

BILL ANALYSIS

Senate Research Center
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H.B. 2032
By: Turner, John et al. (Johnson)
Health & Human Services
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

The United States Department of Health and Human Services reports only 12 percent of U.S. adults have proficient health literacy. Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and health services needed to make appropriate health decisions.

Poor health literacy can create significant barriers to accessing adequate affordable healthcare for individuals, and low health literacy is estimated to cost the U.S. economy billions of dollars every year. Improving health literacy ultimately leads to better health outcomes, decreased healthcare costs, and an enhanced patient experience.

H.B. 2032 seeks to address this issue by instructing the Texas Statewide Health Coordinating Council (SHCC) to form a Health Literacy Advisory Committee.

The advisory committee will be required to develop a long-range plan for increasing health literacy in Texas and study the cost of low health literacy on the economy and health outcomes in Texas. This long-range plan will:

- Identify risk factors for low health literacy;
- Examine methods for providers to address health literacy with patients;
- Identify ways to expand the use of plain language instructions for patients; and
- Identify ways that increasing health literacy can improve patient safety.

Supporters of the bill include the Methodist Healthcare Ministries of South Texas, Texas Pediatric Society, and the National Alliance on Mental Illness. We know of no opposition at this time.

H.B. 2032 amends current law relating to the health literacy advisory committee and health literacy in the state health plan.

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 Section 104.002, Health and Safety Code, by adding Subdivision (6) to define "health literacy."

SECTION 2. Amends Subchapter B, Chapter 104, Health and Safety Code, by adding Section 104.0157, as follows:

Sec. 104.0157. HEALTH LITERACY ADVISORY COMMITTEE. (a) Requires the statewide health coordinating council to form an advisory committee on health literacy.

Requires the advisory committee to include representatives of interested groups, including the academic community, consumer groups, health plans, pharmacies, and associations of physicians, dentists, hospitals, and nurses.

(b) Requires the advisory committee to develop a long-range plan for increasing health literacy in this state. Requires the advisory committee to update the plan at least once every two years.

(c) Requires the advisory committee, in developing the long-range plan, to study the economic impact of low health literacy on state health care programs and insurance coverage for residents of this state. Requires the advisory committee to undertake certain enumerated tasks.

(d) Requires the advisory committee, not later than December 1 of each even-numbered year, to submit the long-range plan developed or updated, as applicable, under this section to the governor, the lieutenant governor, the speaker of the house of representatives, and each member of the legislature.

(e) Requires the advisory committee to elect a presiding officer.

(f) Provides that members of the advisory committee serve without compensation but are entitled to reimbursement for the members' travel expenses as provided by Chapter 660 (Travel Expenses), Government Code, and the General Appropriations Act.

(g) Provides that Section 2110.002 (Composition of Advisory Committees), 2110.003 (Presiding Officer), and 2110.008 (Duration of Advisory Committees), Government Code, do not apply to the advisory committee.

(h) Provides that meetings of the advisory committee under this section are subject to Chapter 551 (Open Meetings), Government Code.

SECTION 3. Amends Sections 104.022(e) and (f), Health and Safety Code, as follows:

(e) Requires the state health plan to identify major statewide health concerns, including the prevalence of low health literacy of health care consumers.

(f) Requires the state health plan to:

(1) makes no changes to this subdivision;

(2) propose strategies for increasing health literacy to attain greater cost-effectiveness and better patient outcomes in health care and renumbers Subdivisions (2)–(4) as Subdivisions (3)–(5); and

(3)–(5) makes no further changes to these subdivisions.

SECTION 4. Effective date: September 1, 2019.