

By: Turner of Dallas, Allison, Coleman,
Price, Sheffield

H.B. No. 2032

Substitute the following for H.B. No. 2032:

By: Coleman

C.S.H.B. No. 2032

A BILL TO BE ENTITLED

AN ACT

relating to the health literacy advisory committee and health literacy in the state health plan.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 104.002, Health and Safety Code, is amended by adding Subdivision (6) to read as follows:

(6) "Health literacy" means 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.

SECTION 2. Subchapter B, Chapter 104, Health and Safety Code, is amended by adding Section 104.0157 to read as follows:

Sec. 104.0157. HEALTH LITERACY ADVISORY COMMITTEE. (a) The statewide health coordinating council shall form an advisory committee on health literacy. The advisory committee must include representatives of interested groups, including the academic community, consumer groups, health plans, pharmacies, and associations of physicians, dentists, hospitals, and nurses.

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

(c) In developing the long-range plan, the advisory committee shall study the economic impact of low health literacy on state health care programs and insurance coverage for residents of

1 this state. The advisory committee shall:

2 (1) identify key risk factors for low health literacy;

3 (2) examine methods for health care practitioners,
4 health care facilities, and others to address health literacy with
5 patients and the public;

6 (3) examine the effectiveness of using quality
7 measures in state health programs to improve health literacy;

8 (4) identify ways to expand the use of plain language
9 instructions for patients; and

10 (5) identify the ways that increasing health literacy
11 can improve patient safety, reduce preventable events, and increase
12 medication adherence to attain greater cost-effectiveness and
13 better patient outcomes in health care.

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

19 (e) The advisory committee shall elect a presiding officer.

20 (f) Members of the advisory committee serve without
21 compensation but are entitled to reimbursement for the members'
22 travel expenses as provided by Chapter 660, Government Code, and
23 the General Appropriations Act.

24 (g) Sections 2110.002, 2110.003, and 2110.008, Government
25 Code, do not apply to the advisory committee.

26 (h) Meetings of the advisory committee under this section
27 are subject to Chapter 551, Government Code.

1 SECTION 3. Sections 104.022(e) and (f), Health and Safety
2 Code, are amended to read as follows:

3 (e) The state health plan shall be developed and used in
4 accordance with applicable state and federal law. The plan must
5 identify:

6 (1) major statewide health concerns, including the
7 prevalence of low health literacy of health care consumers;

8 (2) the availability and use of current health
9 resources of the state, including resources associated with
10 information technology and state-supported institutions of higher
11 education; and

12 (3) future health service, information technology,
13 and facility needs of the state.

14 (f) The state health plan must:

15 (1) propose strategies for the correction of major
16 deficiencies in the service delivery system;

17 (2) propose strategies for increasing health literacy
18 to attain greater cost-effectiveness and better patient outcomes in
19 health care;

20 (3) [~~2~~] propose strategies for incorporating
21 information technology in the service delivery system;

22 (4) [~~3~~] propose strategies for involving
23 state-supported institutions of higher education in providing
24 health services and for coordinating those efforts with health and
25 human services agencies in order to close gaps in services; and

26 (5) [~~4~~] provide direction for the state's
27 legislative and executive decision-making processes to implement

1 the strategies proposed by the plan.

2 SECTION 4. This Act takes effect September 1, 2019.