

PUBLIC COMMENTS

HB 4139

HOUSE COMMITTEE ON PUBLIC HEALTH

Hearing Date: April 7, 2021 8:00 AM

Damaris McCalley

Self, Healthcare Patients Rights Advocate

Lewisville, TX

My name is Damaris McCalley and I am an ethnic minority, person with disabilities caused by and exacerbated by gross malpractice and a crimes committed against myself as a patient at Methodist Southlake Hospital, Methodist Mansfield Hospital and UT Southwestern Medical Center. We need this bill because people like myself need help. I am letting you know that I have alerted the Office of Civil Rights, HHSC, the Office of the Attorney General of these gross violations and they have done nothing to get me my medical records or investigate the insurance fraud at UT Southwestern which resulted in 25,000 dollars of medical bills simply disappearing and being payed for by tax payers instead of the hospital responsible for all the injuries. TMB will not investigate HB 300 violations and additional surgeries performed on me without consent nor will they force Dr.Clifton Lyndell Cox II to show all the malpractice suits he has lost in court on his medical license as state law requires. There appears to be pay for play activity going on during Informal Settlement Conferences between malpractice insurers and TMB Board members, but since those hearings are statutorily confidential it is 100% dark money. In 2017 I was misdiagnosed with Ulcerative Colitis at Methodist Southlake Hospital when I really had Crohn's Disease and forced on pain of death without second opinion to get my colon removed and a j-pouch created. This operation should never be performed on a patient with Crohn's. As a matter of fact the Attorneys for Methodist Southlake Hospital and Dr. Clifton Lyndell CoxII the colon surgeon who performed the procedure bribed UT Southwestern to lie to me through 2020 about having Crohn's Disease so I couldn't bring it up to the Texas Medical Board or get compensation in a medical malpractice lawsuit or retain an attorney since it was ok to perform the surgery for Ulcerative Colitis. My medical records from UT Southwestern state in the margins that I was secretly being treated for Crohn's since 2017 yet I was being told I still only had Ulcerative Colitis when I lacked a colon. Dr. Cox placed surgical clips on my left urater in the first op and the hospital ignored my symptoms of urological and renal trauma afterwards which included left sided flank pain, inability to urinate, blood in the urine and vomiting. Then during surgery 2 Dr. Cox saw the clips but refused to call in a urologist to fix it, injured my kidney and urater further in a botched attempt to reimplant the urater into the bladder which should never be performed by a Colorectal surgeon and also left clips on my pancreas. He then left the clips on the urater, the Methodist Southlake Hospital dismissed me the following day in extreme pain where I was told I would be hospitalized for 6 days, and I was told by Dr. Cox not to return to the ER. He would rather me die. Methodist Mansfield and UT Southwestern then lied to me about the extent of injuries and operated without consent to fix.

Amy McGeady, CEO

It's Time Texas

Austin, TX

Addressing health disparities is a critical public health issue. It's Time Texas supports efforts that advance health equity by removing barriers to equity, including but not limited to the social determinants of health. We would like to submit a card of support for proposed HB 4129.

Marcella Marmor, Ms

Self

San Antonio, TX

This bill is not needed. Most Texans support safe, legal abortions. Women will die needlessly, if you do this.

Printed on: April 22, 2021 10:36 PM

Allison Greer Francis, Mrs.

Individual-mental health

San Antonio, TX

I support HB 4139.

Stacey Pogue

Every Texan (formerly CPPP)

Austin, TX

Every Texan (formerly CPPP) supports HB 4139, relating to the Office for Health Equity.

The COVID-19 pandemic is disproportionately burdening Black and Hispanic Texans and has magnified long-standing health inequities for communities of color. Texas should take meaningful actions to reduce racial, ethnic, and other inequities. To build the foundation for that work, the state should equip an Office for Health Equity within HHSC, as HB 4139 does, to develop and implement strategies to reduce health inequities in partnership with state agencies and communities.

