMAN SERVICES SYSTEM |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 1.01. (a) Chapter 531, Government Code, is amended by adding Subchapter A-1 to read as follows:  SUBCHAPTER A-1. CONSOLIDATION OF HEALTH AND HUMAN SERVICES SYSTEM  Sec. 531.02001. CONSOLIDATION OF HEALTH AND HUMAN SERVICES SYSTEM GENERALLY. In accordance with this subchapter, the functions of the health and human services system described under Sections 531.0201, 531.02011, and 531.02012 are consolidated through a phased transfer of those functions under which:  (1) the initial transfers required under Section 531.0201 occur:  (A) on or after the date on which the executive commissioner submits the transition plan to the required persons under Section 531.0204(e); and  (B) not later than September 1, 2016;  (2) the final transfers required under Section 531.02011 occur:  (A) on or after September 1, 2016; and  (B) not later than September 1, 2017; and  (3) transfers of administrative support services functions occur in accordance with Section 531.02012.  Sec. 531.02002. MEANING OF FUNCTION IN RELATION TO TRANSFERS. For purposes of the transfers mandated by this subchapter, "function" includes a power, duty, program, or activity of a state agency or entity.  Sec. 531.0201. PHASE ONE: INITIAL TRANSFERS. (a) On the dates specified in the transition plan required under Section 531.0204, the following functions are transferred to the commission as provided by this subchapter:  (1) all functions, including any remaining administrative support services functions, of each state agency and entity subject to abolition under Section 531.0202(a); and  (2) except as provided by Section 531.02013, all client services of the health and human services system, including client services functions performed by the following:  (A) the state agency and entity subject to abolition under Section 531.0202(b);  (B) the Department of Family and Protective Services; and  (C) the Department of State Health Services.  (b) On the dates specified in the transition plan required under Section 531.0204, all functions in the health and human services system related to prevention and early intervention services, including the Nurse-Family Partnership Competitive Grant Program under Subchapter C, Chapter 265, Family Code, are transferred to the Department of Family and Protective Services.  Sec. 531.02011. PHASE TWO: FINAL TRANSFERS TO COMMISSION. On the dates specified in the transition plan required under Section 531.0204, the following functions are transferred to the commission as provided by this subchapter:  (1) all functions of each state agency and entity subject to abolition under Section 531.0202(b) that remained with the agency or entity after the initial transfer of functions under Section 531.0201 or a transfer of administrative support services functions under Section 531.02012;  (2) regulatory functions and functions related to state-operated institutions of the Department of State Health Services; and  (3) regulatory functions of the Department of Family and Protective Services.  Sec. 531.02012. TRANSFER AND CONSOLIDATION OF ADMINISTRATIVE SUPPORT SERVICES FUNCTIONS. (a) In this section, "administrative support services" has the meaning assigned under Section 531.00553.  (b) As soon as practicable after the first day of the period prescribed by Section 531.02001(1) and not later than the last day of the period prescribed by Section 531.02001(2), in accordance with and on the dates specified in the transition plan required under Section 531.0204, the executive commissioner shall, after consulting with affected state agencies and divisions, transfer and consolidate within the commission administrative support services functions of the health and human services system to the extent consolidation of those support services functions is feasible and contributes to the effective performance of the system. Consolidation of an administrative support services function under this section must be conducted in accordance with the principles and requirements for organization of administrative support services under Section 531.00553(c).  (c) Consultation with affected state agencies and divisions under Subsection (b) must be conducted in a manner that ensures client services are, at most, only minimally affected, and must result in a memorandum of understanding or other agreement between the commission and each affected agency or division that:  (1) details measurable performance goals that the commission is expected to meet;  (2) identifies a means by which the agency or division may seek permission from the executive commissioner to find an alternative way to address the needs of the agency or division, as appropriate;  (3) identifies steps to ensure that programs under the health and human services system, whether large or small, receive administrative support services that are adequate to meet the program's needs; and  (4) if appropriate, specifies that staff responsible for providing administrative support services consolidated within the commission are located in the area where persons requiring those services are located to ensure the staff understands related program needs and can respond to those needs in a timely manner.  Sec. 531.02013. FUNCTIONS REMAINING WITH CERTAIN AGENCIES. The following functions are not subject to transfer under Sections 531.0201 and 531.02011:  (1) the functions of the Department of Family and Protective Services, including the statewide intake of reports and other information, related to the following:  (A) child protective services, including services that are required by federal law to be provided by this state's child welfare agency;  (B) adult protective services, other than investigations of the alleged abuse, neglect, or exploitation of an elderly person or person with a disability:  (i) in a facility operated, or in a facility or by a person licensed, certified, or registered, by a state agency; or  (ii) by a provider that has contracted to provide home and community-based services; and  (C) prevention and early intervention services; and  (2) the public health functions of the Department of State Health Services, including health care data collection and maintenance of the Texas Health Care Information Collection program.  Sec. 531.02014. RELATED TRANSFERS; EFFECT OF CONSOLIDATION. (a) All of the following that relate to a function that is transferred under Section 531.0201, 531.02011, or 531.02012 are transferred to the commission or the Department of Family and Protective Services, as applicable, on the date the related function is transferred as specified in the transition plan required under Section 531.0204:  (1) all obligations and contracts, including obligations and contracts related to a grant program;  (2) all property and records in the custody of the state agency or entity from which the function is transferred;  (3) all funds appropriated by the legislature and other money; and  (4) all complaints, investigations, or contested cases that are pending before the state agency or entity from which the function is transferred or a governing person or entity of the state agency or entity, without change in status.  (b) A rule, policy, or form adopted by or on behalf of a state agency or entity from which functions are transferred under Section 531.0201, 531.02011, or 531.02012 that relates to a function that is transferred under one of those sections becomes a rule, policy, or form of the receiving state agency upon transfer of the related function and remains in effect:  (1) until altered by the commission or other receiving state agency, as applicable; or  (2) unless it conflicts with a rule, policy, or form of the receiving state agency.  (c) A license, permit, or certification in effect that was issued by a state agency or entity from which functions are transferred under Section 531.0201 or 531.02011 that relates to a function that is transferred under either of those sections is continued in effect as a license, permit, or certification of the commission upon transfer of the related function until the license, permit, or certification expires, is suspended or revoked, or otherwise becomes invalid.  Sec. 531.0202. ABOLITION OF STATE AGENCIES AND ENTITIES; EFFECT OF TRANSFERS. (a) Each of the following state agencies and entities is abolished on a date that is within the period prescribed by Section 531.02001(1), that is specified in the transition plan required under Section 531.0204 for the abolition of the agency or entity, and that occurs after all of the agency's or entity's functions have been transferred in accordance with Section 531.0201:  (1) the Department of Assistive and Rehabilitative Services;  (2) the Health and Human Services Council;  (3) the Aging and Disability Services Council;  (4) the Assistive and Rehabilitative Services Council;  (5) the Family and Protective Services Council;  (6) the State Health Services Council; and  (7) the Texas Council on Autism and Pervasive Developmental Disorders.  (b) The following state agency and entity are abolished on a date that is within the period prescribed by Section 531.02001(2), that is specified in the transition plan required under Section 531.0204 for the abolition of the state agency or entity, and that occurs after all of the state agency's or entity's functions have been transferred to the commission in accordance with Sections 531.0201 and 531.02011:  (1) the Department of Aging and Disability Services; and  (2) the Office for the Prevention of Developmental Disabilities.  (c) The abolition of a state agency or entity listed in Subsection (a) or (b) and the transfer of its functions and related obligations, rights, contracts, records, property, and funds as provided by this subchapter and the transfer of functions and related obligations, rights, contracts, records, property, and funds to or from the Department of Family and Protective Services and from the Department of State Health Services as provided by this subchapter do not affect or impair an act done, any obligation, right, order, permit, certificate, rule, criterion, standard, or requirement existing, or any penalty accrued under former law, and that law remains in effect for any action concerning those matters.  Sec. 531.0203. HEALTH AND HUMAN SERVICES TRANSITION LEGISLATIVE OVERSIGHT COMMITTEE. (a) In this section, "committee" means the Health and Human Services Transition Legislative Oversight Committee established under this section.  (b) The Health and Human Services Transition Legislative Oversight Committee is created to facilitate the transfer of functions under Sections 531.0201, 531.02011, and 531.02012 with minimal negative effect on the delivery of services to which those functions relate.  (c) The committee is composed of 11 voting members, as follows:  (1) four members of the senate, appointed by the lieutenant governor;  (2) four members of the house of representatives, appointed by the speaker of the house of representatives; and  (3) three members of the public, appointed by the governor.  (d) The executive commissioner serves as an ex officio, nonvoting member of the committee.  (e) A member of the committee serves at the pleasure of the appointing official.  (f) The lieutenant governor and the speaker of the house of representatives shall each designate a presiding co-chair from among their respective appointments.  (g) A member of the committee may not receive compensation for serving on the committee but is entitled to reimbursement for travel expenses incurred by the member while conducting the business of the committee as provided by the General Appropriations Act.  (h) The committee shall:  (1) facilitate the transfer of functions under Sections 531.0201, 531.02011, and 531.02012 with minimal negative effect on the delivery of services to which those functions relate;  (2) with assistance from the commission and the state agencies and entities from which functions are transferred under Sections 531.0201, 531.02011, and 531.02012, advise the executive commissioner concerning:  (A) the functions to be transferred under this subchapter and the funds and obligations that are related to the functions;  (B) the transfer of the functions and related records, property, funds, and obligations by the state agencies and entities as provided by this subchapter; and  (C) the reorganization of the commission's administrative structure in accordance with this subchapter, Sections 531.0055, 531.00553, 531.00561, 531.00562, and 531.008, and other provisions enacted by the 84th Legislature that become law; and  (3) meet:  (A) during the period between the establishment of the committee and September 1, 2017, at least quarterly at the call of either chair, in addition to meeting at other times as determined appropriate by either chair;  (B) during the period between September 2, 2017, and December 31, 2019, at least semiannually at the call of either chair, in addition to meeting at other times as determined appropriate by either chair; and  (C) during the period between January 1, 2020, and August 31, 2023, at least annually at the call of either chair, in addition to meeting at other times as determined appropriate by either chair.  (i) Chapter 551 applies to the committee.  (j) The committee shall submit a report to the governor, lieutenant governor, speaker of the house of representatives, and legislature not later than December 1 of each even-numbered year. The report must include an update on the progress of and issues related to:  (1) the transfer of functions under Sections 531.0201, 531.02011, and 531.02012 to the commission and the Department of Family and Protective Services, including the need for any additional statutory changes required to complete the transfer of prevention and early intervention services functions to the department in accordance with this subchapter; and  (2) the reorganization of the commission's administrative structure in accordance with this subchapter, Sections 531.0055, 531.00553, 531.00561, 531.00562, and 531.008, and other provisions enacted by the 84th Legislature that become law.  (k) The committee is abolished September 1, 2023.  Sec. 531.02031. STUDY ON CONTINUING NEED FOR CERTAIN STATE AGENCIES. (a) Not later than September 1, 2018, the executive commissioner shall conduct a study and submit a report and recommendation to the Health and Human Services Transition Legislative Oversight Committee regarding the need to continue the Department of Family and Protective Services and the Department of State Health Services as state agencies separate from the commission.  (b) Not later than December 1, 2018, the Health and Human Services Transition Legislative Oversight Committee shall review the report and recommendation submitted under Subsection (a) and submit a report and recommendation to the legislature regarding the need to continue the Department of Family and Protective Services and the Department of State Health Services as state agencies separate from the commission.  (c) The Health and Human Services Transition Legislative Oversight Committee shall include the following in the report submitted to the legislature under Subsection (b):  (1) an evaluation of the transfer of prevention and early intervention services functions to the Department of Family and Protective Services as provided by this subchapter, including an evaluation of:  (A) any increased coordination and efficiency in the operation of the programs achieved as a result of the transfer;  (B) the department's coordination with other state agency programs providing similar prevention and early intervention services; and  (C) the department's interaction with stakeholders and other interested parties in performing the department's functions; and  (2) any recommendations concerning the transfer of prevention and early intervention services functions of the department to another state agency.  Sec. 531.0204. TRANSITION PLAN FOR IMPLEMENTATION OF CONSOLIDATION. (a) The transfers of functions under Sections 531.0201, 531.02011, and 531.02012 must be accomplished in accordance with a transition plan developed by the executive commissioner that ensures that the transfers and provision of health and human services in this state are accomplished in a careful and deliberative manner. The transition plan must:  (1) include an outline of the commission's reorganized structure, including its divisions, in accordance with this subchapter, Sections 531.00561, 531.00562, and 531.008, and other provisions enacted by the 84th Legislature that become law;  (2) include details regarding movement of functions and a timeline that, subject to the periods prescribed by Section 531.02001, specifies the dates on which:  (A) the transfers under Sections 531.0201, 531.02011, and 531.02012 are to be made;  (B) each state agency or entity subject to abolition under Section 531.0202 is abolished; and  (C) each division of the commission is created and the division's director is appointed;  (3) for purposes of Sections 531.0201, 531.02011, and 531.02013, define:  (A) client services functions;  (B) regulatory functions;  (C) public health functions; and  (D) functions related to:  (i) state-operated institutions;  (ii) child protective services;  (iii) adult protective services; and  (iv) prevention and early intervention services; and  (4) include an evaluation and determination of the feasibility and potential effectiveness of consolidating administrative support services into the commission in accordance with Section 531.02012, including a report of:  (A) the specific support services that will be consolidated within the commission;  (B) a timeline that details when specific support services will be consolidated, including a description of the support services that will transfer by the last day of each period prescribed by Section 531.02001; and  (C) measures the commission will take to ensure information resources and contracting support services continue to operate properly across the health and human services system under any consolidation of administrative support services.  (b) In defining the transferred functions under Subsection (a)(3), the executive commissioner shall ensure that:  (1) not later than the last day of the period prescribed by Section 531.02001(1), all functions of a state agency or entity subject to abolition under Section 531.0202(a) are transferred to the commission or the Department of Family and Protective Services, as applicable;  (2) the transferred prevention and early intervention services functions to the Department of Family and Protective Services include:  (A) prevention and early intervention services as defined under Section 265.001, Family Code; and  (B) programs that:  (i) provide parent education;  (ii) promote healthier parent-child relationships; or  (iii) prevent family violence; and  (3) not later than the last day of the period prescribed by Section 531.02001(2), all functions of the state agency and entity subject to abolition under Section 531.0202(b) are transferred to the commission.  (c) In developing the transition plan, the executive commissioner shall, before submitting the plan to the Health and Human Services Transition Legislative Oversight Committee, the governor, and the Legislative Budget Board as required by Subsection (e):  (1) hold public hearings in various geographic areas in this state regarding the plan; and  (2) solicit and consider input from appropriate stakeholders.  (d) Within the periods prescribed by Section 531.02001:  (1) the commission shall begin administering the respective functions assigned to the commission under Sections 531.0201 and 531.02011, as applicable; and  (2) the Department of Family and Protective Services shall begin administering the functions assigned to the department under Section 531.0201.  (d-1) The assumption of the administration of the functions transferred to the commission and the Department of Family and Protective Services under Sections 531.0201 and 531.02011, as applicable, must be accomplished in accordance with the transition plan.  (e) The executive commissioner shall submit the transition plan to the Health and Human Services Transition Legislative Oversight Committee, the governor, and the Legislative Budget Board not later than March 1, 2016. The Health and Human Services Transition Legislative Oversight Committee shall comment on and make recommendations to the executive commissioner regarding any concerns or adjustments to the transition plan the committee determines appropriate. The executive commissioner may not finalize the transition plan until the executive commissioner has reviewed and considered the comments and recommendations of the committee regarding the transition plan.  (f) The executive commissioner shall publish in the Texas Register:  (1) the transition plan developed under this section;  (2) any adjustments to the transition plan recommended by the Health and Human Services Transition Legislative Oversight Committee;  (3) a statement regarding whether the executive commissioner adopted or otherwise incorporated the recommended adjustments; and  (4) if the executive commissioner did not adopt a recommended adjustment, the justification for not adopting the adjustment.  Sec. 531.02041. REQUIRED REPORTS AFTER TRANSITION PLAN SUBMISSION. If, at any time after the executive commissioner submits the transition plan in accordance with Section 531.0204(e), the executive commissioner proposes to make a substantial organizational change to the health and human services system that was not included in the transition plan, the executive commissioner shall, before implementing the proposed change, submit a report detailing the proposed change to the Health and Human Services Transition Legislative Oversight Committee.  Sec. 531.0205. APPLICABILITY OF FORMER LAW. An action brought or proceeding commenced before the date of a transfer prescribed by this subchapter in accordance with the transition plan required under Section 531.0204, including a contested case or a remand of an action or proceeding by a reviewing court, is governed by the laws and rules applicable to the action or proceeding before the transfer.  Sec. 531.0206. LIMITED-SCOPE SUNSET REVIEW. (a) The Sunset Advisory Commission shall conduct a limited-scope review of the commission during the state fiscal biennium ending August 31, 2023, in the manner provided by Chapter 325 (Texas Sunset Act). The review must provide:  (1) an update on the commission's progress with respect to the consolidation of the health and human services system mandated by this subchapter, including the commission's compliance with the transition plan required under Section 531.0204;  (2) an evaluation and recommendations regarding the need to continue the Department of Family and Protective Services and the Department of State Health Services as state agencies separate from the commission; and  (3) any additional information the Sunset Advisory Commission determines appropriate, including information regarding any additional organizational changes the Sunset Advisory Commission recommends.  (b) The commission is not abolished solely because the commission is not explicitly continued following the review required by this section.  Sec. 531.0207. EXPIRATION OF SUBCHAPTER. This subchapter expires September 1, 2023.  (b) Not later than October 1, 2015:  (1) the lieutenant governor, the speaker of the house of representatives, and the governor shall make the appointments to the Health and Human Services Transition Legislative Oversight Committee as required by Section 531.0203(c), Government Code, as added by this article; and  (2) the lieutenant governor and the speaker of the house of representatives shall each designate a presiding co-chair of the Health and Human Services Transition Legislative Oversight Committee in accordance with Section 531.0203(f), Government Code, as added by this article.  (c) As soon as appropriate under the consolidation under Subchapter A-1, Chapter 531, Government Code, as added by this article, and in a manner that minimizes disruption of services, the Health and Human Services Commission shall take appropriate action to be designated as the state agency responsible under federal law for any state or federal program that is transferred to the commission in accordance with that subchapter and for which federal law requires the designation of a responsible state agency.  (d) Notwithstanding Section 531.0201, 531.02011, or 531.02012, Government Code, as added by this article, a power, duty, program, function, or activity of the Department of Assistive and Rehabilitative Services may not be transferred to the Health and Human Services Commission under that section if:  (1) H.B. No. 3294 or S.B. No. 208, 84th Legislature, Regular Session, 2015, or similar legislation of the 84th Legislature, Regular Session, 2015, is enacted, becomes law, and provides for the transfer of the power, duty, program, function, or activity to the Texas Workforce Commission subject to receipt of any necessary federal approval or other authorization for the transfer to occur; and  (2) the Department of Assistive and Rehabilitative Services or the Texas Workforce Commission receives the necessary federal approval or other authorization to enable the transfer to occur not later than September 1, 2016.  (e) If neither the Department of Assistive and Rehabilitative Services nor the Texas Workforce Commission receives the federal approval or other authorization described by Subsection (d) of this section to enable the transfer of the power, duty, program, function, or activity to the Texas Workforce Commission to occur not later than September 1, 2016, as provided by the legislation described by Subsection (d) of this section, the power, duty, program, function, or activity of the Department of Assistive and Rehabilitative Services transfers to the Health and Human Services Commission in accordance with Section 531.0201, Government Code, as added by this article, and the transition plan required under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision.  