

### **Legislative Report – 86th Regular Texas Legislative Session**

This report summarizes all bills followed by Board staff that were enacted by the Texas Legislature during the 2019 86<sup>th</sup> Texas Legislative Session. Bills included in the April 2019 Board Report (Item 1.4) which were not enacted by the legislature are not included in this report. There were two bills amending the Nursing Practice Act passed in the 86<sup>th</sup> Regular Legislative Session. Nursing, Legal and Operations staff member assistance was instrumental in following and reporting on the bills included in this report. Staff members who reported on the bills are listed by their initials in the first column of the report.

This report is broken into three sections:

1. Bills amending the Nursing Practice Act;
2. Bills requiring rule making, development of frequently asked questions, that require consultation with our agency or some other type of action; and
3. All other bills relating to nursing.

#### **Recommendation**

This item is for informational purposes only. No action is required.

## Bills Amending the Nursing Practice Act

Bill Number	Bill Summary	Author(s)	Implications for BON/NPA	Effective Date
<p><b>HB 2059</b></p> <p><b>Human Trafficking Prevention Training for Health Care Practitioners</b></p> <p>HF</p>	<p>Relating to required human trafficking prevention training for health care practitioners and certain employees of health care facilities</p> <p>HB 2059 seeks to combat human trafficking in Texas by requiring that health care practitioners who provide direct patient care complete training that will help detect potential victims of human trafficking and provide them with adequate care, including referring them to additional support services.</p>	<p><b>Representative Cesar Blanco</b></p>	<p>Amends NPA, specifically Subchapter G, Chapter 301, Occupations Code, by adding Section 301.308.</p> <p>Subsection (a) requires a license holder who provides direct patient care, as part of a continuing competency program under Section 301.303 (Continuing Competency), to complete a human trafficking prevention course approved by the executive commissioner under Section 116.002; and subsection (b) requires the Texas Board of Nursing to adopt rules to implement this section; requires also that applicable licensing agency, as soon as practicable after the effective date of this Act, provides notice to a health care practitioner of the human trafficking prevention training required under Chapter 116, Occupations Code, as added by this Act.</p> <p>Also, it requires the executive commissioner of HHSC, as soon as practicable after the effective date of this act, to approve and post on HHSC's website the list of approved human trafficking prevention training courses and adopt rules necessary to implement chapter 116, Occupations Code, as added by this Act.</p> <p>The BON will need to amend Board Rule 216 and address whether this would be a recurring or one-time requirement.</p>	<p>9/1/2019</p>

<p><b>HB 2410</b></p> <p><b>Peer Review</b></p> <p>JWJ/JA</p>	<p>Relating to a request for a nursing peer review determination.</p> <p>Allows a nurse who wishes to have a peer review committee determine if a requested act would violate the nurse's duty to a patient to request the review orally if the nurse cannot complete a written form at the time of the request. If requested orally, the nurse's supervisor must record the request in writing and be signed by the supervisor and the requesting nurse. The statute specifies the details that must be included in the written documentation.</p>	<p><b>Representative Stephanie Klick</b></p>	<p>Amends NPA 303.005.</p> <p>Will require conforming rule changes.</p>	<p>9/1/2019</p>
---	---	--	---	-----------------

**Bills Requiring Rule Making, Development of Frequently Asked Questions, Require Consultation  
with BON Staff, or relate to Agency Operations**

<p align="center"><b>HB 1</b>  <b>Budget Bill</b>  MM</p>	<p>General Appropriations Bill House Bill 1 (HB 1) provides the revenue and spending parameters for all state entities.</p>	<p align="center"><b>Representative John Zerwas</b></p>	<p>No amendment to the NPA.  The Texas Board of Nursing (BON or Board) received increased funding for temporary staffing (\$300,000), nursing salaries (\$435,206) and executive director salary increase (\$42,000).</p>	<p align="center">9/1/2019</p>
<p align="center"><b>HB 278</b>  <b>APRN Prescriptive Authority</b>  JZ</p>	<p>Relating to the frequency and location of certain meetings required by a prescriptive authority agreement.  Allows for APRNs to have monthly meetings with their delegating physician that are conducted via other mechanisms than face to face meetings. Only applies to prescriptive authority agreements entered into on or after the effective date</p>	<p align="center"><b>Representative Tom Oliverson</b></p>	<p>Requires amendments to Rule 222 to address the changes to prescriptive authority agreements.  APRNs with prescriptive authority agreements will need to be aware that the rule is only applicable to agreements entered into on or after September 1, 2019.</p>	<p align="center">9/1/2019</p>
<p align="center"><b>HB 1342</b>  <b>Licensure Eligibility</b>  TD</p>	<p>Relating to a person 's eligibility for an occupational license; providing an administrative penalty.  The bill amends the Occupations Code, Chapters 51, related to the Texas Department of Licensure and Regulation and Chapter 53 related to general licensure provisions and consequences of criminal convictions.</p>	<p align="center"><b>Representative Jeff Leach</b></p>	<p>This bill does not amend the Nursing Practice Act; however, the Occupations Code, Chapter 53 is amended impacting the Board of Nursing. Rules 213.28, related to <i>Licensure of Individuals with Criminal History</i>, and 213.30, related to <i>Declaratory Order of Eligibility for Licensure</i>, will need to be amended to align with the enacted changes. Additionally, the agency will need to be available for collaboration with the state auditor's office in their development of a licensure guide and a</p>	<p align="center">9/1/2019</p>

