**BILL ANALYSIS**

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| Senate Research Center | S.B. 572 |
|  | By: Springer |
|  | State Affairs |
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|  | As Filed |

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

As proposed, S.B. 572 amends current law relating to members of the clergy who are employed or voluntarily enter inpatient health care facilities to minister during a state of disaster, emergency, or epidemic.

**RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 2 (Section 81.0101, Health and Safety Code) of this bill.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Provides that the purpose of this section is to protect the religious liberty of each patient or resident and to protect inpatient health care facilities from costly lawsuits and administrative complaints on the basis of religious discrimination by affording patient or resident access to members of the clergy provided that those members of the clergy enter the inpatient health care facility and comply with the safety requirements of the facility in order to visit and minister to the patient or resident.

SECTION 2. Amends Chapter 81, Health and Safety Code, by adding Section 89.010, as follows:

Sec. 81.010. DEFINITIONS. Defines "inpatient health care facilities," "patient," "resident," and "public health emergency."

Sec. 81.0101. VISITATION BY MEMBERS OF CLERGY DURING DECLARED STATE OF DISASTER, EMERGENCY, OR EPIDEMIC. (a) Requires the executive commissioner of the Health and Human Services Commission to promulgate rules, pursuant to the Administrative Procedure Act, Chapter 2001 (Administrative Procedure), Government Code, to require inpatient health care facilities to allow members of the clergy to visit patients or residents during a public health emergency whenever a patient or resident requests such a visit. Requires that special consideration be given to patients or residents receiving end-of-life care.

(b) Requires that the rules include but not be limited to definitions, minimum requirements, and provisions to protect the health, safety, and welfare of the patients or residents and the staff of the inpatient health care facility.

(c) Requires that the rules allow inpatient health care facilities to adopt reasonable time, place, and manner restrictions on patient or resident visitation that are implemented for the purpose of mitigating the possibility of transmission of any infectious agent or disease or to address the medical condition or clinical considerations of an individual patient or resident.

(d) Requires that the rules promulgated pursuant to this section be preempted by any federal statute, federal regulation, or guidance from a federal government agency that requires an inpatient health care facility to restrict patient visitation in a manner that is more restrictive than the rules adopted by the Texas Department of State Health Services (DSHS) pursuant to this section.

SECTION 3. Requires that nothing in this Act be interpreted to prohibit or restrict any inpatient health care facility from allowing clergy to visit or minister to patients or residents in a manner deemed appropriate by the inpatient health care facility prior to the effective date of the rules which are to be implemented by DSHS.

SECTION 4. Effective date: upon passage or September 1, 2021.