No equivalent provision. | SECTION 1.02. Subchapter A, Chapter 531, Government Code, is amended by adding Sections 531.0011 and 531.0012 to read as follows:  Sec. 531.0011. REFERENCES IN LAW MEANING COMMISSION OR APPROPRIATE DIVISION. (a) In this code or in any other law, a reference to any of the following state agencies or entities in relation to a function transferred to the commission under Section 531.0201, 531.02011, or 531.02012, as applicable, means the commission or the division of the commission performing the function previously performed by the state agency or entity before the transfer, as appropriate:  (1) health and human services agency;  (2) the Department of State Health Services;  (3) the Department of Aging and Disability Services;  (4) the Department of Family and Protective Services; or  (5) the Department of Assistive and Rehabilitative Services.  (b) In this code or in any other law and notwithstanding any other law, a reference to any of the following state agencies or entities in relation to a function transferred to the commission under Section 531.0201, 531.02011, or 531.02012, as applicable, from the state agency that assumed the relevant function in accordance with Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, means the commission or the division of the commission performing the function previously performed by the agency that assumed the function before the transfer, as appropriate:  (1) the Texas Department on Aging;  (2) the Texas Commission on Alcohol and Drug Abuse;  (3) the Texas Commission for the Blind;  (4) the Texas Commission for the Deaf and Hard of Hearing;  (5) the Texas Department of Health;  (6) the Texas Department of Human Services;  (7) the Texas Department of Mental Health and Mental Retardation;  (8) the Texas Rehabilitation Commission;  (9) the Texas Health Care Information Council; or  (10) the Interagency Council on Early Childhood Intervention.  (c) In this code or in any other law and notwithstanding any other law, a reference to the Department of Protective and Regulatory Services in relation to a function transferred under Section 531.0201, 531.02011, or 531.02012, as applicable, from the Department of Family and Protective Services means the commission or the division of the commission performing the function previously performed by the Department of Family and Protective Services before the transfer.  (d) This section applies notwithstanding Section 531.001(4).  Sec. 531.0012. REFERENCES IN LAW MEANING EXECUTIVE COMMISSIONER OR DESIGNEE. (a) In this code or in any other law, a reference to any of the following persons in relation to a function transferred to the commission under Section 531.0201, 531.02011, or 531.02012, as applicable, means the executive commissioner, the executive commissioner's designee, or the director of the division of the commission performing the function previously performed by the state agency from which it was transferred and that the person represented, as appropriate:  (1) the commissioner of aging and disability services;  (2) the commissioner of assistive and rehabilitative services;  (3) the commissioner of state health services; or  (4) the commissioner of the Department of Family and Protective Services.  (b) In this code or in any other law and notwithstanding any other law, a reference to any of the following persons or entities in relation to a function transferred to the commission under Section 531.0201, 531.02011, or 531.02012, as applicable, from the state agency that assumed or continued to perform the function in accordance with Chapter 198 (H.B. 2292), Acts of the 78th Legislature, Regular Session, 2003, means the executive commissioner or the director of the division of the commission performing the function performed before the enactment of Chapter 198 (H.B. 2292) by the state agency that was abolished or renamed by Chapter 198 (H.B. 2292) and that the person or entity represented:  (1) an executive director or other chief administrative officer of a state agency listed in Section 531.0011(b) or of the Department of Protective and Regulatory Services; or  (2) the governing body of a state agency listed in Section 531.0011(b) or of the Department of Protective and Regulatory Services.  (c) A reference to any of the following councils means the executive commissioner or the executive commissioner's designee, as appropriate, and a function of any of the following councils is a function of that appropriate person:  (1) the Health and Human Services Council;  (2) the Aging and Disability Services Council;  (3) the Assistive and Rehabilitative Services Council;  (4) the Family and Protective Services Council; or  (5) the State Health Services Council. |  |
| No equivalent provision. | SECTION 1.03. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.0051 to read as follows:  Sec. 531.0051. HEALTH AND HUMAN SERVICES COMMISSION EXECUTIVE COUNCIL. (a) The Health and Human Services Commission Executive Council is established to receive public input and advise the executive commissioner regarding the operation of the commission. The council shall seek and receive public comment on:  (1) proposed rules;  (2) recommendations of advisory committees;  (3) legislative appropriations requests or other documents related to the appropriations process;  (4) the operation of health and human services programs; and  (5) other items the executive commissioner determines appropriate.  (b) The council does not have authority to make administrative or policy decisions.  (c) The council is composed of:  (1) the executive commissioner;  (2) the director of each division established by the executive commissioner under Section 531.008(c);  (3) the commissioner of a health and human services agency; and  (4) other individuals appointed by the executive commissioner as the executive commissioner determines necessary.  (c-1) To the extent the executive commissioner appoints members to the council under Subsection (c)(4), the executive commissioner shall make every effort to ensure that those appointments result in a council membership that includes:  (1) a balanced representation of a broad range of health and human services industry and consumer interests; and  (2) representation from broad geographic regions of this state.  (d) The executive commissioner serves as the chair of the council and shall adopt rules for the operation of the council.  (e) Members of the council appointed under Subsection (c)(4):  (1) are subject to any restrictions applicable to service on the council provided by law; and  (2) serve at the pleasure of the executive commissioner.  (f) The council shall meet at the call of the executive commissioner at least quarterly. The executive commissioner may call additional meetings as the executive commissioner determines necessary.  (g) The council shall give public notice of the date, time, and place of each meeting held by the council. A live video transmission of each meeting must be publicly available through the Internet.  (h) A majority of the members of the council constitute a quorum for the transaction of business.  (i) A council member appointed under Subsection (c)(4) may not receive compensation for service as a member of the council but is entitled to reimbursement for travel expenses incurred by the member while conducting the business of the council as provided by the General Appropriations Act.  (j) The executive commissioner shall develop and implement policies that provide the public with a reasonable opportunity to appear before the council and to speak on any issue under the jurisdiction of the commission.  (k) A meeting of individual members of the council that occurs in the ordinary course of commission operation is not a meeting of the council, and the requirements of Subsection (g) do not apply.  (l) This section does not limit the authority of the executive commissioner to establish additional advisory committees or councils.  (m) Chapters 551 and 2110 do not apply to the council.  (b) As soon as possible after the executive commissioner of the Health and Human Services Commission appoints division directors in accordance with Section 531.00561, Government Code, as added by this article, the Health and Human Services Commission Executive Council established under Section 531.0051, Government Code, as added by this article, shall begin operation. |  |
| No equivalent provision. | SECTION 1.04. The heading to Section 531.0055, Government Code, is amended to read as follows:  Sec. 531.0055. EXECUTIVE COMMISSIONER: GENERAL RESPONSIBILITY FOR HEALTH AND HUMAN SERVICES SYSTEM [~~AGENCIES~~]. |  |
| No equivalent provision. | SECTION 1.05. Section 531.0055, Government Code, is amended by amending Subsection (b), as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, and amending Subsections (d), (e), (f), (g), (h), (k), and (l) to read as follows:  (b) The commission shall:  (1) supervise the administration and operation of Medicaid, including the administration and operation of the Medicaid managed care system in accordance with Section 531.021;  (2) perform information systems planning and management for the health and human services system [~~agencies~~] under Section 531.0273, with:  (A) the provision of information technology services for the [~~at~~] health and human services system [~~agencies~~] considered to be a centralized administrative support service either performed by commission personnel or performed under a contract with the commission; and  (B) an emphasis on research and implementation on a demonstration or pilot basis of appropriate and efficient uses of new and existing technology to improve the operation of the health and human services system [~~agencies~~] and delivery of health and human services;  (3) monitor and ensure the effective use of all federal funds received for the [~~by a~~] health and human services system [~~agency~~] in accordance with Section 531.028 and the General Appropriations Act;  (4) implement Texas Integrated Enrollment Services as required by Subchapter F, except that notwithstanding Subchapter F, determining eligibility for benefits under the following programs is the responsibility of and must be centralized by the commission:  (A) the child health plan program;  (B) the financial assistance program under Chapter 31, Human Resources Code;  (C) Medicaid;  (D) the supplemental nutrition assistance program under Chapter 33, Human Resources Code;  (E) long-term care services, as defined by Section 22.0011, Human Resources Code;  (F) community-based support services identified or provided in accordance with Section 531.02481; and  (G) other health and human services programs, as appropriate; and  (5) implement programs intended to prevent family violence and provide services to victims of family violence.  (d) After implementation of the commission's duties under Subsections (b) and (c), the commission shall implement the powers and duties given to the commission under Section 531.0248. Nothing in the priorities established by this section is intended to limit the authority of the commission to work simultaneously to achieve the multiple tasks assigned to the commission in this section, when such an approach is beneficial in the judgment of the commission. The commission shall plan and implement an efficient and effective centralized system of administrative support services for the health and human services system in accordance with Section 531.00553 [~~agencies~~]. [~~The performance of administrative support services for health and human services agencies is the responsibility of the commission. The term "administrative support services" includes, but is not limited to, strategic planning and evaluation, audit, legal, human resources, information resources, purchasing, contract management, financial management, and accounting services.~~]  (e) Notwithstanding any other law, the executive commissioner shall adopt rules and policies for the operation of and provision of health and human services by the health and human services system [~~agencies~~]. In addition, the executive commissioner, as necessary to perform the functions described by Subsections (b), (c), and (d) and Section 531.00553 in implementation of applicable policies established for a health and human services system [~~an~~] agency or division, as applicable, by the executive commissioner, shall:  (1) manage and direct the operations of each [~~health and human services~~] agency or division, as applicable;  (2) supervise and direct the activities of each agency or division director, as applicable; and  (3) be responsible for the administrative supervision of the internal audit program for the [~~all~~] health and human services system agencies, including:  (A) selecting the director of internal audit;  (B) ensuring that the director of internal audit reports directly to the executive commissioner; and  (C) ensuring the independence of the internal audit function.  (f) The operational authority and responsibility of the executive commissioner for purposes of Subsection (e) for [~~at~~] each health and human services system agency or division, as applicable, includes authority over and responsibility for the:  (1) management of the daily operations of the agency or division, including the organization and management of the agency or division and its [~~agency~~] operating procedures;  (2) allocation of resources within the agency or division, including use of federal funds received by the agency or division;  (3) personnel and employment policies;  (4) contracting, purchasing, and related policies, subject to this chapter and other laws relating to contracting and purchasing by a state agency;  (5) information resources systems used by the agency or division;  (6) location of [~~agency~~] facilities; and  (7) coordination of agency or division activities with activities of other components of the health and human services system and state agencies[~~, including other health and human services agencies~~].  (g) Notwithstanding any other law, the operational authority and responsibility of the executive commissioner for purposes of Subsection (e) for [~~at~~] each health and human services system agency or division, as applicable, includes the authority and responsibility to adopt or approve, subject to applicable limitations, any rate of payment or similar provision required by law to be adopted or approved by a health and human services system [~~the~~] agency.  (h) For each health and human services system agency and division, as applicable, the executive commissioner shall implement a program to evaluate and supervise [~~the~~] daily operations [~~of the agency~~]. The program must include measurable performance objectives for each agency or division director and adequate reporting requirements to permit the executive commissioner to perform the duties assigned to the executive commissioner under this section.  (k) The executive commissioner and each agency director shall enter into a memorandum of understanding in the manner prescribed by Section 531.0163 that:  (1) clearly defines the responsibilities of the agency director and the executive commissioner, including:  (A) the responsibility of the agency director to report to the governor and to report to and implement policies of the executive commissioner; and  (B) the extent to which the agency director acts as a liaison between the agency and the commission;  (2) establishes the program of evaluation and supervision of daily operations required by Subsection (h); [~~and~~]  (3) describes each delegation of a power or duty made to an agency director; and  (4) ensures that the commission and each health and human services agency has access to databases or other information maintained or kept by each other agency that is necessary for the operation of a function performed by the commission or the health and human services agency, to the extent not prohibited by other law [~~under Subsection (i) or other law~~].  (l) Notwithstanding any other law, the executive commissioner has the authority to adopt policies and rules governing the delivery of services to persons who are served by the [~~each~~] health and human services system [~~agency~~] and the rights and duties of persons who are served or regulated by the system [~~each agency~~]. |  |
| No equivalent provision. | SECTION 1.06. Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.00553 to read as follows:  Sec. 531.00553. ADMINISTRATIVE SUPPORT SERVICES. (a) In this section, the term "administrative support services" includes strategic planning and evaluation, audit, legal, human resources, information resources, purchasing, contracting, financial management, and accounting services.  (b) Subject to Subsection (c), the executive commissioner shall plan and implement an efficient and effective centralized system of administrative support services for the health and human services system. The performance of administrative support services for the health and human services system is the responsibility of the commission.  (c) The executive commissioner shall plan and implement the centralized system of administrative support services in accordance with the following principles and requirements:  (1) the executive commissioner shall consult with the commissioner of each agency and with the director of each division within the health and human services system to ensure the commission is responsive to and addresses agency or division needs;  (2) consolidation of staff providing the support services must be done in a manner that ensures each agency or division within the health and human services system that loses staff as a result of the centralization of support services has adequate resources to carry out functions of the agency or division, as appropriate; and  (3) the commission and each agency or division within the health and human services system shall, as appropriate, enter into a memorandum of understanding or other written agreement for the purpose of ensuring accountability for the provision of administrative services by clearly detailing:  (A) the responsibilities of each agency or division and the commission;  (B) the points of contact for each agency or division and the commission;  (C) the transfer of personnel among each agency or division and the commission;  (D) the budgetary effect the agreement has on each agency or division and the commission; and  (E) any other item determined by the executive commissioner to be critical for maintaining accountability.  (d) The memorandum of understanding or other agreement required under Subsection (c), if appropriate, may be combined with the memorandum of understanding required under Section 531.0055(k). |  |
| No equivalent provision. | SECTION 1.07. Section 531.0056, Government Code, is amended by adding Subsection (g) to read as follows:  (g) The requirements of this section apply with respect to a state agency listed in Section 531.001(4) only until the agency is abolished under Section 531.0202. |  |
| No equivalent provision. | SECTION 1.08. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Sections 531.00561 and 531.00562 to read as follows:  Sec. 531.00561. APPOINTMENT AND QUALIFICATIONS OF DIVISION DIRECTORS. (a) The executive commissioner shall appoint a director for each division established within the commission under Section 531.008, except that the director of the office of inspector general is appointed in accordance with Section 531.102(a-1).  (b) The executive commissioner shall:  (1) develop clear qualifications for the director of each division appointed under this section that ensure that an individual appointed director has:  (A) demonstrated experience in fields relevant to the director position; and  (B) executive-level administrative and leadership experience; and  (2) ensure the qualifications developed under Subdivision (1) are publicly available.  Sec. 531.00562. DIVISION DIRECTOR DUTIES. (a) The executive commissioner shall clearly define the duties and responsibilities of a division director and develop clear policies for the delegation of specific decision-making authority, including budget authority, to division directors.  (b) The delegation of decision-making authority should be significant enough to ensure the efficient administration of the commission's programs and services.  (b) The executive commissioner of the Health and Human Services Commission shall implement Sections 531.00561 and 531.00562, Government Code, as added by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision. | SECTION 1.09. (a) Section 531.008, Government Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows:  Sec. 531.008. DIVISIONS OF COMMISSION. (a) The [~~Subject to Subsection (c), the~~] executive commissioner shall [~~may~~] establish divisions within the commission along functional lines as necessary for effective administration and for the discharge of the commission's functions.  (b) The [~~Subject to Subsection (c), the~~] executive commissioner may allocate and reallocate functions among the commission's divisions.  (c) Notwithstanding Subsections (a) and (b), the [~~The~~] executive commissioner shall establish the following divisions and offices within the commission:  (1) a medical and social services division [~~the eligibility services division to make eligibility determinations for services provided through the commission or a health and human services agency related to:~~  [~~(A) the child health plan program;~~  [~~(B) the financial assistance program under Chapter 31, Human Resources Code;~~  [~~(C) Medicaid;~~  [~~(D) the supplemental nutrition assistance program under Chapter 33, Human Resources Code;~~  [~~(E) long-term care services, as defined by Section 22.0011, Human Resources Code;~~  [~~(F) community-based support services identified or provided in accordance with Section 531.02481; and~~  [~~(G) other health and human services programs, as appropriate~~];  (2) the office of inspector general to perform fraud and abuse investigation and enforcement functions as provided by Subchapter C and other law;  (3) a regulatory division [~~the office of the ombudsman to:~~  [~~(A) provide dispute resolution services for the commission and the health and human services agencies; and~~  [~~(B) perform consumer protection functions related to health and human services~~];  (4) an administrative division [~~a purchasing division as provided by Section 531.017~~]; and  (5) a facilities division for the purpose of administering state facilities, including state hospitals and state supported living centers [~~an internal audit division to conduct a program of internal auditing in accordance with Chapter 2102~~].  (d) Subsection (c) does not prohibit the executive commissioner from establishing additional divisions under Subsection (a) as the executive commissioner determines appropriate. This subsection and Subsection (c) expire September 1, 2023.  (b) The executive commissioner of the Health and Human Services Commission shall establish divisions within the commission as required under Section 531.008, Government Code, as amended by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision. | SECTION 1.10. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.0083 to read as follows:  Sec. 531.0083. OFFICE OF POLICY AND PERFORMANCE. (a) In this section, "office" means the office of policy and performance established by this section.  (b) The executive commissioner shall establish the office of policy and performance as an executive-level office designed to coordinate policy and performance efforts across the health and human services system. To coordinate those efforts, the office shall:  (1) develop a performance management system;  (2) take the lead in supporting and providing oversight for the implementation of major policy changes and in managing organizational changes; and  (3) act as a centralized body of experts within the commission that offers program evaluation and process improvement expertise.  (c) In developing a performance management system under Subsection (b)(1), the office shall:  (1) gather, measure, and evaluate performance measures and accountability systems used by the health and human services system;  (2) develop new and refined performance measures as appropriate; and  (3) establish targeted, high-level system metrics that are capable of measuring and communicating overall performance and achievement of goals by the health and human services system to both internal and public audiences through various mechanisms, including the Internet.  (d) In providing support and oversight for the implementation of policy or organizational changes within the health and human services system under Subsection (b)(2), the office shall:  (1) ensure individuals receiving services from or participating in programs administered through the health and human services system do not lose visibility or attention during the implementation of any new policy or organizational change by:  (A) establishing timelines and milestones for any transition;  (B) supporting staff of the health and human services system in any change between service delivery methods; and  (C) providing feedback to executive management on technical assistance and other support needed to achieve a successful transition;  (2) address cultural differences among staff of the health and human services system; and  (3) track and oversee changes in policy or organization mandated by legislation or administrative rule.  (e) In acting as a centralized body of experts under Subsection (b)(3), the office shall:  (1) for the health and human services system, provide program evaluation and process improvement guidance both generally and for specific projects identified with executive or stakeholder input or through risk analysis; and  (2) identify and monitor cross-functional efforts involving different administrative components within the health and human services system and the establishment of cross-functional teams when necessary to improve the coordination of services provided through the system.  (f) The executive commissioner may otherwise develop the office's structure and duties as the executive commissioner determines appropriate.  (b) As soon as practicable after the effective date of this article but not later than October 1, 2015, the executive commissioner of the Health and Human Services Commission shall establish the office of policy and performance as an executive office within the commission as required under Section 531.0083, Government Code, as added by this article.  (c) The office of policy and performance required under Section 531.0083, Government Code, as added by this article, shall assist the Health and Human Services Transition Legislative Oversight Committee created under Section 531.0203, Government Code, as added by this article, by performing the functions required of the office under Section 531.0083(b)(2), Government Code, as added by this article, with respect to the consolidation mandated by Subchapter A-1, Chapter 531, Government Code, as added by this article. |  |
