

By: Blanco

S.B. No. 1306

A BILL TO BE ENTITLED

AN ACT

relating to the creation of a COVID-19 Health Equity Task Force and state agency response to the COVID-19 pandemic.

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

SECTION 1. DEFINITIONS. In this Act:

(1) "Commissioner" means the commissioner of the Department of State Health Services.

(2) "COVID-19" means the 2019 novel coronavirus disease.

(3) "Department" means the Department of State Health Services.

(4) "Task force" means the COVID-19 Health Equity Task Force.

SECTION 2. ESTABLISHMENT OF TASK FORCE. The commissioner shall establish a task force to:

(1) identify and address health and social inequities resulting in disproportionately higher rates of COVID-19 exposure, illness, and death among communities of color and other underserved populations; and

(2) make recommendations to prevent and remedy disparate health care provision and COVID-19 outcomes within communities of color and other underserved populations.

SECTION 3. COMPOSITION OF TASK FORCE. (a) The task force is composed of 18 members as follows:

- 1           (1) one member who represents the Department of  
2 Agriculture;
- 3           (2) one member who represents the Texas Education  
4 Agency;
- 5           (3) one member who represents the Health and Human  
6 Services Commission;
- 7           (4) one member who represents the Texas Department of  
8 Housing and Community Affairs;
- 9           (5) one member who represents the Texas Department of  
10 Criminal Justice;
- 11          (6) one member who represents the Texas Workforce  
12 Commission;
- 13          (7) one member who represents the Texas Division of  
14 Emergency Management;
- 15          (8) one member who represents the Department of State  
16 Health Services;
- 17          (9) one member who represents children's health;
- 18          (10) one member who represents university health  
19 science centers;
- 20          (11) one member who represents associations that work  
21 with people with disabilities;
- 22          (12) one member who represents tribal communities;
- 23          (13) one member who represents mental health  
24 associations;
- 25          (14) one member who represents an association for  
26 hospitals and health systems;
- 27          (15) one member who represents an organization that

1 works with the homeless community;

2 (16) one member who represents domestic workers;

3 (17) one member who represents nurses; and

4 (18) one member who represents physicians.

5 (b) The chief administrative officer of each state agency or  
6 division listed in Subsections (a)(1)-(8) of this section shall  
7 appoint an employee of the agency or division to represent the  
8 agency or division on the task force. The commissioner shall  
9 appoint the remaining members of the task force.

10 (c) The commissioner shall designate a member as the  
11 presiding officer of the task force.

12 (d) The task force shall meet regularly as determined by the  
13 presiding officer to set the agenda and direct the work of the task  
14 force.

15 (e) Each state agency or division with a member on the task  
16 force shall provide administrative support to the task force as  
17 necessary to carry out the purposes of this Act.

18 SECTION 4. STUDY. (a) The task force shall conduct a study  
19 to identify health inequities caused or exacerbated by COVID-19 and  
20 develop strategies to mitigate the health inequities caused or  
21 exacerbated by COVID-19.

22 (b) The study must identify:

23 (1) methods for state agency, local government, and  
24 tribal government officials to best allocate COVID-19 resources to  
25 communities with disproportionately high rates of COVID-19  
26 infection, hospitalization, and mortality;

27 (2) methods to promote equity in the disbursement of

1 COVID-19 relief funding by state agencies;

2 (3) measures for state agencies to achieve effective  
3 and culturally sensitive communication, messaging, and outreach to  
4 communities of color and other underserved populations;

5 (4) any continuing health inequities faced by COVID-19  
6 survivors that may merit a public health response; and

7 (5) factors that contribute to disparities in COVID-19  
8 outcomes and actions to combat the disparities in future public  
9 health emergencies.

10 (c) In conducting the study required under this section, the  
11 task force shall cooperate with state agencies to develop:

12 (1) short-term recommendations regarding:

13 (A) data collection of COVID-19 outcomes in  
14 communities of color and other underserved populations; and

15 (B) identification of data sources or indices  
16 that would enable the development of short-term goals for an  
17 appropriate COVID-19 response in communities of color and other  
18 underserved populations; and

19 (2) long-term recommendations to address data  
20 collection inadequacies and challenges, including challenges  
21 related to data intersectionality that would otherwise ensure a  
22 more effective response to similar future situations.