			link will need to be posted on the BON website once the guide is completed.	
<p><b>HB 2042</b></p> <p><b>Annual Financial Reports Comptroller Audit</b></p> <p>MM</p>	<p>Relating to post payment audits conducted by the comptroller and annual financial reports submitted by state agencies.</p>	<p><b>Representative Lynn Stucky</b></p>	<p>HB 2042 amends Section 2101.011(c), Government Code, to remove the requirement that a state agency's annual financial report include a value of consumable supplies and postage and other assets besides those enumerated in the statute.</p> <p>HB 2042 also authorizes the comptroller to access the books, accounts, confidential or nonconfidential reports, vouchers, electronic data, or other records or information of a state agency subject to a post payment audit.</p>	<p>9/1/2019</p>
<p><b>HB 2110</b></p> <p><b>Customer Satisfaction Measurement</b></p> <p>BH</p>	<p>Relating to state agency measurement and management of customer satisfaction.</p>	<p><b>Representative Matt Shaheen</b></p>	<p>House Bill 2110 updates the statutory requirements relating to agency collection of data relating to customer satisfaction to incorporate the following changes:</p> <ul style="list-style-type: none"> <li>• adds mobile and web applications as an allowed method for collection of customer satisfaction from external customers;</li> <li>• adds applicable text messaging or mobile applications and mobile access to websites, as part of the state agency customer service information evaluated;</li> <li>• provides that state agencies retain ownership of the customer satisfaction data collected; and</li> <li>• requires the Legislative Budget Board and the Governor's Office of Budget and Policy to jointly develop a standardized method to measure customer satisfaction and create</li> </ul>	<p>6/10/2019</p>

			standardized performance measures for state agencies.	
<p><b>HB 2174</b></p> <p><b>Controlled substance prescription and treatment for substance use disorders</b></p> <p>JZ/MM</p>	<p>Relating to controlled substance prescriptions and reimbursement for treatment for certain substance use disorders; authorizing a fee.</p> <p>Requires electronic prescriptions for Schedule II drugs. Clarifies when a designated agent may transmit an emergency prescription for a Schedule II drug and conditions that must be met. Allows for the partial filling of a Schedule II prescription in compliance with federal law. Provides specific exemptions for electronic prescribing of controlled substances. Requires agency who license prescribers to participate in an interagency workgroup that would develop a waiver process for electronic prescribing provided certain conditions apply. Each agency must develop rules and a process to grant waivers. Waivers expire annually. Requires newly licensed prescribers to complete a two-hour CE course regarding approved procedures of prescribing and monitoring controlled substances within one year. Each board is required to approve CE</p>	<p><b>Representative John Zerwas</b></p>	<p>Requires amendments to Rule 222 to address the changes regarding electronic prescribing and limitations on prescribing opioids for acute pain. Rules 216 and 222 will require amendment regarding the continuing education requirement.</p> <p>Board staff will need to participate in the interagency work group regarding the waiver process and develop a process for review and approval of waiver applications.</p> <p>The BON will be allowed to hire one Administrative Staff position to support the development and maintenance of the prescription waiver system (\$119,259).</p>	<p>9/1/2019</p>

	<p>courses for this purpose. Prescribers may issue prescriptions for controlled substances for acute pain for up to a ten-day supply. Provides for medical assistance to reimburse for medication assisted treatment for opioid or substance use disorder provided criteria are met.</p>			
<p><b>HB 2454</b></p> <p><b>Continuing education requirement related to pain management and opioid prescribing</b></p> <p>JZ</p>	<p>Relating to continuing education requirements for certain health professionals regarding pain management and the prescribing of opioids.</p> <p>Requires specific continuing education for physicians, dentists, PAs, and APRNs who prescribe opioids to complete continuing education related to pain management and the prescribing of opioids annually. Content must include reasonable standard of care, identification of drug-seeking behavior in patients, and effective communication with patients regarding opioids.</p>	<p><b>Representative Four Price</b></p>	<p>Rules 216 and 222 will require amendment regarding the continuing education requirement.</p>	<p>9/1/2019</p>
<p><b>HB 3285</b></p> <p><b>Prevention of opioid addiction, misuse and abuse</b></p> <p>JZ</p>	<p>Relating to programs and initiatives to prevent and respond to opioid addiction, misuse, abuse, and overdose and identify and treat co-occurring substance use disorders and mental illness. Requires overdose awareness training for residential advisors</p>	<p><b>Representative J.D. Sheffield</b></p>	<p>Rules 216 and 222 will require amendment regarding the continuing education requirement.</p>	<p>9/1/2019</p>

	and student organization officers at institutions of higher education. Requires establishment of programs to treat substance use disorders via telehealth. Creates a grant program for law enforcement agencies seeking to provide opioid antagonists to officers and evidence techs. Also creates a mechanism to provide these drugs to first responders, EMS, public schools, community centers and others. Establishes a statewide behavioral health coordinating council. Requires prescribers of opioids to complete at least one hour of CE annually that includes content on best practices, alternative treatment options, and multimodal approaches to pain management. Requires HHS to collect data regarding opioid overdose deaths and co-occurring substance use disorders.			
<b>HB 3834</b> <b>Cybersecurity Training</b>  MM	Relating to the requirement that certain state and local government employees and state contractors complete a cybersecurity training program certified by the state cybersecurity coordinator.	<b>Representative Giovanni Capriglione</b>	Requires state employees that uses a computer to complete at least 25 percent of the employee's required duties, at least once each year, to complete a cybersecurity training program.	6/14/2019
<b>SB 37</b>	Relating to the abolition of student loan default or breach of a student loan repayment or	<b>Senator Judith Zaffirini</b>	Amends Occupations Code Chapter 56; Finance Code Chapter 157 and 180; and Government Code Chapter 466.	6/7/2019

<p><b>Legal</b></p> <p>JWJ/JA</p>	<p>scholarship contract as a ground for nonrenewal or other disciplinary action in relation to a professional or occupational license.</p> <p>A licensing authority may not take disciplinary action against a licensee holder or applicant for a student loan default or breach of a repayment plan.</p> <p>Extends same prohibitions to an application for a residential mortgage loan originator license and sales agent license.</p>		<p>Repeals Section 57.491, Education Code; Section 82.022(c), Government Code; Section 154.110(e), Government Code; and Sections 56.001(1), 56.002, 56.004, 56.005, and 56.006, Occupations Code.</p> <p>Will require conforming rule change.</p>	
<p><b>SB 64</b></p> <p><b>Cybersecurity</b></p> <p>MM</p>	<p>Relating to cybersecurity for agency information resources.</p> <p>Senate Bill 64 revises several cybersecurity requirements by state agency information resources, including oversight of cybersecurity practices.</p>	<p><b>Senator Jane Nelson</b></p>	<p>No amendments to the NPA</p> <p>Senate Bill 64 will require the Texas Board of Nursing to include key staff in the acknowledgement of the agency security plan and risks associated with cybersecurity issues. The bill revises requirements in the agency biennial operating plan, requires a vulnerability assessment and notification requirements of cybersecurity breaches.</p>	<p>9/01/2019</p>
<p><b>SB 241</b></p> <p><b>Department of Information Resources</b></p> <p>MM</p>	<p>Relating to certain required reports received or prepared by state agencies and other governmental entities.</p>	<p><b>Senator Jane Nelson</b></p>	<p>SB 241 amends Section 2054.075(b), Government Code, to require state agencies to include an organizational chart showing the structure of the personnel in the agency's executive management as part of the currently required report to the Texas Department of Information Resources (DIR).</p>	<p>9/01/2019</p>

