

Amend CSHB 4180 (senate committee printing) by adding the following appropriately numbered SECTIONS to the bill and renumbering SECTIONS of the bill accordingly:

SECTION _____. Effective September 1, 2017, Subtitle F, Title 2, Health and Safety Code, is amended by adding Chapter 120 to read as follows:

CHAPTER 120. TASK FORCE OF BORDER HEALTH OFFICIALS

SUBCHAPTER A. GENERAL PROVISIONS

Sec. 120.001. DEFINITIONS. In this chapter:

(1) "Border region" means the area consisting of the counties immediately adjacent to the international boundary between the United States and Mexico.

(2) "Task force" means the Task Force of Border Health Officials.

Sec. 120.002. SUNSET PROVISION. The task force is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the task force is abolished and this chapter expires September 1, 2029.

SUBCHAPTER B. POWERS AND DUTIES

Sec. 120.051. TASK FORCE; DUTIES. (a) The department shall establish the Task Force of Border Health Officials to advise the commissioner:

(1) on policy priorities addressing major issues affecting the border region residents' health and health conditions;

(2) on raising public awareness of the issues described by Subdivision (1); and

(3) on other health issues impacting the border region as determined by the commissioner, including:

(A) barriers to accessing health care;

(B) health problems affecting the region, including:

(i) diabetes;

(ii) infant mortality;

(iii) heart disease and stroke;

(iv) obesity;

(v) cervical cancer; and

(vi) communicable diseases, including tuberculosis;

(C) factors that impede access to health care, including:

(i) socioeconomic conditions;

(ii) linguistic and cultural barriers;

(iii) low population density; and

(iv) lack of health insurance;

(D) surveillance and tracking of communicable diseases, environmental factors, and other factors negatively influencing health;

(E) standardization of data to ensure compatibility with data collected by border states on both sides of the international border with Mexico;

(F) public health infrastructure that includes education and research institutions to train culturally competent health care providers;

(G) establishment of local and regional public health programs that build on local resources and maximize the use of public dollars to address the needs of the indigent population; and

(H) collaboration and cooperation with Mexican counterparts of the task force at the state and federal level, and collaboration with federal counterparts in the United States.

(b) The task force shall study and make recommendations relating to the health problems, conditions, challenges, and needs of the population in the border region.

(c) The task force shall submit a report of recommendations to the commissioner for short-term and long-term border plans, as described by Subchapter C, not later than November 1 of each even-numbered year.

Sec. 120.052. COLLABORATION WITH OFFICE OF BORDER HEALTH. The Office of Border Health established under Section 12.071 shall provide staff support to the task force and any other assistance as needed or required by the task force, if practicable.

Sec. 120.053. COMPOSITION; TERMS. (a) The task force is composed of:

(1) the health department directors appointed under Section 121.033 from:

(A) each county in the border region; and

(B) each municipality in the border region that has a sister city in Mexico;

(2) two ex officio nonvoting members who are members of the legislature:

(A) one of whom is appointed by the lieutenant governor; and

(B) one of whom is appointed by the speaker of the house of representatives; and

(3) additional members appointed by the commissioner.

(b) The commissioner shall designate a chair and vice chair of the task force from among the task force members.

(c) The members appointed by the lieutenant governor and the speaker of the house of representatives serve three-year terms.

Sec. 120.054. MEETINGS. (a) The task force shall meet at least quarterly each fiscal year. Members may hold meetings by conference calls and through videoconference in accordance with Section 551.127, Government Code.

(b) Section 551.125, Government Code, applies to a meeting held by conference call under this section, except that Section 551.125(b), Government Code, does not apply.

Sec. 120.055. COMPENSATION AND REIMBURSEMENT. A task force member is not entitled to compensation or reimbursement for expenses incurred in performing the member's duties.

SUBCHAPTER C. BORDER HEALTH IMPROVEMENT PLAN

Sec. 120.101. SHORT-TERM AND LONG-TERM PLANS. (a) The task force shall make recommendations to the commissioner for short-term and long-term border health improvement plans. The short-term plan shall identify health objectives proposed to be accomplished before the fourth anniversary of the date the plan is adopted. The long-term plan shall identify health objectives proposed to be accomplished before the ninth anniversary of the date the plan is adopted.

