

BILL ANALYSIS

Senate Research Center

H.B. 1488
By: Rose et al. (Miles)
Health & Human Services
5/1/2023
Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Sickle cell disease is found among people of various racial and ethnic backgrounds, but a disproportionate amount of cases are found among Black Americans. People with the disease can expect a lifespan of less than 50 years and often experience severe pain, anemia, organ failure, stroke, and infection. Furthermore, managing the disease throughout an individual's lifetime can cost on average \$1.7 million. H.B. 1488 seeks to address current disparities in sickle cell disease awareness by requiring the Health and Human Services Commission to support initiatives that ensure Texas Medicaid managed care plans offer services that align with national standard and to use existing data to identify opportunities for improving healthcare outcomes for recipients under such plans.

The bill has several sections, including the establishment of a sickle cell task force, the improvement of sickle cell disease education for healthcare providers and public school personnel, and the inclusion of sickle cell disease education in medical school curriculums.

H.B. 1488 amends current law relating to sickle cell disease health care improvement and the sickle cell task force.

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 A, Chapter 533, Government Code, by adding Section 533.0091, as follows:

Sec. 533.0091. SICKLE CELL DISEASE TREATMENT. Requires the Health and Human Services Commission (HHSC), to the extent possible, to:

(1) in collaboration with the sickle cell task force (task force) established under Chapter 52 (Sickle Cell Task Force), Health and Safety Code:

(A) support initiatives to assist managed care plans in promoting timely, evidence-informed health care services to plan enrollees diagnosed with sickle cell disease to ensure the services reflect national clinical practice guidelines and protocols for sickle cell disease treatment and meet medical necessity criteria; and

(B) address sickle cell disease education for Medicaid providers, including emergency department providers, by collaborating with medical specialty organizations in this state, state agencies, and health-related institutions to promote existing or new continuing education courses or facilitate development of any necessary new courses to improve the diagnosis, treatment, and management of sickle cell disease and the personal treatment of patients with sickle cell disease; and

(2) use HHSC's existing data to identify opportunities for improving health outcomes of recipients diagnosed with sickle cell disease by reducing hospital admissions and readmissions and by connecting those recipients to a sickle cell disease health home or sickle cell disease expert.

SECTION 2. Amends Sections 52.0003 and 52.0007, Health and Safety Code, as follows:

Sec. 52.0003. COMPOSITION OF TASK FORCE. Provides that the task force is composed of the following members appointed by the executive commissioner of HHSC (executive commissioner):

(1)-(2) makes no changes to these subdivisions;

(3) three members of the public, one of whom has sickle cell disease or sickle cell trait and two of whom either have sickle cell disease or are a parent of a person with sickle cell disease or sickle cell trait, rather than two members of the public, each of whom either has sickle cell disease or is a parent of a person with sickle cell disease or trait;

(4) makes a nonsubstantive change to this subdivision;

(5) one representative of the Texas Education Agency (TEA);

(6) one representative of HHSC;

(7) one physician with experience addressing the needs of individuals with sickle cell disease or sickle cell trait;

(8) one researcher from a public health-related or academic institution with experience addressing sickle cell disease and sickle cell trait; and

(9) one health care professional with experience addressing the needs of individuals with sickle cell disease or sickle cell trait.

Makes nonsubstantive changes.

Sec. 52.0007. ANNUAL REPORT. (a) Creates this subsection from existing text.

(b) Requires the task force, in collaboration with HHSC, to include in the task force's annual report recommendations for improving sickle cell disease education for health care providers.

SECTION 3. Amends Chapter 52, Health and Safety Code, by adding Section 52.0008, as follows:

Sec. 52.0008. EXPIRATION. Provides that the task force is abolished and this chapter expires August 31, 2035.

SECTION 4. Amends Subtitle B, Title 2, Health and Safety Code, by adding Chapter 52A, as follows:

CHAPTER 52A. SICKLE CELL DISEASE CARE EDUCATION AND TREATMENT

Sec. 52A.001. DEFINITION. Defines "sickle cell task force."

Sec. 52A.002. EMERGENCY AND PRIMARY CARE MEDICINE GRADUATE MEDICAL EDUCATION PROGRAM CURRICULUM. (a) Defines "graduate medical education program" and "medical school."

(b) Requires that a medical school or graduate medical education program in this state that offers an emergency medicine, family medicine, internal medicine, obstetrics, or pediatrics residency program examine and, to the extent possible, incorporate in the curriculum requirements for the program education focused on sickle cell disease and sickle cell trait. Authorizes the medical school or graduate medical education program to enter into agreements as necessary for the purposes of this section.

Sec. 52A.003. INFORMATION FOR PUBLIC SCHOOL DISTRICT PERSONNEL. (a) Requires TEA, to the extent possible, in collaboration with sickle cell disease community-based organizations to provide information on sickle cell disease and sickle cell trait to public school districts and district staff, including school nurses, teachers, and coaches.

(b) Requires HHSC in collaboration with the sickle cell task force to explore methods for improving sickle cell disease education and awareness within the public school system and provide recommendations to TEA on the improvement methods.

SECTION 5. Requires the executive commissioner, as soon as practicable after the effective date of this Act, to appoint the new members of the task force as required by Section 52.0003, Health and Safety Code, as amended by this Act.

SECTION 6. Makes application of Section 52A.002, Health and Safety Code, as added by this Act, prospective to January 1, 2024.

SECTION 7. Effective date: September 1, 2023.