# **SENATE AMENDMENTS**

## 2<sup>nd</sup> Printing

	By: Burkett, Bonnen of Galveston H.B. No. 2848
	A BILL TO BE ENTITLED
1	AN ACT
2	relating to consultations with contracted physician networks and
3	physician systems during certain investigations of child abuse and
4	neglect.
5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
6	SECTION 1. Subchapter D, Chapter 261, Family Code, is
7	amended by adding Section 261.3017 to read as follows:
8	Sec. 261.3017. CONSULTATION WITH PHYSICIAN NETWORKS AND
9	SYSTEMS REGARDING CERTAIN MEDICAL CONDITIONS. (a) In this
10	section:
11	(1) "Network" means the Forensic Assessment Center
12	Network.
13	(2) "System" means the entities that receive grants
14	under the Texas Medical Child Abuse Resources and Education System
15	(MEDCARES) authorized by Chapter 1001, Health and Safety Code.
16	(b) Any agreement between the department and the network or
17	between the Department of State Health Services and the system to
18	provide assistance in connection with abuse and neglect
19	investigations conducted by the department must require the network
20	and the system to have the ability to obtain consultations with
21	physicians, including radiologists, geneticists, and
22	endocrinologists, who specialize in identifying unique health
23	conditions, including:
24	(1) rickets;

[**P.1**]

H.B. No. 2848

	II.D. NO. 2040
1	(2) Ehlers-Danlos Syndrome;
2	(3) osteogenesis imperfecta;
3	(4) vitamin D deficiency; and
4	(5) other similar metabolic bone diseases or
5	connective tissue disorders.
6	(c) In providing assessments to the department as provided
7	by Subsection (b), the network and the system must use a blind peer
8	review process to resolve cases where physicians in the network or
9	system disagree in the assessment of the causes of a child's
10	injuries or in the presence of a condition listed under Subsection
11	<u>(b)</u>
12	SECTION 2. The changes in law made by this Act apply only to
13	an agreement entered into or renewed on or after the effective date
14	of this Act.
15	SECTION 3. This Act takes effect September 1, 2017.

2

ADOPTED

MAY 2 2 2017 Actary Space Secretary of the Senate

By: Burkett	
Substitute the following for H.B. No. 2848 By:	):
By: Mark Very	

ر بر ۲

ŝ.

<u>H.в. No. 2848</u> c.s.<u>H</u>.в. No. <u>2848</u>

	<i>V</i>
	A BILL TO BE ENTITLED
1	AN ACT
2	relating to consultations with contracted physician networks and
3	physician systems during certain investigations of child abuse and
4	neglect.
5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
6	SECTION 1. Subchapter D, Chapter 261, Family Code, is
7	amended by adding Section 261.3017 to read as follows:
8	Sec. 261.3017. CONSULTATION WITH PHYSICIAN NETWORKS AND
9	SYSTEMS REGARDING CERTAIN MEDICAL CONDITIONS. (a) In this
10	section:
11	(1) "Network" means the Forensic Assessment Center
12	Network.
13	(2) "System" means the entities that receive grants
14	under the Texas Medical Child Abuse Resources and Education System
15	(MEDCARES) authorized by Chapter 1001, Health and Safety Code.
16	(b) Any agreement between the department and the network or
17	between the Department of State Health Services and the system to
18	provide assistance in connection with abuse and neglect
19	investigations conducted by the department must require the network
20	and the system to have the ability to obtain consultations with
21	physicians, including radiologists, geneticists, and
22	endocrinologists, who specialize in identifying unique health
23	conditions, including:

24 <u>(1) rickets;</u>

85R31289 MK-D

1

1	(2) Ehlers-Danlos Syndrome;
2	(3) osteogenesis imperfecta;
3	(4) vitamin D deficiency; and
4	(5) other similar metabolic bone diseases or
5	connective tissue disorders.
6	(c) If, during an abuse or neglect investigation or an
7	assessment provided under Subsection (b), the department or a
8	physician in the network determines that a child requires a
9	specialty consultation with a physician, the department or the
10	physician shall refer the child's case to the system for the
11	consultation, if the system has available capacity to take the
12	child's case.
13	(d) In providing assessments to the department as provided
14	by Subsection (b), the network and the system must use a blind peer
15	review process to resolve cases where physicians in the network or
16	system disagree in the assessment of the causes of a child's
17	injuries or in the presence of a condition listed under Subsection
18	<u>(b)</u> .
19	SECTION 2. The changes in law made by this Act apply only to
20	an agreement entered into or renewed on or after the effective date
21	of this Act.
22	SECTION 3. This Act takes effect only if a specific
23	appropriation for the implementation of the Act is provided in a
24	general appropriations act of the 85th Legislature. If the
25	legislature does not appropriate money specifically for the purpose
26	of implementing this Act, this Act has no effect.
27	SECTION 4. This Act takes effect September 1, 2017.

2

· ·

[**P.4**]



FLOOR AMENDMENT NO.