| No equivalent provision. | SECTION 1.11. Section 531.017, Government Code, is amended to read as follows:  Sec. 531.017. PURCHASING UNIT [~~DIVISION~~]. (a) The commission shall establish a purchasing unit [~~division~~] for the management of administrative activities related to the purchasing functions within [~~of the commission and~~] the health and human services system [~~agencies~~].  (b) The purchasing unit [~~division~~] shall:  (1) seek to achieve targeted cost reductions, increase process efficiencies, improve technological support and customer services, and enhance purchasing support within the [~~for each~~] health and human services system [~~agency~~]; and  (2) if cost-effective, contract with private entities to perform purchasing functions for the [~~commission and the~~] health and human services system [~~agencies~~]. |  |
| No equivalent provision. | SECTION 1.12. Chapter 265, Family Code, is amended by designating Sections 265.001 through 265.004 as Subchapter A and adding a subchapter heading to read as follows:  SUBCHAPTER A. PREVENTION AND EARLY INTERVENTION SERVICES |  |
| No equivalent provision. | SECTION 1.13. Section 265.002, Family Code, is amended to read as follows:  Sec. 265.002. PREVENTION AND EARLY INTERVENTION SERVICES DIVISION. (a) The department shall operate a division to provide services for children in at-risk situations and for the families of those children and to achieve the consolidation of prevention and early intervention services within the jurisdiction of a single agency in order to avoid fragmentation and duplication of services and to increase the accountability for the delivery and administration of these services. The division shall be called the prevention and early intervention services division and shall have the following duties:  (1) to plan, develop, and administer a comprehensive and unified delivery system of prevention and early intervention services to children and their families in at-risk situations;  (2) to improve the responsiveness of services for at-risk children and their families by facilitating greater coordination and flexibility in the use of funds by state and local service providers;  (3) to provide greater accountability for prevention and early intervention services in order to demonstrate the impact or public benefit of a program by adopting outcome measures; and  (4) to assist local communities in the coordination and development of prevention and early intervention services in order to maximize federal, state, and local resources.  (b) The department's prevention and early intervention services division must be organizationally separate from the department's divisions performing child protective services and adult protective services functions. |  |
| No equivalent provision. | SECTION 1.14. Subchapter A, Chapter 265, Family Code, as added by this article, is amended by adding Section 265.006 to read as follows:  Sec. 265.006. PROHIBITION ON USE OF AGENCY NAME OR LOGO. The department may not allow the use of the department's name or identifying logo or insignia on forms or other materials related to the department's prevention and early intervention services that are:  (1) provided by the department's contractors; or  (2) distributed by the department's contractors to the department's clients. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 1.15. (a) Subchapter Q, Chapter 531, Government Code, including provisions amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is transferred to Chapter 265, Family Code, redesignated as Subchapter C, Chapter 265, Family Code, and amended to read as follows:  SUBCHAPTER C [~~Q~~]. NURSE-FAMILY PARTNERSHIP COMPETITIVE GRANT PROGRAM  Sec. 265.101 [~~531.651~~]. DEFINITIONS. In this subchapter:  (1) "Competitive grant program" means the nurse-family partnership competitive grant program established under this subchapter.  (2) "Partnership program" means a nurse-family partnership program.  Sec. 265.102 [~~531.652~~]. OPERATION OF NURSE-FAMILY PARTNERSHIP COMPETITIVE GRANT PROGRAM. (a) The department [~~commission~~] shall operate a nurse-family partnership competitive grant program through which the department [~~commission~~] will award grants for the implementation of nurse-family partnership programs, or the expansion of existing programs, and for the operation of those programs for a period of not less than two years.  (b) The department [~~commission~~] shall award grants under the program to applicants, including applicants operating existing programs, in a manner that ensures that the partnership programs collectively:  (1) operate in multiple communities that are geographically distributed throughout this state; and  (2) provide program services to approximately 2,000 families.  Sec. 265.103 [~~531.653~~]. PARTNERSHIP PROGRAM REQUIREMENTS. A partnership program funded through a grant awarded under this subchapter must:  (1) strictly adhere to the program model developed by the Nurse-Family Partnership National Service Office, including any clinical, programmatic, and data collection requirements of that model;  (2) require that registered nurses regularly visit the homes of low-income, first-time mothers participating in the program to provide services designed to:  (A) improve pregnancy outcomes;  (B) improve child health and development;  (C) improve family economic self-sufficiency and stability; and  (D) reduce the incidence of child abuse and neglect;  (3) require that nurses who provide services through the program:  (A) receive training from the office of the attorney general at least once each year on procedures by which a person may voluntarily acknowledge the paternity of a child and on the availability of child support services from the office;  (B) provide a mother with information about the rights, responsibilities, and benefits of establishing the paternity of her child, if appropriate;  (C) provide assistance to a mother and the alleged father of her child if the mother and alleged father seek to voluntarily acknowledge paternity of the child, if appropriate; and  (D) provide information to a mother about the availability of child support services from the office of the attorney general; and  (4) require that the regular nurse visits described by Subdivision (2) begin not later than a mother's 28th week of gestation and end when her child reaches two years of age.  Sec. 265.104 [~~531.654~~]. APPLICATION. (a) A public or private entity, including a county, municipality, or other political subdivision of this state, may apply for a grant under this subchapter.  (b) To apply for a grant, an applicant must submit a written application to the department [~~commission~~] on a form prescribed by the department [~~commission~~] in consultation with the Nurse-Family Partnership National Service Office.  (c) The application prescribed by the department [~~commission~~] must:  (1) require the applicant to provide data on the number of low-income, first-time mothers residing in the community in which the applicant proposes to operate or expand a partnership program and provide a description of existing services available to those mothers;  (2) describe the ongoing monitoring and evaluation process to which a grant recipient is subject under Section 265.109 [~~531.659~~], including the recipient's obligation to collect and provide information requested by the department [~~commission~~] under Section 265.109(c) [~~531.659(c)~~]; and  (3) require the applicant to provide other relevant information as determined by the department [~~commission~~].  Sec. 265.105 [~~531.655~~]. ADDITIONAL CONSIDERATIONS IN AWARDING GRANTS. In addition to the factors described by Sections 265.102(b) [~~531.652(b)~~] and 265.103 [~~531.653~~], in determining whether to award a grant to an applicant under this subchapter, the department [~~commission~~] shall consider:  (1) the demonstrated need for a partnership program in the community in which the applicant proposes to operate or expand the program, which may be determined by considering:  (A) the poverty rate, the crime rate, the number of births to Medicaid recipients, the rate of poor birth outcomes, and the incidence of child abuse and neglect during a prescribed period in the community; and  (B) the need to enhance school readiness in the community;  (2) the applicant's ability to participate in ongoing monitoring and performance evaluations under Section 265.109 [~~531.659~~], including the applicant's ability to collect and provide information requested by the department [~~commission~~] under Section 265.109(c) [~~531.659(c)~~];  (3) the applicant's ability to adhere to the partnership program standards adopted under Section 265.106 [~~531.656~~];  (4) the applicant's ability to develop broad-based community support for implementing or expanding a partnership program, as applicable; and  (5) the applicant's history of developing and sustaining innovative, high-quality programs that meet the needs of families and communities.  Sec. 265.106 [~~531.656~~]. PARTNERSHIP PROGRAM STANDARDS. The executive commissioner, with the assistance of the Nurse-Family Partnership National Service Office, shall adopt standards for the partnership programs funded under this subchapter. The standards must adhere to the Nurse-Family Partnership National Service Office program model standards and guidelines that were developed in multiple, randomized clinical trials and have been tested and replicated in multiple communities.  Sec. 265.107 [~~531.657~~]. USE OF AWARDED GRANT FUNDS. The grant funds awarded under this subchapter may be used only to cover costs related to implementing or expanding and operating a partnership program, including costs related to:  (1) administering the program;  (2) training and managing registered nurses who participate in the program;  (3) paying the salaries and expenses of registered nurses who participate in the program;  (4) paying for facilities and equipment for the program; and  (5) paying for services provided by the Nurse-Family Partnership National Service Office to ensure a grant recipient adheres to the organization's program model.  Sec. 265.108 [~~531.658~~]. STATE NURSE CONSULTANT. Using money appropriated for the competitive grant program, the department [~~commission~~] shall hire or contract with a state nurse consultant to assist grant recipients with implementing or expanding and operating the partnership programs in the applicable communities.  Sec. 265.109 [~~531.659~~]. PROGRAM MONITORING AND EVALUATION; ANNUAL COMMITTEE REPORTS. (a) The department [~~commission~~], with the assistance of the Nurse-Family Partnership National Service Office, shall:  (1) adopt performance indicators that are designed to measure a grant recipient's performance with respect to the partnership program standards adopted by the executive commissioner under Section 265.106 [~~531.656~~];  (2) use the performance indicators to continuously monitor and formally evaluate on an annual basis the performance of each grant recipient; and  (3) prepare and submit an annual report, not later than December 1 of each year, to the Senate Health and Human Services Committee, or its successor, and the House Human Services Committee, or its successor, regarding the performance of each grant recipient during the preceding state fiscal year with respect to providing partnership program services.  (b) The report required under Subsection (a)(3) must include:  (1) the number of low-income, first-time mothers to whom each grant recipient provided partnership program services and, of that number, the number of mothers who established the paternity of an alleged father as a result of services provided under the program;  (2) the extent to which each grant recipient made regular visits to mothers during the period described by Section 265.103(4) [~~531.653(4)~~]; and  (3) the extent to which each grant recipient adhered to the Nurse-Family Partnership National Service Office's program model, including the extent to which registered nurses:  (A) conducted home visitations comparable in frequency, duration, and content to those delivered in Nurse-Family Partnership National Service Office clinical trials; and  (B) assessed the health and well-being of mothers and children participating in the partnership programs in accordance with indicators of maternal, child, and family health defined by the department [~~commission~~] in consultation with the Nurse-Family Partnership National Service Office.  (c) On request, each grant recipient shall timely collect and provide data and any other information required by the department [~~commission~~] to monitor and evaluate the recipient or to prepare the report required by this section.  Sec. 265.110 [~~531.660~~]. COMPETITIVE GRANT PROGRAM FUNDING. (a) The department [~~commission~~] shall actively seek and apply for any available federal funds, including federal Medicaid and Temporary Assistance for Needy Families (TANF) funds, to assist in financing the competitive grant program established under this subchapter.  (b) The department [~~commission~~] may use appropriated funds from the state government and may accept gifts, donations, and grants of money from the federal government, local governments, private corporations, or other persons to assist in financing the competitive grant program.  (b) Notwithstanding the transfer of Subchapter Q, Chapter 531, Government Code, to Chapter 265, Family Code, and redesignation as Subchapter C of that chapter, the Health and Human Services Commission shall continue to administer the Nurse-Family Partnership Competitive Grant Program under that subchapter until the date the program transfers to the Department of Family and Protective Services in accordance with Section 531.0201, Government Code, as added by this article, and the transition plan under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision. | SECTION 1.16. Effective September 1, 2017, Section 1001.002, Health and Safety Code, is amended to read as follows:  Sec. 1001.002. AGENCY AND AGENCY FUNCTIONS. (a) In this section, "function" includes a power, duty, program, or activity and an administrative support services function associated with the power, duty, program, or activity, unless consolidated under Section 531.02012, Government Code.  (b) The department is an agency of the state.  (c) In accordance with Subchapter A-1, Chapter 531, Government Code, and notwithstanding any other law, the department performs only functions related to public health, including health care data collection and maintenance of the Texas Health Care Information Collection program. |  |
| No equivalent provision. | SECTION 1.17. Effective September 1, 2017, Subchapter A, Chapter 1001, Health and Safety Code, is amended by adding Sections 1001.004 and 1001.005 to read as follows:  Sec. 1001.004. REFERENCES IN LAW MEANING DEPARTMENT. In this code or any other law, a reference to the department in relation to a function described by Section 1001.002(c) means the department. A reference in law to the department in relation to any other function has the meaning assigned by Section 531.0011, Government Code.  Sec. 1001.005. REFERENCES IN LAW MEANING COMMISSIONER OR DESIGNEE. In this code or in any other law, a reference to the commissioner in relation to a function described by Section 1001.002(c) means the commissioner. A reference in law to the commissioner in relation to any other function has the meaning assigned by Section 531.0012, Government Code. |  |
| No equivalent provision. | SECTION 1.18. Effective September 1, 2017, Section 40.002(b), Human Resources Code, as amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows:  (b) Except as provided by Section 40.0025 [~~Notwithstanding any other law~~], the department shall:  (1) provide protective services for children and elderly persons and persons with disabilities, including investigations of alleged abuse, neglect, or exploitation in facilities of the Department of State Health Services and the Department of Aging and Disability Services or the successor agency for either of those agencies;  (2) provide family support and family preservation services that respect the fundamental right of parents to control the education and upbringing of their children;  (3) license, register, and enforce regulations applicable to child-care facilities, child-care administrators, and child-placing agency administrators; and  (4) implement and manage programs intended to provide early intervention or prevent at-risk behaviors that lead to child abuse, delinquency, running away, truancy, and dropping out of school. |  |
| No equivalent provision. | SECTION 1.19. Effective September 1, 2017, Subchapter A, Chapter 40, Human Resources Code, is amended by adding Sections 40.0025, 40.0026, and 40.0027 to read as follows:  Sec. 40.0025. AGENCY FUNCTIONS. (a) In this section, "function" includes a power, duty, program, or activity and an administrative support services function associated with the power, duty, program, or activity, unless consolidated under Section 531.02012, Government Code.  (b) In accordance with Subchapter A-1, Chapter 531, Government Code, and notwithstanding any other law, the department performs only functions, including the statewide intake of reports and other information, related to the following services:  (1) child protective services, including services that are required by federal law to be provided by this state's child welfare agency;  (2) adult protective services, other than investigations of the alleged abuse, neglect, or exploitation of an elderly person or person with a disability:  (A) in a facility operated, or in a facility or by a person licensed, certified, or registered, by a state agency; or  (B) by a provider that has contracted to provide home and community-based services; and  (3) prevention and early intervention services functions, including:  (A) prevention and early intervention services as defined under Section 265.001, Family Code; and  (B) programs that:  (i) provide parent education;  (ii) promote healthier parent-child relationships; or  (iii) prevent family violence.  Sec. 40.0026. REFERENCES IN LAW MEANING DEPARTMENT. In this code or any other law, a reference to the department in relation to a function described by Section 40.0025(b) means the department. A reference in law to the department in relation to any other function has the meaning assigned by Section 531.0011, Government Code.  Sec. 40.0027. REFERENCES IN LAW MEANING COMMISSIONER OR DESIGNEE. In this code or in any other law, a reference to the commissioner in relation to a function described by Section 40.0025(b) means the commissioner. A reference in law to the commissioner in relation to any other function has the meaning assigned by Section 531.0012, Government Code. |  |
| No equivalent provision. | SECTION 1.20. Sections 40.0515(d) and (e), Human Resources Code, are amended to read as follows:  (d) A performance review conducted under Subsection (b)(3) is considered a performance evaluation for purposes of Section 40.032(c) of this code or Section 531.009(c), Government Code, as applicable. The department shall ensure that disciplinary or other corrective action is taken against a supervisor or other managerial employee who is required to conduct a performance evaluation for adult protective services personnel under Section 40.032(c) of this code or Section 531.009(c), Government Code, as applicable, or a performance review under Subsection (b)(3) and who fails to complete that evaluation or review in a timely manner.  (e) The annual performance evaluation required under Section 40.032(c) of this code or Section 531.009(c), Government Code, as applicable, of the performance of a supervisor in the adult protective services division must:  (1) be performed by an appropriate program administrator; and  (2) include:  (A) an evaluation of the supervisor with respect to the job performance standards applicable to the supervisor's assigned duties; and  (B) an evaluation of the supervisor with respect to the compliance of employees supervised by the supervisor with the job performance standards applicable to those employees' assigned duties. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 1.21. (a) The heading to Subchapter C, Chapter 112, Human Resources Code, is amended to read as follows:  SUBCHAPTER C. [~~OFFICE FOR THE~~] PREVENTION OF DEVELOPMENTAL DISABILITIES  (b) Section 112.042, Human Resources Code, is amended by amending Subdivision (1) and adding Subdivisions (1-a) and (1-b) to read as follows:  (1) "Commission" means the Health and Human Services Commission.  (1-a) "Developmental disability" means a severe, chronic disability that:  (A) is attributable to a mental or physical impairment or to a combination of a mental and physical impairment;  (B) is manifested before a person reaches the age of 22;  (C) is likely to continue indefinitely;  (D) results in substantial functional limitations in three or more major life activities, including:  (i) self-care;  (ii) receptive and expressive language;  (iii) learning;  (iv) mobility;  (v) self-direction;  (vi) capacity for independent living; and  (vii) economic sufficiency; and  (E) reflects the person's needs for a combination and sequence of special interdisciplinary or generic care, treatment, or other lifelong or extended services that are individually planned and coordinated.  (1-b) "Executive commissioner" means the executive commissioner of the Health and Human Services Commission.  (c) Subchapter C, Chapter 112, Human Resources Code, is amended by adding Sections 112.0421 and 112.0431 to read as follows:  Sec. 112.0421. APPLICABILITY AND EXPIRATION OF CERTAIN PROVISIONS. (a) Sections 112.041(a), 112.043, 112.045, 112.0451, 112.0452, 112.0453, 112.0454, 112.046, 112.047, 112.0471, and 112.0472 apply only until the date the executive commissioner begins to administer this subchapter and the commission assumes the duties and functions of the Office for the Prevention of Developmental Disabilities in accordance with Section 112.0431.  (b) On the date the provisions listed in Subsection (a) cease to apply, the executive committee under Section 112.045 and the board of advisors under Section 112.046 are abolished.  (c) This section and Sections 112.041(a), 112.043, 112.045, 112.0451, 112.0452, 112.0453, 112.0454, 112.046, 112.047, 112.0471, and 112.0472 expire on the last day of the period prescribed by Section 531.02001(2), Government Code.  Sec. 112.0431. ADMINISTRATION OF SUBCHAPTER; CERTAIN REFERENCES. (a) Notwithstanding any other provision in this subchapter, the executive commissioner shall administer this subchapter beginning on the date specified in the transition plan under Section 531.0204, Government Code, and the commission shall perform the duties and functions of the Office for the Prevention of Developmental Disabilities in the organizational form the executive commissioner determines appropriate.  (b) Following the assumption of the administration of this subchapter by the executive commissioner and the duties and functions by the commission in accordance with Subsection (a):  (1) a reference in this subchapter to the office, the Office for the Prevention of Developmental Disabilities, or the executive committee of that office means the commission, the division or other organizational unit within the commission designated by the executive commissioner, or the executive commissioner, as appropriate; and  (2) a reference in any other law to the Office for the Prevention of Developmental Disabilities has the meaning assigned by Subdivision (1).  (d) Section 112.044, Human Resources Code, is amended to read as follows:  Sec. 112.044. DUTIES. The office shall:  (1) educate the public and attempt to promote sound public policy regarding the prevention of developmental disabilities;  (2) identify, collect, and disseminate information and data concerning the causes, frequency of occurrence, and preventability of developmental disabilities;  (3) work with appropriate divisions within the commission, state agencies, and other entities to develop a coordinated long-range plan to effectively monitor and reduce the incidence or severity of developmental disabilities;  (4) promote and facilitate the identification, development, coordination, and delivery of needed prevention services;  (5) solicit, receive, and spend grants and donations from public, private, state, and federal sources;  (6) identify and encourage establishment of needed reporting systems to track the causes and frequencies of occurrence of developmental disabilities;  (7) develop, operate, and monitor programs created under Section 112.048 addressing [~~task forces to address~~] the prevention of specific targeted developmental disabilities;  (8) monitor and assess the effectiveness of divisions within the commission and of state agencies in preventing [~~to prevent~~] developmental disabilities;  (9) recommend the role each division within the commission and each state agency should have with regard to prevention of developmental disabilities;  (10) facilitate coordination of state agency prevention services and activities within the commission and among appropriate state agencies; and  (11) encourage cooperative, comprehensive, and complementary planning among public, private, and volunteer individuals and organizations engaged in prevention activities, providing prevention services, or conducting related research.  (e) Sections 112.048 and 112.049, Human Resources Code, are amended to read as follows:  Sec. 112.048. PREVENTION PROGRAMS FOR TARGETED DEVELOPMENTAL DISABILITIES [~~TASK FORCES~~]. (a) The executive committee shall establish guidelines for:  (1) selecting targeted disabilities;  (2) assessing prevention services needs; and  (3) reviewing [~~task force~~] plans, budgets, and operations for programs under this section.  (b) The executive committee shall [~~create task forces made up of members of the board of advisors to~~] plan and implement prevention programs for specifically targeted developmental disabilities. [~~A task force operates as an administrative division of the office and can be abolished when it is ineffective or is no longer needed.~~]  (c) A program under this section [~~task force shall~~]:  (1) must include [~~develop~~] a plan designed to reduce the incidence of a specifically targeted disability;  (2) must include [~~prepare~~] a budget for implementing a plan;  (3) must be funded [~~arrange for funds~~] through:  (A) contracts for services from participating agencies;  (B) grants and gifts from private persons and consumer and advocacy organizations; and  (C) foundation support; and  (4) must be approved by [~~submit the plan, budget, and evidence of funding commitments to~~] the executive committee [~~for approval~~].  [~~(d) A task force shall regularly report to the executive committee, as required by the committee, the operation, progress, and results of the task force's prevention plan.~~]  Sec. 112.049. EVALUATION. (a) The office shall identify or encourage the establishment of needed statistical bases for each targeted group against which the office can measure how effectively a [~~task force~~] program under Section 112.048 is reducing the frequency or severity of a targeted developmental disability.  (b) The executive committee shall regularly monitor and evaluate the results of [~~task force prevention~~] programs under Section 112.048.  (f) The heading to Section 112.050, Human Resources Code, is amended to read as follows:  Sec. 112.050. GRANTS AND OTHER FUNDING.  (g) Section 112.050, Human Resources Code, is amended by amending Subsection (c) and adding Subsection (d) to read as follows:  (c) The executive committee may not submit a legislative appropriation request for general revenue funds for purposes of this subchapter.  (d) In addition to funding under Subsection (a), the office may accept and solicit gifts, donations, and grants of money from public and private sources, including the federal government, local governments, and private entities, to assist in financing the duties and functions of the office. The commission shall support office fund-raising efforts authorized by this subsection. Funds raised under this subsection may only be spent in furtherance of a duty or function of the office or in accordance with rules applicable to the office.  (h) Section 112.051, Human Resources Code, is amended to read as follows:  Sec. 112.051. REPORTS TO LEGISLATURE. The office shall submit by February 1 of each odd-numbered year biennial reports to the legislature detailing findings of the office and the results of [~~task force prevention~~] programs under Section 112.048 and recommending improvements in the delivery of developmental disability prevention services.  (i) Notwithstanding the changes in law made by this section, the Office for the Prevention of Developmental Disabilities and any administrative entity of the Office for the Prevention of Developmental Disabilities shall continue to operate under the law as it existed before the effective date of this article, and that law is continued in effect for that purpose, until the executive commissioner of the Health and Human Services Commission begins administering Subchapter C, Chapter 112, Human Resources Code, as amended by this article, and the commission begins performing the duties and functions of the Office for the Prevention of Developmental Disabilities as required by Section 112.0431, Human Resources Code, as added by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article.  (j) The executive commissioner of the Health and Human Services Commission shall begin administering Subchapter C, Chapter 112, Human Resources Code, as amended by this article, and the commission shall begin performing the duties and functions of the Office for the Prevention of Developmental Disabilities as required by Section 112.0431, Human Resources Code, as added by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 1.22. (a) The heading to Chapter 114, Human Resources Code, is amended to read as follows:  CHAPTER 114. [~~TEXAS COUNCIL ON~~] AUTISM AND PERVASIVE DEVELOPMENTAL DISORDERS  (b) Section 114.002, Human Resources Code, is amended by adding Subdivisions (1-a) and (3) to read as follows:  (1-a) "Commission" means the Health and Human Services Commission.  (3) "Executive commissioner" means the executive commissioner of the Health and Human Services Commission.  (c) Chapter 114, Human Resources Code, is amended by adding Sections 114.0021 and 114.0031 to read as follows:  Sec. 114.0021. APPLICABILITY AND EXPIRATION OF CERTAIN PROVISIONS. (a) Sections 114.001, 114.003, 114.004, 114.005, 114.007(a), and 114.010(d) apply only until the date the executive commissioner begins to administer this chapter and the commission assumes the duties and functions of the Texas Council on Autism and Pervasive Developmental Disorders in accordance with Section 114.0031.  (b) On the date the provisions listed in Subsection (a) cease to apply, the Texas Council on Autism and Pervasive Developmental Disorders is abolished.  (c) This section and Sections 114.001, 114.003, 114.004, 114.005, 114.007(a), and 114.010(d) expire on the last day of the period prescribed by Section 531.02001(1), Government Code.  Sec. 114.0031. ADMINISTRATION OF CHAPTER; CERTAIN REFERENCES. (a) Notwithstanding any other provision in this chapter, the executive commissioner shall administer this chapter beginning on the date specified in the transition plan under Section 531.0204, Government Code, and the commission shall perform the duties and functions of the Texas Council on Autism and Pervasive Developmental Disorders in the organizational form the executive commissioner determines appropriate.  (b) Following the assumption of the administration of this chapter by the executive commissioner and the duties and functions by the commission in accordance with Subsection (a):  (1) a reference in this chapter to the council, the Texas Council on Autism and Pervasive Developmental Disorders, or an agency represented on the council means the commission, the division or other organizational unit within the commission designated by the executive commissioner, or the executive commissioner, as appropriate; and  (2) a reference in any other law to the Texas Council on Autism and Pervasive Developmental Disorders has the meaning assigned by Subdivision (1).  (d) Section 114.006(b), Human Resources Code, is amended to read as follows:  (b) The council shall make written recommendations on the implementation of this chapter. If the council considers a recommendation that will affect another state [~~an~~] agency [~~not represented on the council~~], the council shall seek the advice and assistance of the agency before taking action on the recommendation. On approval of the governing body of the agency, each agency affected by a council recommendation shall implement the recommendation. If an agency does not have sufficient funds to implement a recommendation, the agency shall request funds for that purpose in its next budget proposal.  (e) Sections 114.007(b) and (c), Human Resources Code, are amended to read as follows:  (b) The council with [~~the advice of the advisory task force and~~] input from people with autism and other pervasive developmental disorders, their families, and related advocacy organizations shall address contemporary issues affecting services available to persons with autism or other pervasive developmental disorders in this state, including:  (1) successful intervention and treatment strategies, including transitioning;  (2) personnel preparation and continuing education;  (3) referral, screening, and evaluation services;  (4) day care, respite care, or residential care services;  (5) vocational and adult training programs;  (6) public awareness strategies;  (7) contemporary research;  (8) early identification strategies;  (9) family counseling and case management; and  (10) recommendations for monitoring autism service programs.  (c) The council with [~~the advice of the advisory task force and~~] input from people with autism and other pervasive developmental disorders, their families, and related advocacy organizations shall advise the legislature on legislation that is needed to develop further and to maintain a statewide system of quality intervention and treatment services for all persons with autism or other pervasive developmental disorders. The council may develop and recommend legislation to the legislature or comment on pending legislation that affects those persons.  (f) Section 114.008, Human Resources Code, is amended to read as follows:  Sec. 114.008. REPORT. (a) [~~The agencies represented on the council and the public members shall report to the council any requirements identified by the agency or person to provide additional or improved services to persons with autism or other pervasive developmental disorders.~~] Not later than November 1 of each even-numbered year, the council shall:  (1) prepare a report summarizing requirements the council identifies and recommendations for providing additional or improved services to persons with autism or other pervasive developmental disorders; and  (2) deliver the report to the executive commissioner [~~of the Health and Human Services Commission~~], the governor, the lieutenant governor, and the speaker of the house of representatives [~~a report summarizing the recommendations~~].  (b) The council shall develop a strategy for establishing new programs to meet the requirements identified through the council's review and assessment and from input from [~~the task force,~~] people with autism and related pervasive developmental disorders, their families, and related advocacy organizations.  (g) Section 114.013, Human Resources Code, is amended to read as follows:  Sec. 114.013. COORDINATION OF RESOURCES FOR INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS [~~RESOURCE CENTER~~]. (a) The commission [~~Health and Human Services Commission~~] shall [~~establish and administer an autism spectrum disorders resource center to~~] coordinate resources for individuals with autism and other pervasive developmental disorders and their families. In coordinating those resources [~~establishing and administering the center~~], the commission [~~Health and Human Services Commission~~] shall consult with [~~the council and coordinate with~~] appropriate state agencies[~~, including each agency represented on the council~~].  (b) As part of coordinating resources under Subsection (a), the commission [~~The Health and Human Services Commission~~] shall [~~design the center to~~]:  (1) collect and distribute information and research regarding autism and other pervasive developmental disorders;  (2) conduct training and development activities for persons who may interact with an individual with autism or another pervasive developmental disorder in the course of their employment, including school, medical, or law enforcement personnel;  (3) coordinate with local entities that provide services to an individual with autism or another pervasive developmental disorder; and  (4) provide support for families affected by autism and other pervasive developmental disorders.  (h) Notwithstanding the changes in law made by this section, the Texas Council on Autism and Pervasive Developmental Disorders and any administrative entity of the Texas Council on Autism and Pervasive Developmental Disorders shall continue to operate under the law as it existed before the effective date of this article, and that law is continued in effect for that purpose, until the executive commissioner of the Health and Human Services Commission begins administering Chapter 114, Human Resources Code, as amended by this article, and the commission begins performing the duties and functions of the Texas Council on Autism and Pervasive Developmental Disorders as required by Section 114.0031, Human Resources Code, as added by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article.  (i) The executive commissioner of the Health and Human Services Commission shall begin administering Chapter 114, Human Resources Code, as amended by this article, and the commission shall begin performing the duties and functions of the Texas Council on Autism and Pervasive Developmental Disorders as required by Section 114.0031, Human Resources Code, as added by this article, on the date specified in the transition plan required under Section 531.0204, Government Code, as added by this article. