

1-1 By: Bettencourt S.B. No. 984  
1-2 (In the Senate - Filed January 29, 2025; February 13, 2025,  
1-3 read first time and referred to Committee on Health & Human  
1-4 Services; March 31, 2025, reported favorably by the following  
1-5 vote: Yeas 9, Nays 0; March 31, 2025, sent to printer.)

1-6 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-7				
1-8	X			
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13	X			
1-14	X			
1-15	X			
1-16	X			

1-17 A BILL TO BE ENTITLED  
1-18 AN ACT

1-19 relating to access to individualized investigational treatments  
1-20 for patients with life-threatening or severely debilitating  
1-21 illnesses.

1-22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-23 SECTION 1. Subtitle C, Title 6, Health and Safety Code, is  
1-24 amended by adding Chapter 491 to read as follows:

1-25 CHAPTER 491. ACCESS TO INDIVIDUALIZED INVESTIGATIONAL TREATMENTS  
1-26 FOR PATIENTS WITH LIFE-THREATENING OR SEVERELY DEBILITATING  
1-27 ILLNESSES

1-28 SUBCHAPTER A. GENERAL PROVISIONS

1-29 Sec. 491.001. DEFINITIONS. In this chapter:

1-30 (1) "Individualized investigational treatment" means  
1-31 a drug, biological product, or device unique to and produced  
1-32 exclusively for use by a patient, based on the patient's genetic  
1-33 profile. The term includes individualized gene therapy antisense  
1-34 oligonucleotides and individualized neoantigen vaccines.

1-35 (2) "Life-threatening illness" means a disease or  
1-36 condition with:

1-37 (A) a significantly increased likelihood of  
1-38 death unless the course of the disease or condition is interrupted;  
1-39 or

1-40 (B) potentially fatal outcomes and for which the  
1-41 goal of clinical trials is survival.

1-42 (3) "Severely debilitating illness" means a disease or  
1-43 condition that causes major irreversible morbidity.

1-44 SUBCHAPTER B. ACCESS TO INDIVIDUALIZED INVESTIGATIONAL TREATMENT

1-45 Sec. 491.051. HEALTH CARE FACILITY ELIGIBILITY. A health  
1-46 care facility is eligible to provide an individualized  
1-47 investigational treatment under this chapter if the facility is  
1-48 operating under a federal assurance for the protection of human  
1-49 subjects under 42 U.S.C. Section 289(a) and 45 C.F.R. Part 46 and is  
1-50 subject to the federal assurance laws, regulations, policies, and  
1-51 guidelines.

1-52 Sec. 491.052. PATIENT ELIGIBILITY. A patient is eligible  
1-53 to access an individualized investigational treatment under this  
1-54 chapter if:

1-55 (1) the patient:

1-56 (A) has a life-threatening illness or severely  
1-57 debilitating illness;

1-58 (B) has considered all other treatment options  
1-59 currently approved by the United States Food and Drug  
1-60 Administration; and

1-61 (C) has given written informed consent for access

2-1 to the treatment; and

2-2 (2) the patient's physician:

2-3 (A) attests to the patient's life-threatening  
2-4 illness or severely debilitating illness and the patient's  
2-5 eligibility under this section; and

2-6 (B) recommends the treatment for the patient  
2-7 based on analysis of the patient's genomic sequence, human  
2-8 chromosomes, deoxyribonucleic acid, ribonucleic acid, genes, gene  
2-9 products such as enzymes and other types of proteins, or  
2-10 metabolites.

2-11 Sec. 491.053. INFORMED CONSENT. (a) An eligible patient  
2-12 may not access an individualized investigational treatment unless  
2-13 the patient provides written informed consent. If the patient is a  
2-14 minor or lacks the mental capacity to provide informed consent, a  
2-15 parent, legal guardian, managing conservator, or patient's agent as  
2-16 defined by Section 166.151 may provide written informed consent on  
2-17 the patient's behalf.

2-18 (b) Informed consent under this chapter must be attested to  
2-19 in writing by the patient's physician and a witness.

2-20 (c) Informed consent under this chapter must include at a  
2-21 minimum:

2-22 (1) an explanation of the currently approved  
2-23 treatments for the patient's disease or condition;

2-24 (2) the patient's attestation that the patient concurs  
2-25 with the assessment of the patient's physician that all currently  
2-26 approved and conventionally recognized treatments are unlikely to  
2-27 prolong the patient's life;

2-28 (3) clear identification of the specific proposed  
2-29 individualized investigational drug, biological product, or device  
2-30 the patient's physician recommends;

2-31 (4) a description, based on the physician's knowledge  
2-32 of the proposed treatment in conjunction with an awareness of the  
2-33 patient's disease or condition, of the potentially best and worst  
2-34 outcomes of using the treatment, and of the most likely outcome,  
2-35 including the possibility that new, unanticipated, different, or  
2-36 worse symptoms might result and that death could be hastened by the  
2-37 treatment;

2-38 (5) a statement that the patient's health benefit plan  
2-39 issuer or third-party administrator and provider are not obligated  
2-40 to pay the cost of any care related to the use of the treatment  
2-41 unless payment is specifically required by law or contract;

2-42 (6) a statement that the patient's eligibility for  
2-43 hospice care may be withdrawn if the patient begins the treatment  
2-44 and that care may be reinstated if the treatment ends and the  
2-45 patient meets hospice eligibility requirements; and

2-46 (7) a statement that the patient understands the  
2-47 patient is liable for all expenses related to the use of the  
2-48 treatment and the liability extends to the patient's estate, unless  
2-49 a contract between the patient and the manufacturer of the  
2-50 treatment provides otherwise.