BY: Charles Pery

Amend C.S.H.B. No. 2848 (senate committee printing) by striking SECTION 3 of the bill (page 2, lines 6-10) and renumbering subsequent SECTIONS of the bill accordingly.

## FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

## May 22, 2017

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

**FROM:** Ursula Parks, Director, Legislative Budget Board

-ditraie

IN RE: HB2848 by Burkett (Relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect. ), As Passed 2nd House

#### No significant fiscal implication to the State is anticipated.

The bill would amend the Family Code relating to consultations with contracted physician networks and physician systems during certain investigation of child abuse and neglect. This analysis assumes that duties and responsibilities associated with implementing the provisions of the bill could be accomplished by utilizing existing resources.

The bill would take effect September 1, 2017.

#### Local Government Impact

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, KCA, EP, JLi, SD, FR

## FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION Revision 1

## May 17, 2017

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

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB2848** by Burkett (Relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect.), **Committee Report 2nd House, Substituted** 

No significant fiscal implication to the State is anticipated.

This Act takes effect only if a specific appropriation for implementation is provided in a general appropriations act of the 85th Legislature.

The bill would amend the Family Code relating to consultations with contracted physician networks and physician systems during certain investigation of child abuse and neglect. This analysis assumes that duties and responsibilities associated with implementing the provisions of the bill could be accomplished by utilizing existing resources.

The bill would take effect September 1, 2017, only if a specific appropriation for implementation is provided in a general appropriation act of the 85th Legislature.

### Local Government Impact

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, KCA, EP, JLi, SD, FR

#### FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

#### May 17, 2017

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

FROM: Ursula Parks, Director, Legislative Budget Board

**IN RE: HB2848** by Burkett (Relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect.), **Committee Report 2nd House, Substituted** 

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB2848, Committee Report 2nd House, Substituted: a negative impact of (\$448,292) through the biennium ending August 31, 2019.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

This Act takes effect only if a specific appropriation for implementation is provided in a general appropriations act of the 85th Legislature.

#### General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2018	(\$224,146)
2019	(\$224,146)
2020	(\$224,146)
2021	(\$224,146)
2022	(\$224,146)

#### All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	Probable Savings/(Cost) from <i>Federal Funds</i> 555
2018	(\$224,146)	(\$25,854)
2019	(\$224,146)	(\$25,854)
2020	(\$224,146)	(\$25,854)
2021	(\$224,146)	(\$25,854)
2022	(\$224,146)	(\$25,854)

## **Fiscal Analysis**

The bill would amend the Family Code to require the Department of Family and Protective Service (DFPS) to consult with contracted physician networks and physician systems during certain investigations of child abuse and neglect.

The bill would require any agreement between DFPS and the Forensic Assessment Center Network (FACN) or any Texas Medical Child Abuse Resources and Education System grantee to require the member physicians to provide assistance in abuse or neglect investigations conducted by DFPS to assist in identifying certain unique health conditions, and would require use of a peer review process to resolve cases in which the physicians disagree in the assessment of the causes of the child's injuries.

The bill would require DFPS to establish these agreements only if the department receives an appropriation for that purpose.

The bill would take effect September 1, 2017, only if a specific appropriation for implementation is provided in a general appropriation act of the 85th Legislature.

#### Methodology

According to DFPS, the agency could meet the provisions of the bill by expanding their existing contract with FACN. The agency estimates that, in each fiscal year, it would cost \$200,000 in All Funds to provide the required specialty consultations, and \$50,000 in All Funds to expand the peer review process.

The bill is estimated to result in a net cost of \$250,000 in All Funds in each fiscal year.

#### Local Government Impact

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, KCA, EP, JLi, FR

## FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

## May 12, 2017

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

#### FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2848 by Burkett (Relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect.), As Engrossed

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB2848, As Engrossed: a negative impact of (\$448,292) through the biennium ending August 31, 2019.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

#### General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2018	(\$224,146)
2019	(\$224,146)
2020	(\$224,146)
2021	(\$224,146)
2022	(\$224,146)

#### All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund 1	Probable Savings/(Cost) from <i>Federal Funds</i> 555
2018	(\$224,146)	(\$25,854)
2019	(\$224,146)	(\$25,854)
2020	(\$224,146)	(\$25,854)
2021	(\$224,146)	(\$25,854)
2022	(\$224,146)	(\$25,854)

#### Fiscal Analysis

The bill would amend the Family Code to require the Department of Family and Protective Service (DFPS) to consult with contracted physician networks and physician systems during certain investigations of child abuse and neglect.

The bill would require any agreement between DFPS and the Forensic Assessment Center Network (FACN) or any Texas Medical Child Abuse Resources and Education System grantee to require the member physicians to provide assistance in abuse or neglect investigations conducted by DFPS to assist in identifying certain unique health conditions, and would require use of a peer review process to resolve cases in which the physicians disagree in the assessment of the causes of the child's injuries.

The bill would require DFPS to establish these agreements only if the department receives an appropriation for that purpose.

The bill would take effect September 1, 2017.

