

BILL ANALYSIS

Senate Research Center

H.B. 2131
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Health & Human Services
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Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

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. H.B. 2131 seeks to create such a designation.

H.B. 2131 amends current law relating to the designation of centers of excellence to achieve healthy fetal outcomes in this state.

[**Note:** While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services, as the successor agency to TDH.]

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Section 32.071, Health and Safety Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Chapter 32, Health and Safety Code, by adding Subchapter D, 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) Requires the Texas Department of Health (TDH), in consultation with the Perinatal Advisory Council established under Section 241.187 (Perinatal Advisory Council), to 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) Requires the executive commissioner of the Health and Human Services Commission (executive commissioner), in consultation with TDH and the Perinatal Advisory Council, to adopt the rules 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. SUBCOMMITTEE. (a) Requires TDH, in consultation with the Perinatal Advisory Council, to appoint a subcommittee of that advisory council to advise the advisory council and TDH on the development of rules related to the designations made by TDH under this subchapter. Requires the subcommittee specifically, as part of its duties under this subsection, to advise the advisory council and TDH regarding the

criteria necessary for a health care entity in this state to receive a designation under this subchapter.

(b) Requires the subcommittee to consist of individuals with expertise in fetal diagnosis and therapy. Requires a majority of the members of the subcommittee to practice in those areas in a health profession in this state. Authorizes the subcommittee to include national and international experts.

Sec. 32.073. PRIORITY CONSIDERATIONS FOR CENTER DESIGNATIONS. Requires that the rules adopted under Section 32.071(b) 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 in accordance with the rules established under Section 241.183(a)(1) (requiring the executive commissioner, in consultation with TDH, to adopt rules establishing the levels of care for neonatal and maternal care to be assigned to hospitals);
- (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. Requires that the rules adopted under Section 32.071(b) ensure that a designation under this subchapter is based directly on a health care entity's ability to:

- (1) implement and maintain a cohesive multidisciplinary structure for its health care team;
- (2) monitor short-term and long-term patient diagnostic and therapeutic outcomes; and
- (3) provide to TDH annual reports containing aggregate data on short-term and long-term diagnostic and therapeutic outcomes as requested or required by TDH and make those reports available to the public.

SECTION 2. (a) Requires the executive commissioner to adopt rules required by Section 32.071, Health and Safety Code, as added by this Act, not later than March 1, 2018.

(b) Requires the Department of State Health Services, not later than September 1, 2018, to 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. Effective date: September 1, 2015.