(b) The commissioner shall review the task force's recommendations and, based on those recommendations, recommend

short-term and long-term border health improvement plans to the executive commissioner, identifying specific health objectives that may be implemented under existing law.

(c) The executive commissioner shall adopt short-term and long-term border health improvement plans and direct the department to implement the portions of the plans that may be implemented within existing appropriations under existing law.

(d) Not later than September 1 of each even-numbered year, the executive commissioner shall submit a report detailing the actions taken by the task force. The report must include:

(1) the status of all projects and activities involving the health issues described under Section 120.051(a)(3);

(2) the funding for the expenditures; and

(3) recommendations for legislation necessary to implement the short-term and long-term border health improvement plans.

Sec. 120.102. APPLICATION OF OTHER LAW. Chapter 2110, Government Code, does not apply to the task force.

Sec. 120.103. ASSISTANCE FROM STATE AGENCIES AND POLITICAL SUBDIVISIONS. At the request of the task force, a state agency or political subdivision of this state may cooperate with the task force to the greatest extent practicable to fully implement the task force's statutory duties.

SECTION _____. Effective September 1, 2017, Chapter 344, Health and Safety Code, is amended by designating Sections 344.001 through 344.007 as Subchapter A and adding a subchapter heading to read as follows:

SUBCHAPTER A. ESTABLISHMENT, OPERATION, AND DISSOLUTION OF
MOSQUITO CONTROL DISTRICTS

SECTION _____. Effective September 1, 2017, Chapter 344, Health and Safety Code, is amended by adding Subchapter B to read as follows:

SUBCHAPTER B. ESTABLISHMENT OF URGENT PUBLIC HEALTH MOSQUITO
CONTROL DISTRICTS AND URGENT PUBLIC HEALTH CENTERS

Sec. 344.051. DEFINITION. In this subchapter, "department" means the Department of State Health Services.

Sec. 344.052. LEGISLATIVE FINDINGS. The legislature finds

that:

(1) scientists have concluded the Zika virus is a cause for microcephaly and other severe fetal brain defects;

(2) the department has reported that counties in the Gulf Coast region and on the international border with Mexico are at the highest risk in this state of developing localized cases of the Zika virus;

(3) Cameron County, which is located on the international border with Mexico, has had as of December 2016 at least five documented cases of locally transmitted Zika virus;

(4) the powers of a mosquito control district may be effective in combating the increased risk of transmission of the Zika virus; and

(5) there is an urgent public health purpose for establishing a mosquito control district in Cameron and Hidalgo Counties and other high-risk counties to contain, eradicate, and treat problems associated with communicable diseases, including the Zika virus, the dengue virus, and the chikungunya virus, that are carried by mosquitoes.

Sec. 344.053. APPLICABILITY. (a) This subchapter applies only to a county located on the international border with Mexico:

(1) for which the department has documented a locally transmitted case of the Zika virus; or

(2) that is adjacent to a county described by Subdivision (1).

(b) Except as otherwise provided by this subchapter, Subchapter A applies to an urgent public health mosquito control district established under this subchapter.

Sec. 344.054. ESTABLISHMENT. The commissioners court of or the county judge of a county described by Section 344.053 may order an election under Section 344.001 for the establishment of an urgent public health mosquito control district on a resolution by the commissioners court or an order by the county judge stating that an urgent public health purpose requires establishment of the district.

Sec. 344.055. DUTIES OF COUNTY ESTABLISHING DISTRICT. A county that establishes an urgent public health mosquito control

district under this subchapter shall:

(1) conduct surveillance of vectors carrying communicable disease;

(2) address the capacity of the county public health infrastructure, including by:

(A) establishing and operating communicable disease and illness identification laboratories;

(B) training and hiring public health personnel and research fellows;

(C) matching state, federal, and private initiatives and efforts aimed at addressing and mitigating health and environmental conditions that contribute to the breeding, development, and spread of vectors carrying communicable disease;

(D) testing county residents for communicable diseases and providing medical treatment to county residents who have communicable diseases; and

(E) funding prevention measures and initiatives to protect county residents from vectors carrying communicable disease; and

(3) address the prevention and spread of vectors carrying communicable disease by funding efforts to inform people about the prevention and spread through community campaigns and regional information efforts.

