|  |
| --- |
| BILL ANALYSIS |

|  |
| --- |
| C.S.H.B. 2032 |
| By: Turner, John |
| Public Health |
| Committee Report (Substituted) |

|  |
| --- |
| **BACKGROUND AND PURPOSE**  It has been suggested that low health literacy may serve as a significant economic drain on Texas' health care system and may lead to poor health outcomes. C.S.H.B. 2032 seeks to address this issue by instructing the statewide health coordinating council to form an advisory committee on health literacy. |
| **CRIMINAL JUSTICE IMPACT**  It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY**  It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS**  C.S.H.B. 2032 amends the Health and Safety Code to require the statewide health coordinating council to form an advisory committee on health literacy that includes representatives of certain interested groups. The bill requires the committee to develop a long-range plan for increasing health literacy in Texas and, in developing the long-range plan, to study the economic impact of low health literacy on state health care programs and insurance coverage for Texas residents. The bill requires the committee to update the plan at least once every two years, and, not later than December 1 of each even-numbered year, to submit the developed or updated plan, as applicable, to the governor, the lieutenant governor, the speaker of the house of representatives, and each member of the legislature. The bill sets out certain matters the committee is required to identify and examine, requires the committee to elect a presiding officer, establishes that committee members serve without compensation, and entitles committee members to reimbursement for travel expenses. The bill exempts the advisory committee from the application of certain Government Code provisions relating to state agency advisory committees and subjects committee meetings to state open meetings law. The bill includes the prevalence of low health literacy of health care consumers among the major statewide health concerns required to be identified in the state health plan developed by the Department of State Health Services and requires the plan to propose strategies for increasing health literacy to attain greater cost‑effectiveness and better patient outcomes in health care. |
| **EFFECTIVE DATE**  September 1, 2019. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE**  While C.S.H.B. 2032 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.  The substitute includes requirements for the advisory committee to update the long-range plan at least once every two years and to submit the developed or updated plan to the governor, the lieutenant governor, the speaker of the house of representatives, and each member of the legislature by a certain date.  The substitute includes dentists among the interested groups whose representatives are included as members of the advisory committee. |
|  |
|  |
|  |
|  |
|  |