23 (d) In conducting the study required under this section, the  
24 task force may seek advice from:

25 (1) health care providers and other health  
26 professionals;

27 (2) policy experts;

- 1 (3) state, local, and tribal health officials;
- 2 (4) faith-based leaders;
- 3 (5) businesses;
- 4 (6) community organizations;
- 5 (7) individuals who have experienced:
  - 6 (A) homelessness;
  - 7 (B) incarceration;
  - 8 (C) discrimination; and
  - 9 (D) other relevant issues; and
- 10 (8) other interested persons.

11 SECTION 5. REPORT. Not later than December 1, 2022, the  
12 task force shall prepare and submit a report to the governor, the  
13 lieutenant governor, the speaker of the house of representatives,  
14 and the members of the legislature that includes the results of the  
15 study conducted under Section 4 of this Act and any associated  
16 recommendations.

17 SECTION 6. TASK FORCE COLLABORATION WITH STATE AGENCIES IN  
18 COVID-19 RESPONSE. (a) The commissioner of agriculture, the  
19 commissioners of the Texas Workforce Commission, the executive  
20 commissioner of the Health and Human Services Commission, the  
21 presiding officer of the Texas Department of Housing and Community  
22 Affairs, the commissioner of education, the presiding officer and  
23 commissioners of the Texas Commission on Environmental Quality, and  
24 the chief administrative officers of all other agencies with  
25 authority or responsibility related to COVID-19 response and  
26 recovery shall:

- 27 (1) consult with the task force to strengthen equity

1 data collection, reporting, and use related to COVID-19;

2 (2) assess pandemic response plans and policies to  
3 determine whether personal protective equipment, tests, vaccines,  
4 therapeutics, and other resources have been or will be allocated  
5 equitably, including consideration of:

6 (A) the disproportionately high rates of  
7 COVID-19 infection, hospitalization, and mortality in certain  
8 communities; and

9 (B) any barriers that have restricted access to  
10 preventive measures, treatment, and other health services for  
11 high-risk populations;

12 (3) based on the assessments described by Subsection  
13 (a)(2) of this section, modify pandemic response plans and policies  
14 to advance equity, with consideration of:

15 (A) the effect of proposed policy changes on the  
16 distribution of resources to, and access to health care by,  
17 communities of color and other underserved populations;

18 (B) the effect of proposed policy changes on  
19 agencies' ability to collect, analyze, and report data necessary to  
20 monitor and evaluate the impact of pandemic response plans and  
21 policies on communities of color and other underserved populations;  
22 and

23 (C) policy priorities expressed by communities  
24 that have suffered disproportionate rates of illness and death as a  
25 result of the pandemic;

26 (4) strengthen enforcement of antidiscrimination  
27 requirements pertaining to the availability of, and access to,

1 COVID-19 care and treatment; and

2 (5) partner with other state agencies, local  
3 governments, and tribal governments to explore mechanisms to  
4 provide greater assistance to individuals and families  
5 experiencing disproportionate economic or health effects from  
6 COVID-19, including expanding access to food, housing, child care,  
7 or income support.

8 (b) The commissioner shall:

9 (1) provide recommendations to state agencies, local  
10 governments, and tribal governments on facilitating the placement  
11 of contact tracers and other workers in communities hardest hit by  
12 the COVID-19 pandemic, recruit the tracers and workers from those  
13 communities, and connect the tracers and workers to existing health  
14 workforce training programs and other career advancement programs;  
15 and

16 (2) conduct an outreach campaign to promote vaccine  
17 trust and approval among communities of color and other underserved  
18 populations with higher levels of vaccine mistrust due to  
19 discriminatory medical treatment and research, and engage with  
20 leaders within those communities.

21 SECTION 7. APPLICABILITY OF OTHER LAW. (a) Chapter [2110](#),  
22 Government Code, does not apply to the task force.

23 (b) This Act may not be construed to impair or otherwise  
24 affect the authority granted by law to a state agency or the chief  
25 administrative officer of a state agency.

26 (c) This Act does not create any right or benefit,  
27 substantive or procedural, enforceable at law or in equity by any

1 party against this state or any agency, officer, employee, or agent  
2 of this state, or any other person.

3 SECTION 8. ABOLISHMENT AND EXPIRATION. This task force is  
4 abolished and this Act expires September 1, 2023.

5 SECTION 9. EFFECTIVE DATE. This Act takes effect September  
6 1, 2021.