This Office could implement programs and strategies to address the factors underlying racial and ethnic inequities in access to health care and coverage. Our recent Health Equity for Every Texas Child report (<https://everytexan.org/kids-count-2021/>) shows Texas has the worst rate of child health insurance coverage in the nation—one in four uninsured U.S. children live here. Hispanic children are twice as likely as others to be uninsured. Texas holds the largest share of the nation's uninsured Hispanic children, at 36 percent of the national total. Successfully enrolling Hispanic and Latino families in health insurance requires targeted Medicaid and CHIP outreach, conducted in individuals' primary languages and by trusted community members, especially for mixed-immigration-status families. These are the types of needs an Office for Health Equity can help address.

Much of Texas data we used in our health equity report came from national sources like the U.S. Census Bureau – Texas is in great need of a central state effort to provide reliably disaggregated data, including demographic reporting by race and ethnicity, age, gender, region, language, socioeconomic status, and more.

Texas lacks sufficient real-time data to know the full story of COVID-19's disproportionate impact on different communities. Early on during the pandemic, the state struggled to reconcile reporting from different local health agencies to present complete demographic data on the DSHS COVID-19 dashboard. Data lagged behind on-the-ground confirmation that, for example, Hispanic communities are disproportionately likely to face early death from COVID-19. Estimates from Texas demographer Rogelio Saenz show that of "person-years" lost due to early death from COVID-19 (the difference between a person's age at death and their life expectancy), 60% of the loss came from Hispanic families, although they make up only 40% of the state's population. Even as recently as 4/2/2021, over 1 in 10 confirmed COVID-19 cases have unknown racial/ethnic demographic data reported. Inconsistent data collection makes it difficult to track equitable application of our ongoing vaccine rollout. HB 4139 directs the Office for Health Equity to study COVID's disproportionate impact and prepare the state to advance health equity more effectively in future public health emergencies and disasters.

We urge your support for HB 4139.

Andrew Perretta

N/A

Schertz, TX

Hello. My name is Andrew Perretta. I'm a voting constituent in Guadalupe County. I oppose HB 4139. Abortion is health care and is fully legal in the United States. I support a pregnant person's right to choose when they want to start a family. As a Texas taxpayer, I don't want public funds used to defend these unconstitutional bills in federal courts.

Please vote no on this bill. Thank you.

Printed on: April 22, 2021 10:36 PM

Angelique and Marc Van Bavel

Every Texan, Texas Observer

Austin, TX

Abortion is an important element of women's rights because women are more affected by the abortion debate than men, both individually (if they are considering an abortion) and as a gender.

If abortion rights are denied, then a constraint is imposed on women's freedom to act in a way that is of great importance to them, both for its own sake and for the sake of their achievement of equality;

Women need the right to abortion in order to have the same freedoms as men. Women have a moral right to decide what to do with their bodies. The right to abortion is vital for gender equality.

Women must have full rights over their own bodies (including the right to decide whether or not to carry a fetus to birth).

Every woman should be able to decide for herself, if and when to start a family. Women need free access to abortion in order to achieve full political, social, and economic equality with men.

Reproductive freedom is a woman's right.

Banning abortion puts women at risk by forcing them to use illegal abortionists.

It is a constitutional right of women to legally obtain an abortion.

As your Texas constituents we are asking you to oppose the below abortion related bills:

HB 1280 relates to prohibition of abortion; providing a civil penalty; creating a criminal offense.

HB 1515 relates to abortion, including abortions after detection of an unborn child's heartbeat; authorizing a private civil right of action.

HB 2313 relates to a required resource access assistance offer before an abortion is performed.

HB 2337 that relates to the regulation of drug-induced abortion procedures, providers, and facilities; providing criminal penalties.

HB 2676 relates to the creation and optional filing of a record of life for an unborn child and the use of a certificate of stillbirth; authorizing fees.

HB 3218 relates to the regulation of abortion, including information regarding perinatal palliative care and prohibiting discriminatory abortions; authorizing disciplinary action; providing a civil remedy; creating a criminal offense.

HB3760 relates to information regarding perinatal palliative care, regulation of abortion, and the availability of certain defenses to prosecution for homicide and assault offenses; providing an administrative penalty; creating criminal offenses.

