**BILL ANALYSIS**

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| Senate Research Center | S.B. 982 |
|  | By: Kolkhorst |
|  | Health & Human Services |
|  | 6/17/2019 |
|  | Enrolled |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

S.B. 982 requires the Texas Division of Emergency Management (TDEM) to develop a plan to increase the capabilities of local emergency shelters for the care of specialty populations during a disaster. The bill also instructs TDEM to increase the awareness of local volunteer networks, including the Medical Reserve Corps (MRC), on the part of local governments during a disaster or emergency.

After Hurricane Harvey, not all shelters were equipped to properly care for certain medically needy populations, such as those that are technology-dependent. For example, a number of dialysis centers closed due to Harvey and shelters were not equipped to handle the influx of dialysis patients; thus the patients were transferred to hospital ERs that were already beyond their care capacity.

Additionally, the sheer number of volunteers creates management issues. When an individual registers as a medical volunteer through the Texas Disaster Volunteer Registry (TDVR), they must select a local, county-level organization that is affiliated with the TDVR. Deployment and coordination happen locally, usually by MRC, however, not all counties have an MRC. Since county resources vary, most counties have a different list of registered organizations while some counties lack a single organization. The Texas Medical Association, which referred physicians who wanted to volunteer to MRC units, testified that “while urban areas have active MRC units, MRC is not well known in other parts of the state, resulting in slower deployment of volunteers in hard-hit small and rural towns.

S.B. 982 was filed in response to a recommendation contained in the Senate Committee on Health and Human Services's Interim Report (see page 4). (Original Author's/Sponsor's Statement of Intent)

S.B. 982 amends current law relating to the provision of disaster and emergency services, including health care services, to certain populations.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter C, Chapter 418, Government Code, by adding Sections 418.054 and 418.055, as follows:

Sec. 418.054. EMERGENCY PLAN FOR SPECIALTY CARE POPULATIONS. Requires the Texas Division of Emergency Management (TDEM), in consultation with the Department of State Health Services (DSHS) and local governmental entities that have established emergency management plans, to develop a plan to increase the capabilities of local emergency shelters in the provision of shelter and care for specialty care populations during a disaster.

Sec. 418.055. ACCESS TO LOCAL VOLUNTEER NETWORKS; VOLUNTEER MOBILE MEDICAL UNITS. (a) Requires TDEM, in consultation with DSHS, to increase awareness of and encourage local government emergency response teams to utilize services provided by local volunteer networks, including the Medical Reserve Corps, that are available in the area to respond during a disaster or emergency.

(b) Requires TDEM to develop a plan to create and manage state-controlled volunteer mobile medical units in each public health region to assist counties that lack access to a volunteer network described by Subsection (a).

(c) Requires DSHS to collaborate with local medical organizations that represent licensed physicians who practice in a county or public health region to:

(1) ensure the physicians are informed about local government emergency response teams and those teams are aware of physician resources in the county or region, as applicable;

(2) compile and maintain a list of physicians in the county or region and the contact information for the physicians;

(3) provide up-to-date information about resources for physicians regarding disaster planning, including continuing medical education;

(4) promote the Texas Disaster Volunteer Registry and the Emergency System for Advance Registration of Volunteer Health Professionals;

(5) consider incentives to assist with recruiting physician volunteers; and

(6) encourage physicians and health professionals to advocate for disaster planning measures in health care facilities.

SECTION 2. Amends Chapter 418, Government Code, by adding Subchapter F-1, as follows:

SUBCHAPTER F-1. DISASTER ISSUES AFFECTING PERSONS WHO ARE ELDERLY AND PERSONS WITH DISABILITIES

Sec. 418.131. DEFINITIONS. Defines "disability" and defines "task force" as the task force established under Section 418.132 for purposes of this subchapter.

Sec. 418.132. ESTABLISHMENT; PURPOSE. Provides that the task force on disaster issues affecting persons who are elderly and persons with disabilities is established to study methods to more effectively:

(1) assist persons who are elderly and persons with disabilities during a disaster or emergency evacuation; and

(2) accommodate persons who are elderly and persons with disabilities in emergency shelters.

Sec. 418.133. COMPOSITION. (a) Provides that the task force is composed of 11 members appointed by the governor, including:

(1) three members who are first responders;

(2) one member who represents municipalities;

(3) one member who represents counties; and

(4) six members who represent persons with disabilities.

(b) Requires a majority of the members appointed to the task force to be persons with disabilities or guardians of children with disabilities.

(c) Provides that members serve staggered six-year terms with the terms of three or four members expiring February 1 of each odd-numbered year.

(d) Requires the governor to designate one member of the task force to serve as the presiding officer of the task force. Provides that the presiding officer serves in that capacity at the pleasure of the governor.

Sec. 418.134. TASK FORCE STUDY. (a) Requires the task force to study methods to more effectively accommodate persons who are elderly and persons with disabilities during a disaster or emergency evacuation. Requires the study to examine and make recommendations on:

(1) the provision of informational materials to persons who are elderly and persons with disabilities before a disaster occurs on disaster or emergency evacuation;

(2) the accessibility of transportation and medical supplies to persons who are elderly and persons with disabilities during a disaster;

(3) different solutions for accommodating persons who are elderly and persons with disabilities during a disaster or emergency evacuation of a rural or urban area;

(4) the ability to effectively communicate with persons who are elderly and persons with disabilities during a disaster; and

(5) the availability of volunteers to assist persons who are elderly and persons with disabilities during an emergency evacuation.

(b) Requires the task force to develop and submit a written report of the study and recommendations developed by the task force to the governor, the lieutenant governor, the speaker of the house of representatives, and each member of the legislature not later than December 1, 2020.

(c) Provides that this section expires June 1, 2021.

SECTION 3. Requires TDEM to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. Authorizes, but does not require, TDEM, if the legislature does not appropriate money specifically for that purpose, to implement a provision of this Act using other appropriations available for that purpose.

SECTION 4. Effective date: September 1, 2019.