			<p>SB 241 amends Sections 2054.100 and 2054.103, Government Code, to delete the requirement that state agencies deliver to DIR a copy of the biennial operating plan and any changes to that plan.</p> <p>Amends Section 2054.133(c), Government Code, to change the due date for the submission of the agency's information security plan, which is due in each even-numbered year to DIR, from October 15 to June 1.</p> <p>Amends Section 2054.515(b), Government Code, which requires state agencies to submit the results of the agency information security assessment to DIR, to require that submission must be sent to the governor, lieutenant governor, and speaker of the house of representatives, only if requested.</p> <p>Amends Section 2102.009, Government Code, to remove the Texas Sunset Advisory Commission from the required recipient list for each state agency's annual audit report. State agencies will still submit the report to the governor, Legislative Budget Board, state auditor, and the state agency's governing board, and administrator.</p> <p>Amends Section 2102.0091(a), Government Code, to remove the Texas Sunset Advisory Commission from the required recipient list for a copy of each report that a state agency submits to the state agency's governing board.</p>	
--	--	--	---	--

<p><b>SB 819</b></p> <p><b>Information Technology</b></p> <p>MM</p>	<p>Relating to state agency electronic information and processes.</p>	<p><b>Senator Jane Nelson</b></p>	<p>Department of Information Resources (DIR) to:</p> <ul style="list-style-type: none"> <li>• establish a central repository for publicly accessible electronic data as the official open data website for the state to be known as the Texas Open Data Portal; and</li> <li>• ensure that state agencies and political subdivisions of the state are granted shared access to the repository that allows the agencies and political subdivisions to easily post publicly accessible information to the repository.</li> </ul> <p>Each state agency required to prioritize using the repository and actively collaborate with DIR on publicly accessible data issues.</p> <p>DIR to establish a digital transformation guide to assist state agencies with modernizing agency electronic data handling and with converting agency information into electronic data. Each state agency to designate employee to serve as the agency's information resources manager. State agencies required to consider cloud computing service options when making purchases for major information resource projects and in the development of new information technology software applications.</p>	<p>9/01/2019</p>
<p><b>SB 943</b></p> <p>Increased Transparency in</p>	<p>Relating to the disclosure of certain contracting information under the public information law.</p>	<p><b>Senator Kirk Watson</b></p>	<p>No amendments to the NPA.</p> <p>This bill makes several changes to the Texas Public Information Act relating to contracting information. The Board's</p>	<p>1/1/2020</p>

<p>Government Contracting</p> <p>AL</p>			<p>contracting information is expressly public unless it is excepted from disclosure under the Public Information Act. Additionally, only a governmental body may argue that the release of its information would harm its interests by providing an advantage to a competitor or bidder in a particular competitive situation. Private entities that the Board contracts with may argue that their information is excepted from disclosure as a trade secret, certain commercial or financial information, or proprietary information.</p> <p>A requestor may file suit for writ of mandamus compelling a governmental body or an entity to comply with the additional provisions related to contracting information. Certain entities are required to provide contracting information to the Board when the request is for contracting information that is in the custody or possession of that entity. When the contracting information is in the custody or possession of a contracting entity and not maintained by the Board, the Board has additional time to request an attorney general's decision and to provide certain information to the requestor.</p> <p>Further, the Board must require certain contracting entities to preserve all contracting information related to the contract. Additionally, the Board's contracts must include provisions relating to these new requirements of</p>	
---	--	--	---	--

			the Public Information Act. Finally, a contract may be terminated for noncompliance with these new requirements.	
<b>SB 944</b>  <b>Public Information Law</b>  BH	Relating to the public information law.	<b>Senator Kirk Watson</b>	<p>Senate Bill 944 revises the Public Information Act to provide a process for a governmental body to retrieve public information held by a temporary custodian, specify the procedure for making a written request, require the attorney general to create a request form, and create an exception for certain health information.</p> <p>SB 944 defines “temporary custodian” to mean an officer or employee of a governmental body who, in the transaction of official business, creates or receives public information that the officer or employee has not provided to the officer for public information of the governmental body or the officer’s agent. The term includes a former officer or employee of a governmental body who created or received public information in the officer’s or employee’s official capacity and has not provided that public information to the officer for public information of the governmental body or the officer’s agent.</p> <p>The bill adds a requirement to a state agency’s retention schedule that requires a current or former officer or employee of a governmental body who maintains public information on a privately-owned device to:</p>	9/1/2019

