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| BILL ANALYSIS |

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| S.B. 1966 |
| By: Alvarado |
| Health Care Reform, Select |
| Committee Report (Unamended) |

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| **BACKGROUND AND PURPOSE**  According to a study by the Georgetown University Health Policy Institute's Center for Children and Families, Texas saw the greatest increase in the number of uninsured children between 2016 and 2019 among all the states. The California School-Based Health Alliance reports that school‑based health centers increase school attendance, help eligible students enroll in health insurance, offer support to at-risk students, reduce emergency room visits, and create a positive school climate that fosters learning. S.B. 1966 seeks to address the rate of children in Texas who lack insurance coverage for needed health care services and alleviate the potential consequences of this issue by creating a grant program for the purpose of establishing school-based health care initiatives that provide comprehensive preventative and primary health care for underserved Texas students. |
| **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**  S.B. 1966 amends the Government Code to require the Health and Human Services Commission (HHSC) to establish and administer a school-based health care grant program, using legislative appropriations available for that purpose, for health care organizations to implement, maintain, and expand a school-based health care initiative for underserved students and to provide those students with preventative and primary health care, including medical services, dental services, therapeutic services, and nonmedical services, such as nutritional services. The bill requires HHSC to establish grant application procedures, criteria for evaluating applications and awarding grants, and procedures for monitoring the use of grants awarded under the program and ensuring compliance with any condition of a grant awarded under the program.  S.B. 1966 requires a grant recipient to use grant money to establish a school-based health care initiative for a public school district that has a student population with at least 50 percent of its students who are uninsured or underinsured or who receive free or reduced-price lunches. The bill conditions the authority of a grant recipient to provide preventative and primary health care services under the program to a student younger than 18 years of age on the grant recipient obtaining the consent of the student's parent or legal guardian.  S.B. 1966 authorizes HHSC to award a grant under the program only in accordance with a contract between HHSC and a grant recipient. The contract must include provisions granting HHSC sufficient control over the money awarded to ensure the public purpose of providing health care services to underserved students is accomplished and the state receives the return benefit.  S.B. 1966 conditions HHSC's duty to implement a provision of the bill on the legislature appropriating money specifically for that purpose. If the legislature does not appropriate money specifically for that purpose, HHSC may, but is not required to, implement a provision of the bill using other appropriations available for that purpose. The bill's provisions relating to the school-based health care grant program expire on the second anniversary of the date that all money appropriated for the program has been expended. |
| **EFFECTIVE DATE**  September 1, 2023. |