Sec. 344.056. SPECIAL PUBLIC HEALTH ADVISORY COMMITTEE.

(a) In this section, "committee" means the special public health advisory committee established under this section.

(b) Notwithstanding Section 344.004, the commissioners court of a county that establishes an urgent public health mosquito control district under this subchapter shall establish a special public health advisory committee.

(c) The commissioners court shall appoint seven members to the committee as follows:

(1) one member who is the county public health administrator;

(2) three members who are public health administrators at the executive director level in the most populated municipalities in the county; and

(3) three members who are property taxpaying voters of the county.

(d) The commissioner of state health services shall appoint one delegate to serve as a nonvoting, ex officio member of the committee.

(e) The county judge shall designate one committee member appointed under Subsection (c) as the presiding officer of the committee. The committee meets at the call of the presiding officer.

(f) A committee member serves without compensation.

(g) A committee member must take an oath of office prescribed by the commissioners court.

(h) The committee shall:

(1) make written recommendations to the commissioners court that the committee considers necessary to:

(A) address the urgent public health purpose of the mosquito control district established under this subchapter; and

(B) implement the district's duties; and

(2) perform any other duty assigned to the committee by the commissioners court.

Sec. 344.057. MOSQUITO CONTROL PERSONNEL. The commissioners court of a county that establishes an urgent public health mosquito control district under this subchapter may appoint:

(1) a mosquito control engineer as provided by Section 344.005; or

(2) any other public health professional the commissioners court determines is necessary to carry out the duties of the district and to address the recommendations of the special public health advisory committee established under Section 344.056.

Sec. 344.058. URGENT PUBLIC HEALTH CENTER. (a) The department may establish an urgent public health center in a county that has established an urgent public health mosquito control district under this subchapter if:

(1) the county has at least one locally transmitted case of the Zika virus;

(2) the department determines that federal funds are available to assist local communities in controlling communicable diseases, including diseases caused by vectors that carry the Zika virus;

(3) the county or a municipality wholly or partly located in the county donates land to the department for the purpose of establishing the center; and

(4) the county or a municipality wholly or partly located in the county provides matching funds for the purpose of establishing the center.

(b) The department may establish only one urgent public health center for each public health region containing an urgent public health mosquito control district established under this subchapter.

(c) An urgent public health center established under this section for a county with an urgent public health mosquito control district established under this subchapter may:

(1) assist the county in fulfilling the county's duties under Section 344.055;

(2) provide a central repository of vector control resources for municipalities wholly or partly located in the county or a county adjacent to the county;

(3) develop local surveillance, outreach, and response campaigns to address communicable disease and potential vectors carrying communicable disease;

(4) provide local, regional, and international health-related briefings;

(5) cooperate with local, regional, state, and international officials to:

(A) increase environmental awareness to reduce sources for vector development; and

(B) develop recommendations for implementing nuisance abatement policies;

(6) with the assistance of appropriate authorities, facilitate any necessary method of vector control, including trapping, adulticiding, and larviciding of vector populations along the international border;

(7) provide to health care professionals current information, including health advisories and guidance with communicable disease case management, regarding communicable disease and potential vectors carrying communicable disease;

(8) in cooperation with state, federal, and international partners, educate and provide health care screenings to populations at high risk of contracting a communicable disease and that are traditionally difficult to contact; and

(9) facilitate information sharing between local, state, and international entities.

SECTION _____. (a) The commissioner of state health services, lieutenant governor, and speaker of the house of representatives shall appoint the members of the Task Force of Border Health Officials established by Section 120.051, Health and Safety Code, as added by this Act, not later than October 1, 2017.

(b) The initial short-term border health improvement plan adopted under Section 120.101, Health and Safety Code, as added by this Act, must include a border health improvement plan for implementation beginning not later than September 1, 2018. The Department of State Health Services shall implement the initiatives in the short-term border health improvement plan, as directed by the executive commissioner of the Health and Human Services Commission, not later than September 1, 2022.

(c) The initial long-term border health improvement plan adopted under Section 120.101, Health and Safety Code, as added by this Act, must include a border health improvement plan for implementation beginning not later than September 1, 2020. The Department of State Health Services shall implement the initiatives in the long-term border health improvement plan, as directed by the executive commissioner of the Health and Human Services Commission, not later than September 1, 2027.