

BILL ANALYSIS

C.S.H.B. 2131
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Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

The use of prenatal medical procedures to reverse chronic, lifelong health conditions is showing much promise at fetal centers across the country. Two fetal centers are currently located in Texas: the Fetal Center at Children's Memorial Hermann Hospital and Texas Children's Fetal Center. Interested parties contend that the state could better utilize these centers by creating a center of excellence designation for qualified facilities that are expanding and integrating an advanced fetal care program and advancing existing long-term follow-up care for congenital anomalies. C.S.H.B. 2131 seeks to create such a designation.

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 rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 of this bill.

ANALYSIS

C.S.H.B. 2131 amends the Health and Safety Code to require the Department of State Health Services (DSHS), in consultation with the Fetal Diagnosis and Therapy Advisory Council, to designate as centers of excellence for fetal diagnosis and therapy one or more health care entities in Texas that provide comprehensive maternal, fetal, and neonatal health care for pregnant women with high-risk pregnancies complicated by one or more fetuses with anomalies, with genetic conditions, or with compromise caused by a pregnancy condition or by exposure. The bill requires the executive commissioner of the Health and Human Services Commission to appoint the Fetal Diagnosis and Therapy Advisory Council to advise DSHS in the designation of centers of excellence for fetal diagnosis and therapy. The bill requires the advisory council to consist of individuals with expertise in fetal diagnosis and therapy, requires a majority of the council members to practice in those areas in a health profession in Texas, and authorizes the council to include national and international experts.

C.S.H.B. 2131 requires the executive commissioner, in consultation with DSHS and the advisory council, not later than December 1, 2015, to adopt rules establishing the criteria necessary for a health care entity in Texas to be designated as a center of excellence for fetal diagnosis and therapy. The bill requires the rules to prioritize awarding a designation to a health care entity that offers fetal diagnosis and therapy through an extensive multi-specialty clinical program that is affiliated and collaborates extensively with a medical school in Texas and an associated hospital facility that provides advanced maternal and neonatal care; demonstrates a significant commitment to research in and advancing the field of fetal diagnosis and therapy; offers advanced training programs in fetal diagnosis and therapy; and integrates an advanced fetal care program with a program that provides appropriate long-term monitoring and follow-up care for

patients. The bill requires the rules to ensure that a designation is based directly on a health care entity's ability to achieve cost-effectiveness in health care treatment, implement and maintain a cohesive multidisciplinary structure for its health care team, meet acceptable thresholds of patient volume and physician experience, monitor short-term and long-term patient diagnostic and therapeutic outcomes, and provide to DSHS annual reports based on those outcomes and make those reports available to the public. The bill requires DSHS, not later than September 1, 2016, to begin awarding designations to health care entities establishing the required eligibility.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 2131 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. Subchapter A, Chapter 241, Health and Safety Code, is amended by adding Section 241.010 to read as follows:

Sec. 241.010. CENTERS OF EXCELLENCE FOR FETAL CARE AND HEALTHY OUTCOMES. (a) The department shall designate as a center of excellence for fetal care and healthy outcomes one or more hospitals licensed under this chapter that provide comprehensive maternal, fetal, and neonatal health care for pregnant women with high-risk medical complications and for fetuses with congenital anomalies and genetic conditions.

(b) The executive commissioner of the Health and Human Services Commission, in consultation with the department, shall adopt rules establishing the criteria necessary for a hospital in this state to be designated in this state as a center of excellence for fetal care and healthy outcomes.

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Chapter 32, Health and Safety Code, is amended by adding Subchapter D to read as follows:

SUBCHAPTER D. CENTERS OF EXCELLENCE

FOR FETAL DIAGNOSIS AND THERAPY

Sec. 32.071. DESIGNATION OF CENTERS OF EXCELLENCE FOR FETAL DIAGNOSIS AND THERAPY. (a) The department, in consultation with the Fetal Diagnosis and Therapy Advisory Council, shall designate as centers of excellence for fetal diagnosis and therapy one or more health care entities in this state that provide comprehensive maternal, fetal, and neonatal health care for pregnant women with high-risk pregnancies complicated by one or more fetuses with anomalies, with genetic conditions, or with compromise caused by a pregnancy condition or by exposure.