Kirsten Staboleski

Self

Fort Worth, TX

My name is Kirsten Staboleski and I support bill HB 3326 to abolish abortion in Texas. I am a mother of 4 wonderful children and it breaks my heart to know that everyday there are 55,440 babies murdered everyday cause there mother don't want them. I believe everyone deserve a right to live even babies. So I am pushing to get bill HB 3326 passed. Thank you and I am representing myself and my lord and savior Jesus Christ.

Printed on: April 22, 2021 10:36 PM

Denise Gordon
Self/Clinical Social Worker
Round Rock, TX

HB4139: This is an excellent Bill, the Office for Health Equity is greatly needed in TX!

Pass this Bill! Vote for a Bill that will actually help Texans!

Jessica Schleifer
Teaching Hospitals of Texas
Austin, TX

Registering in support of HB 4139.

James Herblin
J G Herblin
Prosper, TX

Unfortunately, pro-life bills presented in the last 60 plus years have been inadequate and "soft", at best. Most pro-life legislation currently being presented is pragmatic (cowardly) as it does not put an end to abortion – the door is always left open. Texas needs to take seriously the fact that abortion is murder. Think about that statement for just a moment. Abortion is murder.

Texas legislators refuse to shut the door to abortion. Texas legislators put forth pragmatic pro-life bills which deal with superfluous ideas (resource access, hospital disclosures, discrimination, abortion costs, heartbeat issues, notifications, etc.) that will always allow a way out such that abortions will continue to be performed.

Back to my point, abortion is murder. As a matter of fact, it is premeditated murder. It is brutal. It is performed on the living innocent. It is the most serious kind of murder that one can commit. However, and unfortunately, most pro-life legislators craft legislation as though abortion is nothing more than a Class C misdemeanor versus the 1st degree murder that it is.

Why is this? Why are most Texas legislators not putting forth/supporting pro-life legislation that will shut the door to abortion? Ask yourself that question. Why pragmatism? Why the use of "clever" wordsmithing? Why not call murder, murder?

Have any of you ever seen a video illustrating an abortion? Have you seen a video entitled, "The Silent Scream"? You should do so before you decide. Understand that abortion is more than putting an end to something; it is the brutal murder of the innocent and living pre-born. That should mean something to all of us. Something is virtuously wrong with one who can view The Silent Scream and still be ambivalent to abortion being classified as anything other than the premeditated brutal murder of the innocent and living pre-born.

Do the right thing ladies and gentlemen. Many of you claim Christianity. OK, well, what would He do? Would He support/favor wordsmithing, pragmatism, cleverness, disingenuousness, etc. as a way to promote Christian living/obedience? Or was He loving and kind, yet bold and genuinely candid?

HB 3326 is the only bill presented that will candidly and courageously defend and end the current brutal murdering of the innocent and living pre-born. HB 3326 language loudly speaks "NO, NOT ON MY WATCH".

Fear not your adversaries, stand morally and judicially for the innocent and living pre-born - as He would.

Joel Tope
self

Printed on: April 22, 2021 10:36 PM

Kingsland, TX

Abortion is a plague on our state. I'm appealing to you as our state representatives to put a stop to it. You need to be the voice for the pre-born who cannot speak for themselves. Please be bold and protect our children by abolishing abortion in the State of Texas. You have an obligation before the LORD to do this. He is the One who has put you in this position "for such a time as this." Don't fear men. Fear the LORD! I respectfully urge the committee to reject this continued regulation of abortion and to immediately hear HB 3326 which would completely abolish abortion in Texas. Thank you.

Tessa Bathauer

National Association of Social Workers- Texas Chapter, Intern

Austin, TX

April 7th, 2021

House Public Health Committee

NASW/TX Supports HB 4139 (Coleman)

The National Association of Social Workers – Texas Chapter (NASW/X) wholeheartedly supports HB 4139 (Coleman) which would work with a variety of entities to promote health equity. This bill would promote health equity by decreasing or eliminating health access disparities among racial, multicultural, disadvantaged, ethnic, gender, age, language, and regional populations. HB 4139 would ensure a coordinated effort between federal agencies, universities, private interest groups, etc. as well as maximize the use of existing resources to improve health equity.

