

BILL ANALYSIS

Senate Research Center
89R30402 RAL-F

C.S.S.B. 719
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Health & Human Services
5/9/2025
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Use of inpatient beds at mental health facilities increased 12 percent between 2023 and 2024. This includes patients who are adolescents, voluntarily committed, in a maximum security unit, or considered incompetent to stand trial (adding them to a waitlist for state hospital beds). A state audit directed by S.B. 1677 (88R) identified at least 54 people dying on this competency restoration waitlist from 2018 to 2023. S.B. 719 directs the Health and Human Services Commission (HHSC) to conduct a study on current capacity and estimated future needs.

Bill Summary:

- This bill, which passed the Senate 88(R), directs HHSC to conduct a study regarding the current supply and future need for acute inpatient psychiatric treatment beds in inpatient mental health facilities, with the ability to collaborate with academic institutions.
- The study must evaluate the current number of beds available to individuals experiencing an acute mental health crisis as well as the current number of patients in inpatient mental facilities broken down by category including:
 - Competency restoration;
 - Civil commitment;
 - Juvenile and adult beds;
 - Intellectual and developmental disability status.
- The study will evaluate the next 10 years of psychiatric beds and workforce needs.
- The commission will submit a report to the legislature with the results of the study and legislative recommendations.

Committee Substitute, working with CHAT, THA, HHSC, Rep. Rose, and Senate HHS:

- Accurate bed count: including private hospitals, including patients who reach the 190-day limit of care under Medicare, and expressing estimated workforce and bed needs as a range, with any funded or under construction beds explicitly included.
- Technical corrections: changing DSHS to HHSC where appropriate, changing chapter references for patients committed to a facility, changing data collection dates (per HHSC recommendation), and changing the date the study is shared to December 2026.
- Definitions: Hospitals will report "online" and "offline" beds, both defined. Long-term is defined as "not less than 365 days" and "next several years" has changed to 10 years.
- Additional topic: The study will also examine the feasibility of Regional Advisory Councils (RACs) to collect and report data on inpatient psychiatric beds available and occupied, per Chairwoman Kolkhorst's recommendation.

C.S.S.B. 719 amends current law relating to the collection of information on available beds at inpatient mental health facilities providing acute psychiatric treatment.

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 Section 311.0335, Health and Safety Code, by amending Subsection (a) and adding Subsection (c), as follows:

(a) Requires a hospital that provides mental health or chemical dependency services to submit to the Department of State Health Services (DSHS) certain financial and utilization data, including data for inpatient and outpatient services relating to total number of inpatient psychiatric beds, including the total number of beds disaggregated by age, online beds, and offline beds. Makes nonsubstantive changes.

(c) Defines "online bed" and "offline bed."

SECTION 2. (a) Defines "commission" and "inpatient mental health facility."

(b) Provides that, for purposes of this section, an inpatient mental health facility is considered to be contracted with the Health and Human Services Commission (HHSC) if the facility contracts directly with HHSC or is subcontracted through a local mental health authority or local behavioral health authority.

(c) Requires HHSC to conduct a study regarding the availability of beds at inpatient mental health facilities in this state that provide acute inpatient psychiatric treatment. Requires that the study evaluate:

(1) the current number of psychiatric beds available at inpatient mental health facilities in this state that provide inpatient psychiatric treatment to individuals experiencing an acute mental health crisis, including a breakdown of beds available at certain facilities for certain groups of patients;

(2) the total number of patients who received inpatient psychiatric treatment between September 1, 2024, and August 31, 2025, at inpatient mental health facilities in this state, including private facilities, that provide that treatment, including a breakdown of certain numbers and percentages of patients in certain groups;

(3) the total number of incarcerated patients who received inpatient psychiatric treatment between September 1, 2024, and August 31, 2025, through a jail diversion program while incarcerated in this state;

(4) the feasibility of trauma service area regional advisory councils to collect and report to HHSC data on the number of inpatient psychiatric beds available or occupied at each hospital located in the geographic areas the trauma service area regional advisory councils serve; and

(5) the need over the next 10 years of inpatient mental health facilities that provide inpatient psychiatric treatment, expressed as a range of the minimum and maximum amounts needed, for additional inpatient psychiatric beds, including needed beds that are funded or under construction, and the projected percentage needed for patients who require not less than 365 days of treatment and additional resources, including workforce needs, necessary to meet the demands described by this subdivision.

(d) Authorizes HHSC, in designing and conducting the study, to collaborate with institutions of higher education, as defined by Section 61.003 (Definitions), Education Code, in this state that award medical degrees.

(e) Requires HHSC, not later than December 1, 2026, to prepare and submit to the legislature a written report containing the results of the study and any recommendations for legislative or other action.

(f) Effective date, this section: September 1, 2027.

SECTION 3. Effective date: upon passage or September 1, 2025.