(b) The executive commissioner of the Health and Human Services Commission, in consultation with the department and the Fetal Diagnosis and Therapy Advisory Council, shall adopt rules establishing the criteria necessary for a health care entity in this state to be designated as a center of excellence for fetal diagnosis and therapy.

Sec. 32.072. ADVISORY COUNCIL. (a) The executive commissioner of the Health and Human Services Commission shall appoint the Fetal Diagnosis and Therapy Advisory Council to advise the department in the designation of centers of excellence for fetal diagnosis and therapy.

(b) The advisory council must consist of individuals with expertise in fetal diagnosis and therapy. A majority of the members of the advisory council must practice in those areas in a health profession in this state. The advisory council may include national and international experts.

(c) The rules adopted under Subsection (b) must prioritize awarding a designation under this section to a hospital that:

(1) offers fetal diagnosis, care, and healthy outcomes through an extensive multi-specialty clinical and research program that is affiliated and collaborates extensively with a public medical school in this state;

(2) demonstrates a significant commitment to research and advanced training in fetal diagnosis, care, and healthy outcomes;

(3) offers one or more accredited fellowships for advanced training in fetal diagnosis, care, and healthy outcomes; and

(4) integrates an advanced fetal care program with a program that provides long-term monitoring and follow-up care for congenital anomalies and genetic conditions.

(d) The rules adopted under Subsection (b) must ensure that a designation under this section is based directly on a hospital's ability to:

(1) achieve cost-effectiveness in health care treatment;

(2) implement and maintain a cohesive multidisciplinary structure for its health care team;

(3) exceed critical thresholds for physician and patient volumes and for physician experience;

(4) report and monitor short-term and long-term patient outcomes; and

(5) demonstrate an improvement in short-term and long-term patient outcomes as compared to other hospitals offering fetal care and healthy outcomes in this state.

SECTION 2. (a) The executive

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Sec. 32.073. PRIORITY CONSIDERATIONS FOR CENTER DESIGNATIONS. The rules adopted under Section 32.071(b) must prioritize awarding a designation under this subchapter to a health care entity that:

(1) offers fetal diagnosis and therapy through an extensive multi-specialty clinical program that is affiliated and collaborates extensively with a medical school in this state and an associated hospital facility that provides advanced maternal and neonatal care;

(2) demonstrates a significant commitment to research in and advancing the field of fetal diagnosis and therapy;

(3) offers advanced training programs in fetal diagnosis and therapy; and

(4) integrates an advanced fetal care program with a program that provides appropriate long-term monitoring and follow-up care for patients.

Sec. 32.074. QUALIFICATIONS FOR DESIGNATION. The rules adopted under Section 32.071(b) must ensure that a designation under this subchapter is based directly on a health care entity's ability to:

(1) achieve cost-effectiveness in health care treatment;

(2) implement and maintain a cohesive multidisciplinary structure for its health care team;

(3) meet acceptable thresholds of patient volume and physician experience;

(4) monitor short-term and long-term patient diagnostic and therapeutic outcomes; and

(5) provide to the department annual reports based on those outcomes and make those reports available to the public.

SECTION 2. (a) The executive

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commissioner of the Health and Human Services Commission shall adopt the rules required by Section 241.010, Health and Safety Code, as added by this Act, not later than December 1, 2015.

(b) Not later than September 1, 2016, the Department of State Health Services shall begin awarding designations required by Section 241.010, Health and Safety Code, as added by this Act, to **hospitals** establishing eligibility under that section.

SECTION 3. This Act takes effect September 1, 2015.

commissioner of the Health and Human Services Commission shall adopt the rules required by Section 32.071, Health and Safety Code, as added by this Act, not later than December 1, 2015.

(b) Not later than September 1, 2016, the Department of State Health Services shall begin awarding designations required by Subchapter D, Chapter 32, Health and Safety Code, as added by this Act, to **health care entities** establishing eligibility under that subchapter.

SECTION 3. Same as introduced version.