			<p>1. forward or transfer the public information to the governmental body or a governmental body server to be preserved; or</p> <p>2. preserve the public information in its original form on the privately-owned device for a period of time determined by the governmental body.</p>	
<p><b>SB 1349</b></p> <p><b>Sale of Hobby Building Complex</b></p> <p>BH</p>	<p>Relating to authorizing the sale of certain real property by the Texas Facilities Commission on behalf of the state.</p>	<p><b>Senator Kirk Watson</b></p>	<p>The William Hobby Building complex will be sold and the state agencies, including the Board of Nursing, will relocate to another location. Speculation is that the agencies will be relocated to new buildings under construction in the capital complex. The move may take two to five years to complete.</p>	<p>5/22/2019</p>
<p><b>SB 1636</b></p> <p><b>HPC Annual Report</b></p> <p>NB</p>	<p>Relating to an annual report prepared by the Health Professions Council.</p>	<p><b>Senator Judith Zaffirini</b></p>	<p>Adds to the requirements of the annual Health Professions Council report to include strategies to expand the health care workforce in Texas. This would include strategies to reduce licensing timeframes, increasing the number of professionals providing mental and behavioral health. Texas BON has one member it appoints to this 14-member council.</p>	<p>6/10/2019</p>
<p><b>SB 2011</b></p> <p><b>Report of requirements for advanced practice registered nurses to become licensed physicians</b></p>	<p>Relating to a study and report regarding streamlining physician licensing requirements for advanced practice registered nurses (APRNs)</p> <p>Amends Subchapter C, Chapter 61, Education Code to require the Texas Higher</p>	<p><b>Senator Dawn Buckingham</b></p>	<p>Does not amend the NPA or require BON rulemaking. Board staff will partner with the other entities required to conduct the study.</p>	<p>9/1/2019</p>

KB	Education Coordinating Board to partner with another institution of higher education, the Texas Medical Board, and the Texas Board of Nursing to conduct a study related to the feasibility of developing a pilot program of streamlining the qualifications and prerequisites for an APRN to become eligible for licensure as a physician. A report of the study results with recommendations is due by December 1, 2020.			
----	--	--	--	--

## All Other Legislation

<p><b>HB 8</b></p> <p><b>Telehealth Use of SANE Nurses</b></p> <p>LL</p>	<p>Relating to statute of limitations for certain sexual offenses &amp; the collection, analysis, &amp; preservation of evidence of sexual assault and other sex offenses</p>	<p><b>Representative Victoria Neave</b></p>	<p>None. Of interest to SANE nurses. Expands access to SANE nurses for underserved areas through establishment of statewide telehealth center.</p>	<p>9/1/2019</p>
<p><b>HB 16</b></p> <p><b>Rights of living unborn child after abortion</b></p> <p>JZ</p>	<p>Relating to the enforcement of the rights of a living unborn child after an abortion; providing a civil penalty; creating a criminal offense.</p> <p>A physician-patient relationship is established if a child is born alive after an abortion. The physician must provide care in the same manner that care would be rendered to any other child born alive at the same gestational age, including a requirement for transfer to a hospital. Provides a civil penalty for physicians who fail to provide this care. Persons who have knowledge of such failures are required to report to the attorney general. Failure to provide appropriate treatment to a child born alive after abortion is considered a third degree felony.</p>	<p><b>Representative Jeff Leach</b></p>	<p>Does not amend the Nursing Practice Act or have direct implications for the BON.</p> <p>Nurses who practice in settings where abortions are performed need to be aware of the changes to the law if a child is born alive after an attempted abortion procedure.</p>	<p>9/1/2019</p>
<p><b>HB 18</b></p> <p><b>School Mental Health</b></p>	<p>Relating to consideration of the mental health of public school students in training requirements for certain school employees, curriculum</p>	<p><b>Representative Four Price</b></p>	<p>Does not amend the Nursing Practice Act or have direct implications for the BON. Details mental health training requirements for school employees.</p>	<p>12/1/2019</p>

<b>Training Requirements</b> LL	requirements, counseling programs, educational programs.		Requires a school district to publish in the student handbook and post on the district's Internet website for each campus in the district, a statement of whether the campus has a full-time nurse or full-time school counselor.	
<b>HB 19</b> <b>School District Non-Physician Mental Health Professional</b> NB	Relating to mental health and substance use resources for certain school districts	<b>Representative Four Price</b>	Requires a local mental health authority to employ a non-physician mental health professional to serve as a mental health and substance use resource for school districts located in regions served by a regional education service center and in which the local mental health authority provided services. A "non-physician mental health professional" includes a registered nurse with an advanced degree in psychiatric nursing in its definition. Similar language in SB11. May be of interest to school/psych nurses.	9/1/2019
<b>HB 76</b> <b>Cardiac Assessments</b> LL	R/T cardiac assessments of high school participants in extracurricular athletic activities sponsored or sanctioned by the University Interscholastic League	<b>Representative Dan Huberty</b>	Does not amend NPA. May require school nurses to perform cardiac assessments.	9/1/2019
<b>HB 80</b> <b>Shortages in doctoral-level health professions</b> JH	Relating to a study and report regarding shortages in certain health professions.	<b>Representative Lina Ortega</b>	Conducts a study to identify statewide and regional shortages in health professions, with an emphasis on shortages in doctoral-level training in those health professions. Includes doctorates in nursing (PhD and DNP). May result in the establishment of new programs or expansion of existing programs to address increased need.	Results and recommendations to be presented to the Governor by December 1, 2023.  Expires January 1, 2024.
<b>HB 111</b>	Relating to training for employees of school districts	<b>Representative Mary Gonzalez</b>	No amendments to the NPA or direct implications for the BON.	5/31/2019

<p><b>Child Abuse Training for School Employees</b></p> <p>HF</p>	<p>and open-enrollment charter schools on the prevention of sexual abuse, sex trafficking, and other maltreatment of certain children</p> <p>HB 111 would require that existing child abuse training outlined by Section 38.004, Education Code, must also include information on students with significant cognitive disabilities. This will ensure better preparation for educators and greater awareness of abuse of students with significant cognitive disabilities.</p>			
<p><b>HB 170</b></p> <p><b>Coverage for mammography</b></p> <p>JZ</p>	<p>Relating to coverage for mammography under certain health benefit plans.</p> <p>Health benefit plans that provide coverage for screening mammograms must also provide coverage for diagnostic mammograms. This will also apply to Medicaid and Medicaid managed care.</p>	<p><b>Representative Diego Bernal</b></p>	<p>Does not amend the Nursing Practice Act or have direct implications for the BON.</p> <p>APRNs should be aware of these changes for their patients who need diagnostic mammograms. Nurses who practice in utilization review and those who work with the Texas Medicaid program need to be aware.</p>	<p>9/1/2019</p>
<p><b>HB 253</b></p> <p><b>Peer Assistance/ Postpartum Depression</b></p> <p>DB</p>	<p>Relating to a strategic plan to address postpartum depression</p> <p>This bill amends the Health and Safety Code by requiring the development and implementation of a strategic plan to improve access to postpartum screening, referral, treatment and support services.</p>	<p><b>Representative Jessica Farrar</b></p>	<p>No implications for the NPA or BON rules and regulations or for the BON.</p> <p>The alternative to discipline program (TPAPN) uses peer support partners (formerly advocates) to support nurse participants.</p>	<p>9/1/2019</p>

