# **BILL ANALYSIS**

C.S.H.B. 3493 By: Parker Human Services Committee Report (Substituted)

### BACKGROUND AND PURPOSE

Adverse childhood experiences (ACEs) are traumatic events that can disrupt neurodevelopment and increase the likelihood of negative health, behavioral, educational, and economic outcomes. These experiences can include child maltreatment in all its forms as well as other challenges, such as having a caregiver who is experiencing mental illness, substance use, or incarceration. When compound adversities are experienced early, often, and without supportive relationships and environments, affected children are much more likely to become adults who engage in risky health behaviors and suffer from mental and physical illness, chronic disease, and early death. C.S.H.B. 3493 seeks to improve the delivery of prevention and early intervention services for certain children to better prevent and mitigate the effects of ACEs.

#### **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. 3493 amends the Family Code to require the Department of Family and Protective Services (DFPS), as part of its duties to improve the effectiveness and delivery of prevention and early intervention services for certain children, to take the following actions:

- develop a request for information to assist DFPS in the development of the strategic plan to improve prevention and early intervention services;
- send the request for information to a diverse set of stakeholders and providers throughout Texas, including certain categories of stakeholders as specified by the bill;
- in collaboration with the Health and Human Services Commission (HHSC), the Department of State Health Services (DSHS), the Texas Education Agency (TEA), the Texas Workforce Commission (TWC), and the Office of the Attorney General (OAG):
  - develop an inventory of programs and services that are funded by the state that contribute to the prevention of adverse childhood experiences (ACEs);
  - develop an inventory of programs and services that are provided by other entities that contribute to the prevention of ACEs; and
  - facilitate opportunities to increase collaboration for the effective expenditure of available federal and state funds and better leverage public and private partnerships to increase efficiency; and
- develop strategies for community partners to do the following:

- improve the ability of these partners to distinguish situations in which a child is in imminent danger from situations in which the child and child's family would be better served by providing community-based services; and
- implement cross-sector, evidence-based practices that prevent ACEs.

C.S.H.B. 3493 requires HHSC, DSHS, TEA, OAG, and the TWC to use a community awareness approach to implement the strategies and recommendations developed to improve the effectiveness and delivery of prevention and early intervention services.

C.S.H.B. 3493 prohibits DFPS from doing the following:

- using data techniques, including predictive analytics, risk-based modeling, and other similar assessments, to identify or target prevention or early intervention services to a specific family or individual or diagnose the health of or assess the health risks to an individual without the individual's consent to take part in a diagnosis or assessment;
- providing services to a minor for the purpose of addressing ACEs without informed parental consent, except as provided by other law; or
- using data to infringe upon an individual's or family's right to privacy.

The bill prohibits applicable stakeholders from providing DFPS any information that may be used to identify a specific family or individual for the purpose of offering prevention or early intervention services. If DFPS receives such information, DFPS may not use the information to implement its duties to improve the effectiveness and delivery of those services.

C.S.H.B. 3493 requires DFPS, not later than December 1, 2022, to submit a report to the legislature and the governor that includes the following information:

- a summary of community feedback, available data, best practices, and implementable changes within HHSC, DSHS, TEA, OAG, and the TWC with regard to the progress of efforts made to improve the effectiveness and delivery of prevention and early intervention services; and
- specific short-term and long-term statutory, administrative, and budget-related recommendations for reforms necessary to improve the delivery of those services across state agencies.

C.S.H.B. 3493 establishes the purpose of its provisions and defines "adverse childhood experience" as a potentially traumatic event that occurs in the life of a person younger than 18 years of age, including abuse, family violence, neglect, the death of a parent or guardian, and a household member having a substance use disorder or mental illness or being incarcerated.

## EFFECTIVE DATE

September 1, 2021.

## **COMPARISON OF ORIGINAL AND SUBSTITUTE**

While C.S.H.B. 3493 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 omits a requirement from the original for HHSC, DSHS, TEA, OAG, and the TWC as part of their collective duties under the bill, to request information and invite comment from representatives of single source continuum contractors.

The original prohibited DFPS from using data techniques to develop, deliver, or implement prevention and early intervention services as it relates to ACEs. The substitute prohibits DFPS instead from using such techniques to identify or target services to a specific family or individual or diagnose the health of or assess the health risks to an individual without their consent.

The substitute includes a provision absent from the original prohibiting DFPS from providing prevention and early intervention services to a minor for the purpose of addressing ACEs without informed parental consent, except as provided by other law.

The substitute includes a provision absent from the original prohibiting applicable stakeholders from providing DFPS any information that may be used to identify a specific family or individual for the purpose of offering prevention or early intervention services and prohibiting DFPS from using any such information to implement its duties to improve the effectiveness and delivery of those services.