

BILL ANALYSIS

C.S.H.B. 1282
By: Zerwas
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Human papillomavirus (HPV) infections affect millions of people and account for thousands of deaths each year. Interested parties are concerned about reports indicating that a majority of people will contract HPV at some point during life and that HPV accounts for most cervical cancers and oropharyngeal cancers. The parties point to estimates claiming that by 2020 HPV will cause more oropharyngeal cancers than cervical cancers in the United States. HPV-associated cancers are a significant concern, but the parties contend that such cancers are also largely preventable. C.S.H.B. 1282 seeks to develop a plan to reduce morbidity and mortality from HPV-associated cancers.

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. 1282 requires the Department of State Health Services (DSHS) to develop a strategic plan to significantly reduce morbidity and mortality from human papillomavirus-associated cancer. The bill requires DSHS, in developing the strategic plan, to collaborate with the Cancer Prevention and Research Institute of Texas, authorizes DSHS to convene any necessary workgroups, and specifies the individuals authorized to be included as members of a workgroup. The bill sets out the required elements of the strategic plan and requires DSHS, not later than December 31, 2016, to deliver to the governor and members of the legislature the strategic plan and recommendations on goal implementation and schedule compliance related to the strategic plan. The bill's provisions expire January 1, 2017.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1282 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

SECTION 1. (a) The Department of State Health Services shall develop a strategic plan to significantly reduce morbidity and mortality from human papillomavirus-associated cancer.

(b) In developing the strategic plan, the Department of State Health Services shall collaborate with the Cancer Prevention and Research Institute of Texas and may convene any necessary workgroups. The members of a workgroup may include:

- (1) health care providers specializing in human papillomavirus-associated cancer prevention, screening, treatment, or research;
- (2) physicians specializing in primary care, pediatrics, or obstetrics and gynecology;
- (3) mid-level health care practitioners;
- (4) cancer epidemiologists;
- (5) representatives of general academic teaching institutions as defined by Section 61.003, Education Code, and medical and dental units as defined by Section 61.003, Education Code;

(6) middle school, high school, or college health educators;

(7) human papillomavirus-associated cancer survivors;

(8) representatives from geographic areas or other population groups at higher risk of human papillomavirus-associated cancer;

(9) representatives of community-based and faith-based organizations involved in providing education, awareness, or support relating to human papillomavirus-associated cancer; or

(10) other people the department determines are necessary.

(c) In developing the strategic plan, the Department of State Health Services shall:

(1) identify barriers to effective prevention, screening, and treatment for human papillomavirus-associated cancer, including specific barriers affecting providers and patients;

(2) identify methods to increase the number of people vaccinated against human papillomavirus;

(3) identify methods to increase use of evidence-based screening to enhance the number of people screened regularly for human papillomavirus-associated cancer;

HOUSE COMMITTEE SUBSTITUTE

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(2) physicians specializing in primary care, pediatrics, or obstetrics and gynecology;

(3) mid-level health care practitioners;

(4) cancer epidemiologists;

(5) representatives of general academic teaching institutions as defined by Section 61.003, Education Code, medical and dental units as defined by Section 61.003, Education Code, and medical schools as defined by Section 61.501, Education Code;

(6) middle school, high school, or college health educators;

(7) human papillomavirus-associated cancer survivors;

(8) representatives from geographic areas or other population groups at higher risk of human papillomavirus-associated cancer;

(9) representatives of community-based and faith-based organizations involved in providing education, awareness, or support relating to human papillomavirus-associated cancer; or

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(c) In developing the strategic plan, the Department of State Health Services shall:

(1) identify barriers to effective prevention, screening, and treatment for human papillomavirus-associated cancer, including specific barriers affecting providers and patients;

(2) identify methods to increase the number of people vaccinated against human papillomavirus;

(3) identify methods to increase use of evidence-based screening to enhance the number of people screened regularly for human papillomavirus-associated cancer;

- (4) review current technologies and best practices for human papillomavirus-associated cancer screening;
 - (5) review technology available to diagnose and prevent infection by human papillomavirus;
 - (6) develop methods for creating partnerships with public and private entities to increase awareness of human papillomavirus-associated cancer and of the importance of vaccination education and regular screening;
 - (7) review current prevention, screening, treatment, and related activities in this state and identify areas in which the services for those activities are lacking;
 - (8) estimate the annual direct and indirect state health care costs attributable to human papillomavirus-associated cancers;
 - (9) identify actions necessary to increase vaccination and screening rates and reduce the morbidity and mortality from human papillomavirus-associated cancer and establish a schedule for implementing those actions; and
 - (10) make recommendations to the legislature on policy changes and funding needed to implement the strategic plan.
- (d) Not later than December 31, 2016, the Department of State Health Services shall deliver to the governor and members of the legislature the strategic plan and recommendations on goal implementation and schedule compliance related to the strategic plan.
- (e) This section expires January 1, 2017.

SECTION 2. This Act takes effect September 1, 2015.

- (4) review current technologies and best practices for human papillomavirus-associated cancer screening;
 - (5) review technology available to diagnose and prevent infection by human papillomavirus;
 - (6) develop methods for creating partnerships with public and private entities to increase awareness of human papillomavirus-associated cancer and of the importance of vaccination education and regular screening;
 - (7) review current prevention, screening, treatment, and related activities in this state and identify areas in which the services for those activities are lacking;
 - (8) estimate the annual direct and indirect state health care costs attributable to human papillomavirus-associated cancers;
 - (9) identify actions necessary to increase vaccination and screening rates and reduce the morbidity and mortality from human papillomavirus-associated cancer and establish a schedule for implementing those actions; and
 - (10) make recommendations to the legislature on policy changes and funding needed to implement the strategic plan.
- (d) Not later than December 31, 2016, the Department of State Health Services shall deliver to the governor and members of the legislature the strategic plan and recommendations on goal implementation and schedule compliance related to the strategic plan.
- (e) This section expires January 1, 2017.

SECTION 2. Same as introduced version.