	The requirements in the bill for the strategic include access by women to formal and informal peer support services, inclusive of access to certified peer support specialists. The certified peer support specialists are to receive additional training related to postpartum depression.			
<b>HB 387</b>  <b>Reports under workers' compensation system.</b>  JZ	Relating to submission of reports by an advanced practice registered nurse under the workers' compensation system.  Physicians may delegate the completion of workers' compensation work status reports to APRNs.	<b>Representative Philip Cortez</b>	Does not amend the Nursing Practice Act or have direct implications for the BON.  APRNs who work with patients under workers' compensation will need to be aware of the changes	9/1/2019
<b>HB 476</b>  <b>Epinephrine Auto-Injectors</b>  LL	R/T policies on the use of epinephrine auto-injectors by public institutions of higher education	<b>Representative Howard Donna</b>	Does not amend NPA. May impact Texas Department of State Health Services to further develop policies on the use of epi-auto injectors	9/1/2019
<b>HB 496</b>  <b>Bleeding Control Kits</b>  LL	Relating to the placement of bleeding control kits in public schools & to required training of school personnel	<b>Representative Barbara Gervin-Hawkins</b>	Does not amend NPA. May impact Texas Department of State Health Services to assist in training in the use of bleeding control	6/15/19
<b>HB 531</b>  <b>Exam Record Retention: Sexual Assault Victims</b>	Relating to the retention by hospitals & physicians of medical records of a sexual assault victim.	<b>Representative Rick Miller</b>	Does not amend NPA. Prohibits medical records from forensic medical examinations of sexual assault victims from being destroyed until 20 years after the record was created.	9/1/2019

LL				
<b>HB 650</b> <b>Treatment of Incarcerated Women</b>  HF	<p>Relating to female inmates of the Texas Department of Criminal Justice</p> <p>HB 650 seeks to address concerns regarding the care of incarcerated women by setting out provisions regarding the treatment of incarcerated pregnant women, educational programming for pregnant inmates (related to pregnancy and parenting), and training related to pregnant inmates for correctional officers and other TDCJ employees.</p>	<b>Representative James White</b>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>May be of interest to nurses in the TDCJ system who provide care to pregnant inmates.</p>	9/1/2019
<b>HB 684</b> <b>School Nurse Seizure Training</b>  LL	<p>Relating to training requirements for public school nurses and certain other school personnel regarding seizure recognition and related first aid.</p>	<b>Representative Travis Clardy</b>	<p>Texas Education Agency to provide seizure training to school staff, including school nurses, who have regular contact with students. School nurses required to undergo more thorough online training to help students with seizures. No-cost online course for nurses to be approximately two hours.</p>	6/14/2019
<b>HB 871</b> <b>Level IV trauma facility designation</b>  EMc	<p>Bill Caption: Relating to use of telemedicine medical service by certain trauma facilities</p> <p>A health care facility located in a county with a population of less than 30,000 may satisfy a Level IV trauma</p>	<b>Representative Four Price</b>	<p>Does not amend NPA. Amends Health and Safety Code.</p> <p>HB 871 would allow a health care facility located in a county with a population of less than 30,000 to use telemedicine medical service to satisfy the requirements necessary to be designated as a level IV trauma facility.</p>	9/1/2019

	facility designation requirement relating to physicians through the use of telemedicine medical service.		The telemedicine medical service would be required to provide an on-call physician with special competence in the care of critically ill patients who would assess, diagnosis, consult, or treat patients, or transfer medical data to a physician, advanced practice registered nurse, or physician assistant physically located at the facility. A qualifying health care facility under the bill could use telemedicine medical service to satisfy a requirement for designation as a level IV trauma facility only on or after January 1, 2020.	
<b>HB 961</b>  <b>School Concussion Oversight Teams</b>  LL	Relating to membership and training course requirements of school district and open enrollment charter school concussion oversight teams.	<b>Representative Donna Howard</b>	Does not amend NPA. May impact Texas Department of State Health Services for assistance in training of school nurses in concussion oversight teams.	6/2/2019
<b>HB 1063</b>  <b>Providing telemedicine to certain pediatric patients through Medicaid</b>  EMc	Relating to telemedicine medical, telehealth, and home telemonitoring services under Medicaid.  The bill would require the Medicaid telemonitoring program to provide home telemonitoring services to pediatric patients who were diagnosed with end-stage solid organ disease, had received an organ transplant, or required mechanical ventilation.	<b>Representative Four Price</b>	Does not amend NPA, amends Government Code.  HB 1063 would repeal the expiration of the Medicaid telemonitoring reimbursement program and make certain changes to the program. The bill would require the Medicaid telemonitoring program to provide home telemonitoring services to pediatric patients who were diagnosed with end-stage solid organ disease, had received an organ transplant, or required mechanical ventilation.	9/1/2019
<b>HB 1256</b>	Relating to access by certain persons to a first responder's	<b>Representative Dade Phelan</b>	Does Not Amend NPA, amends Health & Safety Code.	9/1/2019

