

BILL ANALYSIS

Senate Research Center

S.B. 1941
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Health & Human Services
5/31/2021
Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Hyperemesis gravidarum (HG or hyperemesis) is a condition that affects roughly one percent of women and an estimated three percent of all pregnancies. It is a condition that is little understood, under-researched, and under-reported. It has long been thought to be caused by the "pregnancy hormone" hCG (human chorionic gonadotropin). However, recent studies show that it may be the result of the presence of hormone GDF15, which is believed to be responsible for nausea, vomiting, and cachexia—the wasting effect found in cancer patients.

The symptoms of hyperemesis are extreme vomiting and nausea and severe, unrelenting morning sickness that prevents affected women from functioning as normal. These symptoms typically last the majority, if not the entirety, of a pregnancy. Women who do not receive adequate care will often lose five percent or more of their body weight. Unable to keep food or liquid down, many pregnant women may become severely dehydrated and malnourished, requiring frequent emergency medical visits. Since this is a little-understood condition, affected women often feel alone and face serious complications in their pregnancies as a result of hyperemesis.

S.B. 1941 seeks to create Hyperemesis Strategic Plan, modeled after Texas's Postpartum Depression Strategic Plan. S.B. 1941 mandates the Health and Human Services Commission to develop a five-year plan to improve diagnosis and public awareness of hyperemesis gravidarum. There currently is no explicit Texas strategy for this poorly understood medical condition. Improved public awareness and diagnosis of hyperemesis gravidarum might improve outcomes for pregnant women and shed important light on this rare, but dangerous, medical condition.

There is no known opposition to this bill.

(Original Author's/Sponsor's Statement of Intent)

S.B. 1941 amends current law relating to a strategic plan to address hyperemesis gravidarum.

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 Subchapter B, Chapter 32, Health and Safety Code, by adding Section 32.047, as follows:

Sec. 32.047. HYPEREMESIS GRAVIDARUM STRATEGIC PLAN. (a) Defines "hyperemesis gravidarum."

(b) Requires the Health and Human Services Commission (HHSC) to develop and implement a five-year strategic plan to improve diagnosis and treatment of and raise public awareness of hyperemesis gravidarum. Requires HHSC, not later than September 1 of the last state fiscal year in each five-year period, to develop a new strategic plan for the next five state fiscal years that begins with the following state fiscal year.

(c) Requires that the strategic plan provide strategies to:

(1) increase awareness among state-administered program providers who may serve women at risk of or experiencing hyperemesis gravidarum about the prevalence and effects of hyperemesis gravidarum on outcomes for women and children;

(2) establish a referral network of community-based health providers and support services addressing hyperemesis gravidarum;

(3) increase women's access to formal and informal peer support services, including access to certified peer specialists who have successfully completed additional training related to hyperemesis gravidarum;

(4) raise public awareness of hyperemesis gravidarum; and

(5) leverage sources of funding to support existing community-based hyperemesis gravidarum screening, referral, treatment, and support services.

(d) Requires HHSC to coordinate with the Department of State Health Services (DSHS) and the statewide health coordinating council in the development of the strategic plan.

(e) Requires HHSC, in consultation with DSHS and the statewide health coordinating council, to annually review the strategic plan and update the plan as necessary.

SECTION 2. Requires HHSC, not later than September 1, 2022, to develop the initial strategic plan required by Section 32.047, Health and Safety Code, as added by this Act.

SECTION 3. Effective date: September 1, 2021.