2-51 Sec. 491.054. ACCESS TO TREATMENT; COSTS. (a) A  
2-52 manufacturer operating within an eligible health care facility and  
2-53 in compliance with all applicable federal assurance laws and  
2-54 regulations may make available an individualized investigational  
2-55 treatment, and an eligible patient may request access to the  
2-56 treatment from an eligible health care facility or manufacturer  
2-57 operating within an eligible health care facility under this  
2-58 chapter.

2-59 (b) A manufacturer is not required under this chapter to  
2-60 make available an individualized investigational treatment to an  
2-61 eligible patient.

2-62 (c) An eligible health care facility or manufacturer  
2-63 operating within an eligible health care facility may:

2-64 (1) provide an individualized investigational  
2-65 treatment to an eligible patient without receiving compensation; or

2-66 (2) require an eligible patient to pay the costs of, or  
2-67 the costs associated with, the manufacture of the treatment.

2-68 Sec. 491.055. DEBT LIABILITY ON DEATH OF PATIENT. If a  
2-69 patient dies while receiving an individualized investigational

3-1 treatment, the patient's heirs are not liable for any outstanding  
3-2 debt related to the treatment or lack of health coverage due to the  
3-3 treatment.

3-4 Sec. 491.056. NO PRIVATE CAUSE OF ACTION. This chapter does  
3-5 not create a private cause of action against a manufacturer of an  
3-6 individualized investigational treatment or against any other  
3-7 person involved in the care of an eligible patient using the  
3-8 treatment for any harm to the patient resulting from the treatment  
3-9 if the manufacturer or other person is complying in good faith with  
3-10 the terms of this chapter and has exercised reasonable care.

3-11 Sec. 491.057. PROHIBITED STATE INTERFERENCE WITH ACCESS TO  
3-12 TREATMENT. (a) An officer, employee, or agent of this state may  
3-13 not block or attempt to block an eligible patient's access to an  
3-14 individualized investigational treatment that complies with this  
3-15 chapter and rules adopted under this chapter.

3-16 (b) Notwithstanding Subsection (a), counseling, advice, or  
3-17 a recommendation consistent with medical standards of care from a  
3-18 licensed health care provider is not a violation of this section.

3-19 SUBCHAPTER C. HEALTH COVERAGE, COSTS, AND SERVICES

3-20 Sec. 491.101. HEALTH COVERAGE. This chapter does not  
3-21 affect:

3-22 (1) the coverage required of an insurer under the  
3-23 Insurance Code; or

3-24 (2) health care coverage of enrollees in clinical  
3-25 trials under Chapter 1379, Insurance Code.

3-26 Sec. 491.102. COVERAGE OPTIONAL. A health benefit plan  
3-27 issuer, third-party administrator, or governmental agency may, but  
3-28 is not required to, provide coverage for the cost of an  
3-29 individualized investigational treatment or the cost of services  
3-30 related to the use of an individualized investigational treatment  
3-31 under this chapter.

3-32 Sec. 491.103. HOSPITAL SERVICES. This chapter does not  
3-33 require a hospital or health care facility licensed under Subtitle  
3-34 B, Title 4, to provide new or additional services unless approved by  
3-35 the hospital or facility.

3-36 Sec. 491.104. GOVERNMENTAL AGENCY NOT RESPONSIBLE FOR  
3-37 COSTS. This chapter does not require a governmental agency to pay  
3-38 costs associated with the use, care, or treatment of a patient  
3-39 accessing an individualized investigational treatment.

3-40 SUBCHAPTER D. HEALTH CARE PROVIDERS

3-41 Sec. 491.151. PROHIBITED ACTION AGAINST LICENSE HOLDER OR  
3-42 MEDICAID PARTICIPANT. (a) A state licensing board may not revoke,  
3-43 fail to renew, suspend, or take any action against a health care  
3-44 provider's license issued under Title 3, Occupations Code, based  
3-45 solely on the provider's recommendation to an eligible patient  
3-46 regarding access to or treatment with an individualized  
3-47 investigational treatment.

3-48 (b) The Health and Human Services Commission may not take  
3-49 action against a health care provider that adversely affects the  
3-50 provider's participation in Medicaid based solely on the provider's  
3-51 recommendation for a patient to access an individualized  
3-52 investigational treatment.

3-53 SECTION 2. This Act takes effect September 1, 2025.

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