<p><b>Verification of first responder's immunization history</b></p> <p>EMc</p>	<p>immunization history during a disaster.</p> <p>Establishment of a process to provide an employer of a first responder with direct access to the first responder 's immunization information in the immunization registry for verification of the first responder 's immunization history.</p>		<p>HB 1256 would grant first responders direct access to the Department of State Health Services' immunization registry during a disaster for verification of a first responder's immunization history. During the preparation for or response to a disaster, as declared by the president of the United States, the governor of Texas, or the governor of another state, and with the first responder's electronic or written consent, the bill also would permit the first responder's employer or supervisor to access the registry under the process established by HHSC.</p>	
<p><b>HB 1325</b></p> <p><b>Hemp production and regulation</b></p> <p>KB</p>	<p>Relating to the production and regulation of hemp; requiring occupational licenses; authorizing fees; creating criminal offenses; providing civil and administrative penalties</p> <p>Amends Title 5, Agriculture Code to define hemp, establish legislative intent that the state has primary regulatory authority over hemp production in Texas. It also establishes a state plan to monitor and regulate hemp production to be submitted to the U.S. Department of Agriculture for approval. Hemp is defined as the plant Cannabis sativa L. and any part of that plant, including seeds and all derivatives and extracts</p>	<p><b>Representative Tracy O. King</b></p>	<p>Does not amend the NPA or require BON rulemaking. Nurses may be asked by patients about the legality of various products derived from hemp that may be marketed for health-related purposes.</p>	<p>6/10/2019</p>

	regardless of whether growing or not with a delta-9 tetrahydrocannabinol (THC) concentration of no more than 0.3%. The bill specifies that hemp is not a controlled substance or included in the definition of marijuana in Texas law. This applies to hemp-derived extracts such as CBD oil, provided the product contains no more than 0.3% THC. Authorization from the Texas Department of Agriculture is required for any person to cultivate, handle, or process hemp.			
<b>HB 1401</b>  <b>Nursing Education Grant Funds</b>  JH	Relating to the use of money from the permanent fund for health-related programs to provide grants to nursing education program.	<b>Representative Donna Howard</b>	Will provide ongoing nursing shortage grant funding for nursing education programs.	6/14/2019
<b>HB 1418</b>  <b>Immunization information to EMS personnel</b>  EMc	Relating to disease prevention and preparedness information for emergency medical services personnel on certification or recertification.  Requiring HHSC to provide immunization information to EMS personnel.	<b>Representative Dade Phelan</b>	Does Not Amend NPA, amends Health and Safety Code.  HB 1418 would require the Health and Human Services Commission (HHSC) to provide immunization information to applicants for certification or recertification as emergency medical services personnel.  The commission would be required to provide an applicant with written notice of the applicant's immunization history if that information was in the state's immunization registry. If the applicant's	5/27/2019

			information was not in the registry, HHSC would be required to provide the applicant with details about the registry as well as the specific risks to emergency medical services personnel when responding rapidly to an emergency of exposure to and infection by a potentially serious disease that could be prevented by an immunization.	
<b>HB 1501</b>  <b>Texas Behavioral Health Executive Council</b>  NB	Relating to the creation of the Texas Behavioral Health Executive Council and to the continuation and transfer of the regulation of psychologists, marriage and family therapists	<b>Representative Pancho Nevarez</b>	Consolidation of 4 boards (Texas State Board of Examiners of Marriage and Family Therapists, Texas State Board of Examiners of Professional Counselors, and Texas State Board of Social Worker Examiners with the Texas State Board of Examiners of Psychologists). Also adopts PSYPACT, which is a compact for psychologists and allows for telepsychology.	9/1/2019
<b>HB 1504</b>  <b>Texas Medical Board Sunset Bill</b>  JZ	Relating to the continuation and functions of the Texas Medical Board; authorizing a fee.  Extends the Texas Medical Board (TMB) through 2031. Provides for removal of disciplinary orders from the TMB website after five years unless the complaint was related to the delivery of health care or there was more than one remedial plan to resolve complaints of the same type. TMB must include the text of complaint within ten business days of the date the complaint is filed on the physician's	<b>Representative Chris Paddie</b>	Does not amend the Nursing Practice Act or have direct implications for the BON.  Some changes to the Medical Practice Act are consistent with those made during the BON's sunset review in 2017. It is notable that information regarding complaints against physicians must be posted on the TMB's website as well as orders of dismissal. It is also important to note the new requirement for disciplinary panels to consider if physicians were providing complementary or alternative medicine when considering standard of care cases.	9/1/2019

	<p>profile. After action is taken against a complaint, the TMB must post the final order and remove the formal complaint language within ten business days. If a complaint is dismissed or closed no action, it must be removed from the TMB website and a final order dismissing the complaint must be posted within ten business days. Creates an expedited licensure process for certain out of state applicants. Eases limitations for attempts to pass the medical licensure exam for physicians who have successfully practiced out of state. Allows TMB to create a risk-based assessment process for outpatient anesthesia sites. Requires TMB to keep records of physician outpatient anesthesia sites, and records of physicians who share equipment for outpatient anesthesia services. Requires informal conference panels convened to consider standard of care violations to consider whether a physician was providing complementary or alternative medicine services. Provides for judicial review of findings of fact and conclusions of law in proposals for decision. Requires better coordination between TMB and the Physicians Health Program.</p>			
--	--	--	--	--

	Requires criminal background checks for acupuncturists and surgical assistants. Creates an advisory board for radiologic technologists. Creates a requirement for issuance of a radiologist assistant certificate.			
<p><b>HB 1592</b></p> <p><b>Relating to health care professional liability coverage for certain public institutions of higher education.</b></p> <p><b>Student Nurse Liability Insurance</b></p> <p>VA</p>	<p>There are concerns that the authority of certain public university systems to operate self-insurance liability coverage does not extend to certain health care professionals, which may increase costs and result in the systems not being able to support their employees at critical times. H.B. 1592 seeks to address these concerns by making health care liability self-insurance more flexible for certain public university systems.</p> <p>The bill amends the Education Code to broaden the applicability of statutory provisions relating to medical professional liability coverage requirements for staff members or students of certain public institutions of higher education to include: staff members belonging to additional health care professions, including physician assistants, nurses, and pharmacists; full-time employees and appointees and part-time appointees and volunteers who devote their</p>	<p><b>Representative John Smithee</b></p>	<p>The bill has no implications for the NPA or Board Rules and Regulations. It will be helpful for nurses, nurse educators, and nursing students to be aware of this change.</p> <p>The bill amends Chapter 59 of the Education Code.</p>	<p>9/01/2019</p>