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 1.23. (a) Effective September 1, 2016, the following provisions of the Government Code, including provisions amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, are repealed:  (1) Section 531.0235; and  (2) Subchapter K, Chapter 531.  (b) Effective September 1, 2016, the following provisions of the Health and Safety Code are repealed:  (1) Section 1001.021;  (2) Section 1001.022;  (3) Section 1001.023;  (4) Section 1001.024;  (5) Section 1001.025;  (6) Section 1001.026; and  (7) Section 1001.027.  (c) Effective September 1, 2016, the following provisions of the Human Resources Code, including provisions amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, are repealed:  (1) Section 40.021;  (2) Section 40.022;  (3) Section 40.0226;  (4) Section 40.024;  (5) Section 40.025;  (6) Section 40.026;  (7) Section 117.002;  (8) Section 117.021;  (9) Section 117.022;  (10) Section 117.023;  (11) Section 117.024;  (12) Section 117.025;  (13) Section 117.026;  (14) Section 117.027;  (15) Section 117.028;  (16) Section 117.029;  (17) Section 117.030;  (18) Section 117.032;  (19) Section 117.051;  (20) Section 117.052;  (21) Section 117.053;  (22) Section 117.054;  (23) Section 117.055;  (24) Section 117.056;  (25) Section 117.072;  (26) Section 161.021;  (27) Section 161.022;  (28) Section 161.023;  (29) Section 161.024;  (30) Section 161.025;  (31) Section 161.026;  (32) Section 161.027;  (33) Section 161.028;  (34) Section 161.029; and  (35) Section 161.030.  (d) Effective September 1, 2017, Section 531.0055(i), Government Code, is repealed.  (e) Effective September 1, 2017, the following provisions of the Human Resources Code, including provisions amended by S.B. No. 219, Acts of the 84th Legislature, Regular Session, 2015, are repealed:  (1) Section 161.002;  (2) Section 161.032;  (3) Section 161.051;  (4) Section 161.052;  (5) Section 161.053;  (6) Section 161.054;  (7) Section 161.055;  (8) Section 161.056; and  (9) Section 161.072.  (f) Notwithstanding Subsections (a), (b), (c), (d), and (e) of this section, the implementation of a provision repealed by one of those subsections ceases on the date the responsible state agency or entity listed in Section 531.0202, Government Code, as added by this article, is abolished as provided by Subchapter A-1, Chapter 531, Government Code, as added by this article. |  |
| No equivalent provision. | ARTICLE 2. HEALTH AND HUMAN SERVICES SYSTEM OPERATIONS |  |
| No equivalent provision. | SECTION 2.01. Section 531.001, Government Code, is amended by adding Subdivision (3-a) to read as follows:  (3-a) "Health and human services system" means the system for providing or otherwise administering health and human services in this state by the commission, including through an office or division of the commission or through another entity under the administrative and operational control of the executive commissioner. |  |
| SECTION 1. Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.00551 to read as follows:  Sec. 531.00551. CONSOLIDATED INTERNAL AUDIT PROGRAM. (a) Notwithstanding Section 2102.005, the commission shall operate the internal audit program required under Chapter 2102 for the commission and each health and human services agency as a consolidated internal audit program.  (b) For purposes of this section, a reference in Chapter 2102 to the administrator of a state agency with respect to a health and human services agency means the executive commissioner. | SECTION 2.02. Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.00552 to read as follows:  Sec. 531.00552. CONSOLIDATED INTERNAL AUDIT PROGRAM. (a) Notwithstanding Section 2102.005, the commission shall operate the internal audit program required under Chapter 2102 for the commission and each health and human services agency as a consolidated internal audit program.  (b) For purposes of this section, a reference in Chapter 2102 to the administrator of a state agency with respect to a health and human services agency means the executive commissioner. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 2.03. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.0164 to read as follows:  Sec. 531.0164. HEALTH AND HUMAN SERVICES SYSTEM INTERNET WEBSITE COORDINATION. The commission shall establish a process to ensure Internet websites across the health and human services system are developed and maintained according to standard criteria for uniformity, efficiency, and technical capabilities. Under the process, the commission shall:  (1) develop and maintain an inventory of all health and human services system Internet websites;  (2) on an ongoing basis, evaluate the inventory maintained under Subdivision (1) to:  (A) determine whether any of the Internet websites should be consolidated to improve public access to those websites' content; and  (B) ensure the Internet websites comply with the standard criteria; and  (3) if appropriate, consolidate the websites identified under Subdivision (2)(A).  (b) As soon as possible after the effective date of this article, the Health and Human Services Commission shall implement Section 531.0164, Government Code, as added by this article.  (c) As soon as possible after a function is transferred in accordance with Section 531.0201, 531.02011, or 531.02012, Government Code, as added by this Act, the Health and Human Services Commission shall, in accordance with Section 531.0164, Government Code, as added by this article, ensure that an Internet website related to the transferred function is updated, transferred, or consolidated to reflect the consolidation mandated by Subchapter A-1, Chapter 531, Government Code, as added by this Act. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 2.04. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.0171 to read as follows:  Sec. 531.0171. OFFICE OF OMBUDSMAN. (a) The executive commissioner shall establish the commission's office of the ombudsman with authority and responsibility over the health and human services system in performing the following functions:  (1) providing dispute resolution services for the health and human services system;  (2) performing consumer protection and advocacy functions related to health and human services, including assisting a consumer or other interested person with:  (A) raising a matter within the health and human services system that the person feels is being ignored; and  (B) obtaining information regarding a filed complaint; and  (3) collecting inquiry and complaint data related to the health and human services system.  (b) The office of the ombudsman does not have the authority to provide a separate process for resolving complaints or appeals.  (c) The executive commissioner shall develop a standard process for tracking and reporting received inquiries and complaints within the health and human services system. The process must provide for the centralized tracking of inquiries and complaints submitted to field, regional, or other local health and human services system offices.  (d) Using the process developed under Subsection (c), the office of the ombudsman shall collect inquiry and complaint data from all offices, agencies, divisions, and other entities within the health and human services system. To assist with the collection of data under this subsection, the office may access any system or process for recording inquiries and complaints used or maintained within the health and human services system.  (b) As soon as possible after the effective date of this article, the executive commissioner of the Health and Human Services Commission shall implement Section 531.0171, Government Code, as added by this article.  (c) Notwithstanding any other provision of state law but except as provided by Subsection (d) of this section:  (1) each office of an ombudsman established before the effective date of this section that performs ombudsman duties for a state agency or entity subject to abolition under Section 531.0202, Government Code, as added by this Act, is abolished on the date the state agency or entity for which the office performs ombudsman duties is abolished in accordance with the transition plan under Section 531.0204, Government Code, as added by this Act; and  (2) each office of an ombudsman established before the effective date of this section that performs ombudsman duties for the Department of Family and Protective Services or the Department of State Health Services is abolished on the date specified in the transition plan under Section 531.0204, Government Code, as added by this Act.  (d) The following offices of an ombudsman are not abolished under Subsection (c) of this section and continue in existence:  (1) the office of independent ombudsman for state supported living centers established under Subchapter C, Chapter 555, Health and Safety Code;  (2) the office of the state long-term care ombudsman; and  (3) any other ombudsman office serving all or part of the health and human services system that is required by federal law.  (e) The executive commissioner of the Health and Human Services Commission shall certify which offices of ombudsman are abolished, and which are exempt from abolition, under Subsection (d) of this section and shall publish that certification in the Texas Register not later than September 1, 2016. |  |
| No equivalent provision.  No equivalent provision.  No equivalent provision.  No equivalent provision. | SECTION 2.05. (a) Subchapter A, Chapter 531, Government Code, is amended by adding Section 531.0192 to read as follows:  Sec. 531.0192. HEALTH AND HUMAN SERVICES SYSTEM HOTLINE AND CALL CENTER COORDINATION. (a) The commission shall establish a process to ensure all health and human services system hotlines and call centers are necessary and appropriate. Under the process, the commission shall:  (1) develop criteria for use in assessing whether a hotline or call center serves an ongoing purpose;  (2) develop and maintain an inventory of all system hotlines and call centers;  (3) use the inventory and assessment criteria developed under this subsection to periodically consolidate hotlines and call centers along appropriate functional lines;  (4) develop an approval process designed to ensure that a newly established hotline or call center, including the telephone system and contract terms for the hotline or call center, meets policies and standards established by the commission; and  (5) develop policies and standards for hotlines and call centers that include both quality and quantity performance measures and benchmarks and may include:  (A) client satisfaction with call resolution;  (B) accuracy of information provided;  (C) the percentage of received calls that are answered;  (D) the amount of time a caller spends on hold; and  (E) call abandonment rates.  (a-1) In developing policies and standards under Subsection (a)(5), the commission may allow varied performance measures and benchmarks for a hotline or call center based on factors affecting the capacity of the hotline or call center, including factors such as staffing levels and funding.  (b) In consolidating hotlines and call centers under Subsection (a)(3), the commission shall seek to maximize the use and effectiveness of the commission's 2-1-1 telephone number.  (b) As soon as possible after the effective date of this article, the Health and Human Services Commission shall implement Section 531.0192, Government Code, as added by this article.  (c) Not later than March 1, 2016, the Health and Human Services Commission shall complete an initial assessment and consolidation of hotlines and call centers, as required by Section 531.0192, Government Code, as added by this article.  (d) As soon as possible after a function is transferred in accordance with Section 531.0201 or 531.02011, Government Code, as added by this Act, the Health and Human Services Commission shall, in accordance with Section 531.0192, Government Code, as added by this article, ensure a hotline or call center related to the transferred function is transferred or consolidated to reflect the consolidation mandated by Subchapter A-1, Chapter 531, Government Code, as added by this Act. |  |
| SECTION 2. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.02731 to read as follows:  Sec. 531.02731. REPORT OF INFORMATION RESOURCES MANAGER TO COMMISSION. Notwithstanding Section 2054.075(b), the information resources manager of a health and human services agency shall report directly to the executive commissioner or a deputy executive commissioner designated by the executive commissioner. | SECTION 2.06. Same as House version. |  |
| No equivalent provision. | ARTICLE 3. FEDERAL AUTHORIZATION AND EFFECTIVE DATE |  |
| No equivalent provision. | SECTION 3.01. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted. |  |
| SECTION 3. This Act takes effect September 1, 2015. | SECTION 3.02. Except as otherwise provided by this Act, this Act takes effect September 1, 2015. |  |