

BILL ANALYSIS

Senate Research Center
78R1427 JTS-D

S.B. 56
By: Zaffirini
Health and Human Services
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As Filed

DIGEST AND PURPOSE

Currently, primary care and rural health clinics are closing because of a lack of population density to support and sustain a full- or part-time clinic. As a result, these communities suffer from lack of a stable workforce, lack of a full time public health office, and increased need for medical transportation. As proposed, S.B. 56 provides coordinated access to public and private healthcare and a model for financial sustainability of those health care delivery sites, particularly in communities of low population density or under-served populations.

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 Chapter 487C, Government Code, by adding Section 487.059, as follows:

Section 487.059. RURAL HEALTH CENTERS. Provides that in this section “rural county” has the definition assigned by Section 487.301 (Definitions).

(b) Requires the Office of Rural Community Affairs (office), in cooperation with the Texas Department of Health, the Health and Human Services Commission, the public health department in rural counties, and the statewide rural health care system designated under Chapter 845 (Statewide Rural Health Care System), Insurance Code, to establish regional health centers in rural counties to coordinate the delivery of health care to residents.

(c) Requires each agency listed in Subsection (b) to provide services covered by programs of the agency to residents of rural counties from the regional health centers. Requires each agency to contract with health care professionals to work from the regional center to provide health services to the rural resident of those counties. Requires the health care professional providing services at a rural health center to be eligible to serve the residents who are enrolled in federal and agency programs.

(d) Requires the office to report to the legislature regarding the efficacy of rural health centers as part of the office’s report to the legislature under Section 487.056 (Report to Legislature).

SECTION 2. Requires the office, by January 1, 2004, after having consulted with the appropriate health care agencies, to choose three or four sites to serve as rural health centers as required by Section 487.059, Government Code, as added by this Act. Authorizes the office to designate additional sites as rural health centers if it determines, as reported in its annual report delivered to the legislature on January 1, 2005, that the rural health centers are effective in coordinating health care services to residents of rural counties.

SECTION 3. Effective date: September 1, 2003.