	professional service to providing health services or services to patients by assignment; and students of any health care profession that requires a state license, certification, or authorization.			
<b>HB 1651</b> <b>Restraint Use in Pregnant Inmates</b>  HF	<p>Relating to the care of pregnant women confined in county jail</p> <p>HB 1651 seeks to limit use of restraints on prisoners who are pregnant by requiring the Commission on Jail Standards (TCJS) to adopt rules and procedures regarding the use of any type of restraints to control or restrict the movement of a prisoner who is confirmed to be pregnant or who gave birth within the preceding 12 weeks; requires the rules and procedures prohibit the use of restraints on a prisoner for the duration of the pregnancy and for at least 12 weeks after giving birth, unless a health care professional responsible for the health and safety of the prisoner determines that the use of restraints is appropriate for the health and safety of the prisoner, the unborn child, or supervisory personnel; also requires jail staff to remove the restraints at the request of a health care professional</p>	<b>Representative Mary Gonzalez</b>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>May be of interest to APRNs whose practice includes pregnant inmates.</p>	9/1/2019

	responsible for the health and safety of the prisoner.			
<b>HB 2243</b>  <b>Prescription asthma inhalers in public and private schools</b>  KB	<p>Relating to the use of prescription asthma medicine on public and private school campuses.</p> <p>Authorizes a physician or a person with delegated prescriptive authority to prescribe a standing order for administration of asthma medication in the name of a public school district, open-enrollment charter school, or private school by allowing the school to carry the medication and school nurses to administer medication to students with written confirmation of the student's asthma diagnosis and permission to administer the medication from the student's parent or guardian.</p>	<b>Representative Tom Oliverson</b>	Does not amend the NPA or require BON rulemaking. Nurses who practice in school settings will need to be aware of this law and the application of it on their school campus/es.	5/24/2019
<b>HB 2255</b>  <b>Newborn and Infant Hearing Screenings</b>  HF	<p>Relating to the sharing of newborn and infant hearing screening results and the provision of information to parents following a screening</p> <p>HB 2255 seeks to better identify deaf and hard of hearing children in Texas, ensure follow-up screening is done for those newborns who do not pass initial hearing screening, and bring awareness to resources that</p>	<b>Representative Drew Darby</b>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>Amends the Health and Safety Code.</p>	9/1/2019

	are available to deaf and hard of hearing children in Texas.			
<p><b>HB 3284</b></p> <p><b>Controlled substance prescription</b></p> <p>JZ</p>	<p>Relating to the prescribing and dispensing of controlled substances under the Texas Controlled Substances Act; authorizing a fee; providing for administrative penalties; creating criminal offenses.</p> <p>The pharmacy board will now provide prescription monitoring program (PMP) inquiries for law enforcement purposes. Allows health care facilities operated by CMS as well as patients or their legal guardians to access the PMP. The patient or the patient's legal guardian may have access to his/her record as well as to a record of all parties who have accessed the record. Establishes a PMP advisory committee for the pharmacy board to receive input from users. An APRN or PA must be included on the committee. Establishes penalties for misuse of information by a person authorized to access the PMP—creates both administrative and criminal penalties. Delays implementation of the requirement to check the PMP before issuing prescriptions for opiates, benzodiazepines, barbiturates, or carisoprodol.</p>	<p><b>Representative J.D. Sheffield</b></p>	<p>Does not amend the Nursing Practice Act.</p> <p>Implementation of requirements to check the PMP prior to issuing prescriptions for opiates, benzodiazepines, barbiturates, or carisoprodol will need to be delayed until March 1, 2020 to comply with the bill. Nurses with access to the PMP need to be aware of the establishment of penalties for inappropriately accessing PMP records.</p>	<p>9/1/2019</p>

<p><b>HB 3345</b></p> <p><b>Telehealth service coverage by health plans</b></p> <p>EMc</p>	<p>Relating to health benefit coverage provided by certain health benefit plans for telemedicine medical services and telehealth services.</p> <p>Requiring health plans to treat telehealth and in-person coverage equally</p>	<p><b>Representative Four Price</b></p>	<p>Does not amend NPA, amends Insurance Code.</p> <p>HB 3345 would require a health benefit plan to provide coverage for telemedicine or telehealth services on the same basis that the plan provided coverage for an in-person service or procedure.</p> <p>A health plan could not:</p> <ul style="list-style-type: none"> <li>• limit, deny, or reduce coverage for a covered telemedicine or telehealth service based on the health professional's preferred technological platform, as defined in the bill, for delivering the service or procedure; or</li> <li>• impose an annual or lifetime maximum on telemedicine or telehealth coverage other than the annual or lifetime maximum that applied to all items covered under the plan.</li> </ul> <p>Would apply to a health benefit plan issued on or after January 1, 2020</p>	<p>9/1/19</p>
<p><b>HB 3703</b></p> <p><b>Prescribing of low-THC Cannabis for medical use</b></p> <p>KB</p>	<p>Relating to the prescription of low-THC cannabis for medical use by certain qualified physicians to patients with certain medical conditions</p> <p>Amends the 2015 Texas Compassionate-Use Act to: expand medical conditions for which certain prescribers may prescribe low-THC cannabis to include epilepsy, seizure disorder, multiple sclerosis,</p>	<p><b>Representative Stephanie Klick</b></p>	<p>Does not amend the NPA or require BON rulemaking. Nurses may provide care to patients who are prescribed low-THC cannabis per the Compassionate-Use Act and should know which diagnoses for which it may be prescribed.</p>	<p>6/14/2019</p>

