## **BILL ANALYSIS**

Senate Research Center 86R8077 SRA-D H.B. 1225 By: Guillen et al. (Menéndez) Health & Human Services 4/22/2019 Engrossed

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

In 2007, the 80th Legislature passed H.B. 1225, which amended Chapter 98, Health and Safety Code, and established the Chronic Kidney Disease Task Force (task force). The task force was directed to study the problem of chronic kidney disease (CKD), report its findings, and make recommendations for a cost-effective plan for early screening, diagnosis and treatment of CKD for the state's populations. Members of the medical profession and patient advocates know they must draw more attention to this disease that is growing at an alarming rate. Early identification of individuals with CKD, combined with appropriate intervention, can delay the progression of the disease. The results will be less suffering, fewer deaths, and a reduction in health care costs.

H.B. 1225 recreates the task force to ensure that the state continues to address chronic kidney disease. The bill authorizes the governor to appoint members from the following backgrounds: nephrologists, primary and pediatric care physicians, transplant surgeons, renal dietitians and treatment coordinators, health insurers, clinical laboratories, medical schools, the National Kidney Foundation, the Texas Renal Coalition (TRC), the Department of State Health Services, and the Health and Human Services Commission. Additionally, the lieutenant governor will appoint two state senators to the task force, while the speaker of the house will choose two state representatives.

The task force must develop a strategy to educate health care professionals about early screening and diagnosis, promote CKD awareness, and make recommendations on the implementation of a cost effective plan.

H.B. 1225 amends current law relating to the re-creation of the Chronic Kidney Disease Task Force.

## **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. Requires this Act to be known as the Glenda Dawson Act.

SECTION 2. Provides that the state finds that the treatment of chronic kidney disease is a tremendous expense and that the early diagnosis and effective treatment of chronic kidney disease can prolong lives and delay the high cost of medical treatment, including dialysis and transplantation.

SECTION 3. Amends Subtitle D, Title 2, Health and Safety Code, by adding Chapter 83, as follows:

# CHAPTER 83. CHRONIC KIDNEY DISEASE TASK FORCE

Sec. 83.001. DEFINITION. Defines "task force" to mean the Chronic Kidney Disease Task Force (task force) for purposes of this chapter.

Sec. 83.002. CHRONIC KIDNEY DISEASE TASK FORCE. (a) Provides that the task force is composed of:

- (1) 20 members appointed by the governor as follows:
  - (A) one family practice physician;
  - (B) one pathologist;
  - (C) one nephrologist from a nephrology department of a state medical school;
  - (D) one nephrologist in private practice;
  - (E) one representative from the National Kidney Foundation;
  - (F) one representative from the Texas Kidney Foundation;
  - (G) one representative from the South Plains Kidney Foundation of West Texas;
  - (H) one representative from the Texas Renal Coalition;
  - (I) one representative from the Health and Human Services Commission's (HHSC) Kidney Health Care Program;
  - (J) one representative of an insurer that issues a preferred provider benefit plan or of a health maintenance organization;
  - (K) one representative of clinical laboratories;
  - (L) one representative of private renal care providers;
  - (M) one pediatrician in private practice;
  - (N) one kidney transplant surgeon;
  - (O) one primary care physician;
  - (P) one licensed and certified renal dietitian;
  - (Q) one certified nephrology nurse;
  - (R) one representative from a health care system;
  - (S) one representative of HHSC whose duties involve the state Medicaid program; and
  - (T) one end stage renal disease expert;
- (2) two members of the senate appointed by the lieutenant governor; and
- (3) two members of the house of representatives appointed by the speaker of the house of representatives.
- (b) Requires the governor to designate a member of the task force to serve as the presiding officer of the task force. Provides that the presiding officer serves at the will of the governor.

(c) Requires appointments to the task force to be made without regard to the race, color, disability, sex, religion, age, or national origin of the appointees.

Sec. 83.003. DUTIES. Requires the task force to coordinate implementation of the state's cost-effective plan for prevention, early screening, diagnosis, and management of chronic kidney disease for the state's population through national, state, and local partners and to educate health care professionals on the use of clinical practice guidelines for screening, detecting, diagnosing, treating, and managing chronic kidney disease, its comorbidities, and its complications based on the Kidney Disease Outcomes Quality Initiative Clinical Practice Guidelines for Chronic Kidney Disease.

Sec. 83.004. REIMBURSEMENT. Authorizes a member of the task force to receive reimbursement for travel expenses as provided by Section 2110.004 (Reimbursement of Members' Expenses; Appropriations Process), Government Code.

Sec. 83.005. ASSISTANCE. Requires HHSC to provide administrative support to the task force, including necessary staff and meeting facilities.

Sec. 83.006. REPORT. Requires the task force, not later than January 1 of each odd-numbered year, to submit its findings and recommendations to:

- (1) the governor, lieutenant governor, and speaker of the house of representatives; and
- (2) the presiding officers of the appropriate standing committees of the legislature with jurisdiction over health issues.

Sec. 83.007. FUNDING. (a) Authorizes the task force, through HHSC, to accept gifts and grants from individuals, private or public organizations, or federal or local funds to support the task force.

(b) Requires HHSC to investigate any potential sources of funding from federal grants or programs.

Sec. 83.008. APPLICABILITY OF OTHER LAW. Provides that, except as specifically provided by this chapter, Chapter 2110 (State Agency Advisory Committees), Government Code, does not apply to the task force.

Sec. 83.009. TASK FORCE REVIEW AND ABOLISHMENT. (a) Requires HHSC to review the continued need for the task force at least once every five years.

- (b) Requires HHSC, if HHSC determines the task force is no longer needed and should be abolished, to publish notice of its decision in the Texas Register and on HHSC's Internet website.
- (c) Provides that the task force is abolished on the date stated in the notice required by Subsection (b).

SECTION 4. Requires the governor, lieutenant governor, and speaker of the house of representatives, not later than January 1, 2020, to appoint the members to the task force as required by Section 83.002, Health and Safety Code, as added by this Act.

SECTION 5. Effective date: September 1, 2019.