According to data collected by the Hope Initiative Texas is rated 42nd in access to health care as well as 20th in health outcomes among the United States. Research found that 43% of Texans over the age of 18 are without good health care. The Hope Initiative also found disparities when it comes to health care for people of color. Black Texans, for example, have a much higher premature and infant mortality compared to other populations. Hispanic Texans have some of the lowest rates of health care access, specifically to primary care and insurance coverage. HB 4139 would address these disparities and more by promoting health equality among all Texans.

NASW/TX supports HB 4139 (Coleman) to improve health equity for all Texans, especially those from marginalized populations.

Contact:

Alison Mohr Boleware, LMSW // Government Relations Director

Aboleware.naswtx@socialworkers.org

Laura Braley

Self

Plano, TX

Please make all abortions and any practices related to abortion illegal in the State of Texas.

Christine Bryan, VP, Information Technology and Public Policy

Clarity Child Guidance Center

San Antonio, TX

Clarity Child Guidance Center is in full support of HB 4139. Clarity is a non-profit providing inpatient and outpatient behavioral health services to children ages 3-17. Clarity's patient census is comprised of 70% low-income, state-supported children through Medicaid, CHIP, STARHealth, STARKids and low-cost contracts with area local mental health authorities.

It is not uncommon that the children and families we serve may social issues that are contributing to their emotional or mental

Printed on: April 22, 2021 10:36 PM

health concerns. It is important, especially as we have learned through COVID, that many systemic, economic, or racial factors could correlate to the health of Texans. As a children's mental health provider, we know the ACES survey also shows the link between social determinants and health into adulthood. Having an office in HHSC that is making sure we continue to subscribe to these principles will be a positive addition to a state strategy looking to improve care while lowering costs. On behalf of our kids and families, we ask you please support HB 4139.

Dana Epley

Self

Houston, TX

Opposed

Sandra Alexander

Self - prayer partner

Midlothian, TX

Let me urge the committee to reject the continued regulation of abortion and to immediately hear HB 3326 which would completely abolish abortion in Texas.

Gyla Fowler, Ms

Gyla Fowler

Austin, TX

Women need access to safe, affordable abortions. Abortion care is health care. Leave our healthcare alone. Nothing like a bunch of white men making decisions for women about their bodies.

Cat Yuracka, Mrs

Self

San Marcos, TX

I oppose this attempt to restrict women's rights to manage their own healthcare. Republicans are always saying the "big government" needs to stay out of citizens' personal lives...even to the point of not having governmental regulations where they are needed for the protection of the citizenry. Please keep "big government" out of the discussions that should be between women and their doctors and my families, and the decisions that belong to women alone.

Susan Burek

Self: Retired, Parent, and Advocate

Austin, TX

I am FOR this bill. Thank you.

Betty Taylor

self

BROWNWOOD, TX

This bill is not enforceable, and does not provide equal protection for life in the womb. Please instead support HB 3326. Thank you.

Printed on: April 22, 2021 10:36 PM

Betty Taylor, 4414 Rosewood Drive, Brownwood, Tx 76801

Zenobia Joseph, U.S. Citizen

Self

Austin, TX

HB 4139: Neutral

1. Legislative Staff: April 7, 2021/1:30PM I spoke with Rep. Coleman's staffer Sharon [Jacob], Communications Director, about 12 minutes. I requested PUBLIC TRANSPORTATION be added as a social determinant of health. Chief of Staff/General Counsel Nicolas Kalla reviews bill changes.

2. Federal Law: Title VI of the Civil Rights Act of 1964 "prohibits discrimination based on race, color, or national origin" (DOJ, 2016). HB 4139 notes federal funding (p. 4), but transit-dependent minorities face difficulty accessing healthcare without a car.

3. Amend HB 4139: ALL CAPS.

Recommendation #1: Strike "issues related to" and replace with "SOCIAL DETERMINANTS OF"

Lines 25-27 original text (p. 2): (9) investigate and report on "issues related to" health and health access disparities among multicultural, ethnic disadvantaged, gender, age, language, and regional populations;

• Revision: (9) investigate and report on "social determinants of" health and health access disparities among multicultural, ethnic disadvantaged, gender, age, language, and regional populations;

Line 26-27 (p. 2): Replace "ethnic disadvantaged," with "disadvantaged, ethnic," for consistency.

