

BILL ANALYSIS

C.S.H.B. 299
By: Murr
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Recovery housing and mental health advocates contend that there is ambiguity in the structure of the recovery house industry in Texas. This ambiguity causes stigmas regarding recovery houses, which can affect the success of a resident's treatment, neighboring property values, land use, and neighborhood safety. C.S.H.B. 299 seeks to alleviate these concerns by clearly defining recovery houses and establishing a voluntary accreditation process that is consistent with industry standards and ensures the use of best practices.

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. 299 amends the Health and Safety Code to require the Health and Human Services Commission (HHSC) to adopt minimum standards for accreditation as a recovery house that are consistent with the quality standards established by the National Alliance for Recovery Residences and the Oxford House Incorporated. The bill defines "recovery house" as a shared living environment that promotes sustained recovery from substance use disorders by integrating residents into the surrounding community and providing a setting that connects residents to supports and services promoting sustained recovery from substance use disorders, is centered on peer support, and is free from alcohol and drug use.

C.S.H.B. 299 limits the entities HHSC may approve to serve as an accrediting organization in the development and administration of a voluntary accreditation program for recovery housing to the National Alliance for Recovery Residences or the Oxford House Incorporated and requires an approved accrediting organization to do the following:

- establish accreditation requirements that at a minimum include the HHSC adopted standards;
- establish procedures to administer the issuance of accreditation and to assess related fees;
- provide training to designated recovery house responsible parties, if applicable, and recovery house staff regarding the HHSC adopted standards;
- develop a code of ethics; and
- provide information to HHSC for its annual report on accredited recovery houses.

The bill sets out the types of facilities ineligible for accreditation as a recovery house and requires the HHSC adopted standards to prohibit an accredited recovery house from providing personal care services as defined by the Assisted Living Facility Licensing Act.

C.S.H.B. 299 provides for the following with respect to a recovery house accredited by the National Alliance for Recovery Residences:

- a requirement for the HHSC adopted standards to require at least one individual to be designated to serve as the responsible party for the recovery house, who is responsible for administering the recovery house according to accreditation standards;
- a requirement for the designated individual to satisfactorily complete applicable training requirements; and
- a requirement for the recovery house to notify the accrediting organization before the 30th business day after the date of any change to the designated responsible party.

C.S.H.B. 299 provides for the following with respect to any recovery house accredited under the bill:

- a prohibition against a designated responsible party, employee, or agent of a recovery house offering to pay or agreeing to accept remuneration in cash or in kind to or from another for securing or soliciting a patient or patronage for or from a person licensed, certified, or registered by a state health care regulatory agency;
- a prohibition against a recovery house advertising any false, misleading, or deceptive information about the recovery house, including advertising or otherwise communicating about accreditation status that the recovery house does not have;
- the authority of an accrediting organization to enforce the bill's provisions through:
 - suspension of a violator's accreditation for a period not to exceed six months while the accrediting organization conducts an audit; and
 - after the audit is complete, implementation of a corrective action plan or revocation of accreditation.

C.S.H.B. 299 provides for an annual HHSC report on accredited recovery houses in Texas. Effective September 1, 2025, the bill prohibits a recovery house that is not accredited under the bill's provisions from receiving state money.

EFFECTIVE DATE

Except as otherwise provided, September 1, 2023.

COMPARISON OF INTRODUCED AND SUBSTITUTE

While C.S.H.B. 299 may differ from the introduced in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

Whereas the introduced required HHSC to authorize the National Alliance for Recovery Residences and the Oxford House Incorporated to serve as accrediting organizations, the substitute limits the organizations that HHSC may approve to serve as an accrediting organization to the National Alliance for Recovery Residences and the Oxford House Incorporated.

The substitute includes a provision absent from the introduced exempting a recovery house accredited by the Oxford House Incorporated from requirements relating to the designation of at least one individual as the recovery house's responsible party.

The substitute omits provisions included in the introduced that do the following:

- prohibit a municipality or county from adopting or enforcing an ordinance, order, or other regulation that prevents a recovery house from operating in a residential community;
- provide for the issuance of a charter for recovery houses as an alternative to accreditation; and

- prohibit certain state agencies, state-funded organizations, and licensed facilities and health care professionals from referring an individual to a recovery house that is not accredited or chartered.

The substitute changes the period of suspension provided in the introduced version's enforcement provisions from a period of six months to a period not to exceed six months.