#### Methodology

According to DFPS, the agency could meet the provisions of the bill by expanding their existing contract with FACN. The agency estimates that, in each fiscal year, it would cost \$200,000 in All Funds to provide the required specialty consultations, and \$50,000 in All Funds to expand the peer review process.

The bill is estimated to result in a net cost of \$250,000 in All Funds in each fiscal year.

#### Local Government Impact

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, KCA, EP, JLi, FR

\***%** i

#### FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

#### April 19, 2017

**TO:** Honorable Harold V. Dutton, Jr., Chair, House Committee on Juvenile Justice & Family Issues

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB2848** by Burkett (Relating to consultations with contracted physician networks and physician systems during certain investigations of child abuse and neglect.), **Committee Report 1st House, Substituted** 

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB2848, Committee Report 1st House, Substituted: a negative impact of (\$448,292) through the biennium ending August 31, 2019.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

#### General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2018	(\$224,146)
2019	(\$224,146)
2020	(\$224,146)
2021	(\$224,146)
2022	(\$224,146)

#### All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund 1	Probable Savings/(Cost) from <i>Federal Funds</i> 555
2018	(\$224,146)	(\$25,854)
2019	(\$224,146)	(\$25,854)
2020	(\$224,146)	(\$25,854)
2021	(\$224,146)	(\$25,854)
2022	(\$224,146)	(\$25,854)

#### **Fiscal Analysis**

, <sup>1</sup>

The bill would amend the Family Code to require the Department of Family and Protective Service

(DFPS) to consult with contracted physician networks and physician systems during certain investigations of child abuse and neglect.

5 **%** - 3,

The bill would require any agreement between DFPS and the Forensic Assessment Center Network (FACN) or any Texas Medical Child Abuse Resources and Education System grantee to require the member physicians to provide assistance in abuse or neglect investigations conducted by DFPS to assist in identifying certain unique health conditions, and would require use of a peer review process to resolve cases in which the physicians disagree in the assessment of the causes of the child's injuries.

The bill would require DFPS to establish these agreements only if the department receives an appropriation for that purpose.

The bill would take effect September 1, 2017.

#### Methodology

According to DFPS, the agency could meet the provisions of the bill by expanding their existing contract with FACN. The agency estimates that, in each fiscal year, it would cost \$200,000 in All Funds to provide the required specialty consultations, and \$50,000 in All Funds to expand the peer review process.

The bill is estimated to result in a net cost of \$250,000 in All Funds in each fiscal year.

#### **Local Government Impact**

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, FR, EP, JLi

#### FISCAL NOTE, 85TH LEGISLATIVE REGULAR SESSION

#### April 4, 2017

**TO:** Honorable Harold V. Dutton, Jr., Chair, House Committee on Juvenile Justice & Family Issues

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB2848** by Burkett (Relating to requiring the Department of Family and Protective Services to create a physician multidisciplinary team to assist in certain investigations of child abuse and neglect.), **As Introduced** 

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB2848, As Introduced: a negative impact of (\$3,503,977) through the biennium ending August 31, 2019.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

#### General Revenue-Related Funds, Five-Year Impact:

Fiscal Year Probable Net Positive/(Negative) Impa to General Revenue Related Funds	
2018	(\$1,773,002)
2019	(\$1,730,975)
2020	(\$1,730,975)
2021	(\$1,730,975)
2022	(\$1,730,975)

#### All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	Probable Savings/(Cost) from <i>Federal Funds</i> 555	Change in Number of State Employees from FY 2017
2018	(\$1,773,002)	(\$197,000)	6.0
2019	(\$1,730,975)	(\$192,331)	6.0
2020	(\$1,730,975)	(\$192,331)	6.0
2021	(\$1,730,975)	(\$192,331)	6.0
2022	(\$1,730,975)	(\$192,331)	6.0

#### **Fiscal Analysis**

The bill would amend the Family Code to require the Department of Family and Protective Service

(DFPS) to create a physician multidisciplinary team to assist in certain investigations of child abuse and neglect.

The bill would also require DFPS to train members of the multidisciplinary team to identify certain physical symptoms of abuse and neglect.

The bill would take effect September 1, 2017.

#### Methodology

According to DFPS, the agency would require 6.0 full-time equivalent (FTE) positions in order to implement the provisions of this bill. This includes one radiologist at an estimated annual salary of \$275,000, one geneticist and one endocrinologist at an estimated annual salary of \$200,000, and three pediatricians at an estimated annual salary of \$175,000. Each additional FTE would cost approximately \$120,500 per fiscal year for related benefits and expenses, and approximately \$7,750 in fiscal year 2018 for one-time set up costs.

The bill is estimated to result in a net cost of \$2.0 million in All Funds in fiscal year 2018, and \$1.9 million in All Funds each subsequent fiscal year.

#### Technology

The annual technology impact is approximately \$6,500 per FTE each fiscal year for related computer and data center services expenses.

#### Local Government Impact

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 530 Family and Protective Services, Department of **LBB Staff:** UP, FR, EP, JLi