BILL ANALYSIS

C.S.H.B. 1420 By: Dominguez Public Health Committee Report (Substituted)

BACKGROUND AND PURPOSE

There are concerns that the Texas border is disproportionately affected by obesity and diabetes, along with many other health issues and public health social factors that differ from other areas of the state. It has been suggested that the membership of the public health funding and policy committee within the Department of State Health Services would benefit from having a representative from the Task Force of Border Health Officials. C.S.H.B. 1420 seeks to provide for such representation by revising the committee's composition and duties.

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. 1420 amends the Health and Safety Code to increase from nine to 10 the number of members the commissioner of state health services is required to appoint to the public health funding and policy committee by adding one representative from the Task Force of Border Health Officials. The bill establishes that the two committee members who are regional health directors are ex officio nonvoting members. The bill changes the entities who submit nominations for committee members other than regional health directors from associations representing local health departments, county governments, and municipal governments to the entity, institution, or task force of which the nominated member is an employee or member. The bill establishes that the presiding officer of the committee serves for a term of two years.

C.S.H.B. 1420 revises the general duties of the committee to require the committee to:

- summarize the scope and type of public health services provided by local health entities, with a focus on differences in the availability of services in urban, rural, and border areas of this state;
- monitor the availability of public health services in this state, identify the disparity between services and funding for those services, and develop recommendations to address the disparity;
- recommend health issue priorities for this state and coordinate efforts to address the priorities with the Department of State Health Services (DSHS); and
- at least biennially make formal recommendations to the DSHS regarding certain matters.

C.S.H.B. 1420 changes from annually to biennially the frequency with which the DSHS is required to file a report with the governor, lieutenant governor, and speaker of the house of representatives detailing the committee's recommendations. The bill requires the committee to meet with the Task Force of Border Health Officials at least annually and at the call of the respective presiding officers. The bill requires the task force to meet with the Public Health Funding and Policy Committee at least annually and at the call of the respective presiding officers.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1420 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 changes the member added to the committee from a representative from the DSHS Office of Border Health to a representative of the Task Force of Border Health Officials.

The substitute includes:

- a provision changing the entities who submit nominations from whom the commissioner is required to select members of the committee;
- a provision specifying that certain members are ex officio nonvoting members;
- a provision establishing that the presiding officer serves for a term of two years;
- a requirement for the committee to meet with the Task Force of Border Health Officials at least annually and at the call of the respective presiding officers;
- a provision revising the duties of the committee;
- a provision changing the frequency with which DSHS is required to file a report regarding the committee; and
- a requirement for the task force to meet with the Public Health Funding and Policy Committee at least annually and at the call of the respective presiding officers.