Line 7 (p. 5): Replace "ethnic, disadvantaged," with "disadvantaged, ethnic," for consistency.

Recommendation #2: Add PUBLIC TRANSPORTATION as a social determinant of health.

Line 2 (p. 3): Revise (10) coordinate and work with local health authorities to collect and report data "on social determinants of" health "INCLUDING, BUT NOT LIMITED TO PUBLIC TRANSPORTATION," and health access disparities among multicultural, disadvantaged, ethnic, gender, age, language, and regional populations;

Line 22 (p. 3): Also, add "PUBLIC TRANSPORTATION" after "environment,"

Recommendation #3: Inconsistent text. Replace Line 3 (p. 3): (10) "disadvantaged, ethnic" with "ethnic disadvantaged" as stated in Powers of the Office (9).

Lines 1-4 (p. 3), original text: (10) coordinate and work with local health authorities to collect and report data related to health and health access disparities among multicultural, "disadvantaged, ethnic," gender, age, language, and regional populations; [See Line 9 text above]

Line 27 (p. 4): Typo, "that that"

4. Disparate Impacts: Transit affects "disparities in education, criminal justice [re-entry], housing, economic opportunity, environment, and other social determinants" (HB 4139, p. 3). June 3, 2018 Capital Metropolitan Transportation Authority unilaterally eliminated Route 240 to St. David's-North Hospital. November 3, 2020 \$7.1B Project Connect/rail eliminated proposed MetroRapid-Parmer (Samsung to Apple, 3 HEBs) for minorities north of US 183. In 2019, Central Health launched a mobile market in Colony Park—Historically Black Neighborhood where Route 233-Northeast runs 60-minute headway compared to South/West/Central Austin 6-15 minutes for white choice riders. Actors knowingly violate Title VI, yet use public funds to falsely advertise equity. ~Thanks!

Brittany McAllister

Nurse-Family Partnership

Austin, TX

Printed on: April 22, 2021 10:36 PM

Chair Klick and Members of the Committee:

Thank you for the opportunity to provide this comment on behalf of Nurse-Family Partnership™ (NFP) in support of House Bill 4139. Since 2006, NFP has partnered with Texas to provide a public health nursing intervention designed to improve outcomes for first-time, high risk pregnant women and their children. To date, NFP has served 17,743 families across the state.

About Nurse-Family Partnership

Nurse-Family Partnership is a health program that pairs registered nurses with low-income, first-time mothers to provide home visits during pregnancy and through the first two years of the child's life.

During home visits, NFP nurses assess the health of the mother and child, screen for issues including substance use and domestic violence, monitor the child's developmental milestones, and more. NFP provides moms the care, support, and resources to have a healthy pregnancy, be a responsible and caring parent, and become more economically self-sufficient.

Health Equity

Because NFP works with mothers and families that face numerous health disparities, we appreciate that this bill expands upon the direction of what would become known as the Office for Health Equity in HHSC. NFP would welcome the opportunity to coordinate with the Office regarding health equity for low-income mothers and their families. Because NFP is funded through DFPS, we especially appreciate that this legislation recognizes the need for cross-agency assistance to help agencies implementing programs, like NFP, that address social determinants of health that lead to inequitable outcomes.

We have recently supported the committee substitute for HB 2490, sponsored by Representatives Howard, Rose, and Klick. That bill would encourage HHSC to explore mechanisms to increase referrals to NFP for low-income mothers receiving benefits from HHSC's public programs. These bills have similar aims: strategically provide services to the state's most vulnerable families in order to reduce health disparities. We believe there are multiple avenues for collaboration should HB 4139 pass.

Conclusion

NFP serves vulnerable first-time mothers and their families to aid them in having healthier pregnancies, becoming nurturing and caring parents, and improving their economic self-sufficiency. We are grateful for the legislature's interest in health equity and look forward to partnering in this effort.

John Brenneis, Mr.

Catholic War Veterans Post 1942

Lubbock, TX

Pass it