	<p>spasticity, amyotrophic lateral sclerosis, autism, terminal cancer, or an incurable neurodegenerative disease; amend qualifications of prescribers; authorize HHSC to establish a low-THC cannabis research program; and redefines low-THC cannabis as the plant Cannabis sativa L., and any part of the plant or any compound, manufacture, salt, derivative, mixture, preparation, resin, or oil of that plant that contains not more than 0.5% by weight of THC. It also prohibits publication of a physician registered with the compassionate-use registry without express permission by the physician.</p>			
<p><b>HB 4455</b></p> <p><b>Mental health services through telehealth and telemedicine</b></p> <p>EMc</p>	<p>Relating to the provision of mental health services through a telemedicine medical service or telehealth service.</p> <p>Authorizes a health professional, notwithstanding any other law, to provide a mental health service that is within the scope of the professional's license, certification, or authorization through the use of a telemedicine medical service or a telehealth service to a patient who is located outside of this state, subject to any applicable</p>	<p>Representative Rick Miller</p>	<p>Does not amend NPA, Amends TOC adding Chapter 113.</p> <p>Even though nurses have the eNLC, this bill allows for continuity of care of patients in need of mental health services through telehealth and telemedicine by providers with whom nurses work in the interdisciplinary team.</p>	<p>9/1/2019</p>

	regulation of the jurisdiction in which the patient is located.			
<b>SB 11</b> <b>School District Non-Physician Mental Health Professional</b>  NB	Relating to improving school safety and promoting mental health in schools	<b>Senator Larry Taylor</b>	A local mental health authority would be required to employ and supervise a non-physician mental health professional to serve as a mental health and substance use resource for school districts served by a regional education service center (ESC) and in which the local mental health authority provided services. May be of interest to school/psych nurses.	6/6/2019
<b>SB 22</b> <b>Transactions between governmental entity and abortion providers</b>  JZ	Relating to prohibiting certain transactions between a governmental entity and an abortion provider or affiliate of the provider.  Governmental entities may not enter into taxpayer resource transactions with abortion providers or affiliates of abortion providers unless the provider or affiliate meets the specified exemptions.	<b>Senator Donna Campbell</b>	Does not amend the Nursing Practice Act or have direct implications for the BON.  Nurses who practice in relevant settings need to be aware.	9/1/2019
<b>SB 285</b>  Hurricane Preparedness  MM	Relating to information and outreach regarding hurricane preparedness and mitigation.	<b>Senator Borris Miles</b>	Governor to issue a proclamation each year prior to hurricane season instructing state agencies to review and update their hurricane preparedness plans. The governor shall publish on the governor's website a report on the preparedness of state agencies for hurricane response. The report must include a list of agencies involved in hurricane response and contact information for each state agency's employee who manages emergency response. The bill authorizes the governor, by executive order, to take	9/1/2019

			any action necessary to ensure that each applicable state agency is able to respond to a hurricane.	
<b>SB 436</b>  <b>Health Initiatives: Maternal Opioid Use Disorder</b>  HF	<p>Relating to statewide initiatives to improve maternal and newborn health for women with opioid use disorder.</p> <p>SB 436 requires DSHS to collaborate with Maternal Mortality and Morbidity Task Force to develop and implement initiatives to improve screening procedures for women with opioid use disorder during pregnancy and postpartum period; improve continuity of care; optimize health care provided to pregnant women with opioid use disorder and newborns with neonatal abstinence syndrome; increase access to medication-assisted treatment of opioid use disorder; and prevent opioid use disorder by reducing number of opioids prescribed. Also, the Act authorizes DSHS to conduct a limited pilot program.</p>	<b>Senator Jane Nelson</b>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>Amends the Health and Safety Code.</p>	6/7/2019
<b>SB 494</b>  <b>Meetings in the Event of Emergency</b>  BH	<p>Relating to certain procedures applicable to meetings under the open meetings law and the disclosure of public information under the public information law in the event of an emergency, urgent public necessity, or catastrophic event.</p>	<b>Senator Joan Huffman</b>	<p>SB 494 shortens from at least two hours, to at least one hour, for the posting time for notice under the open meetings law of an emergency meeting or emergency addition to a lawfully posted meeting agenda in an emergency or when there is an urgent public necessity. A governmental body may only consider matters related to</p>	9/1/2019

			<p>the emergency or, in the case of a supplemental notice, an item on the original notice that met the non-emergency posting requirements.</p> <p>SB 494 adds a list of examples of reasonably unforeseeable situations that are considered emergencies including:</p> <ul style="list-style-type: none"> <li>• fire, flood, earthquake, hurricane, tornado, or wind, rain, or snow storm;</li> <li>• power failure, transportation failure, or interruption of communication facilities;</li> <li>• epidemic; or</li> <li>• riot, civil disturbance, enemy attack, or other actual or threatened act of lawlessness or violence.</li> </ul> <p>SB 494 provides for the temporary suspension of open records deadlines if a governmental body is impacted by a catastrophe as defined by Section 552.233, Government Code.</p>	
<p><b>SB 670</b></p> <p><b>Medicaid telemedicine and telehealth services</b></p> <p>VA</p>	<p>Relating to Medicaid telemedicine and telehealth services. The bill is designed to ensure a managed care organization that contracts with the commission under Chapter 533 to provide health care services to Medicaid recipients does not deny reimbursement for a covered health care service or procedure delivered by a health care provider with whom the managed care organization contracts if the service or procedure is not provided through an in-person consultation.</p>	<p><b>Senator Dawn Buckingham</b></p>	<p>The bill has no implications for the NPA or Board Rules and Regulations.</p> <p>The bill amends Section 531.0216, Government Code.</p>	<p>9/01/2019</p>

	The bill seeks to make changes to ensure that patients and providers have access to a full array of choices when using telemedicine and telehealth services.			
<b>SB 683</b>  <b>Pharmacy licensure and regulation</b>  JZ	<p>Relating to the licensing and regulation of pharmacists and pharmacies.</p> <p>Allows physicians to access the prescription monitoring program to review prescribing information to APRNs and PAs to whom they have delegated prescriptive authority. Requires wholesale distributors to report controlled substances dispensed. Allows for revocation of pharmacy license for pharmacies that fail to operate for a period of 30 days.</p>	<b>Senator Dawn Buckingham</b>	<p>Does not amend the Nursing Practice Act or have direct implications for the BON.</p> <p>APRNs need to be aware that physicians may now access their prescribing history for controlled substance prescriptions.</p>	9/1/2019
<b>SB 747</b>  <b>Posting Cost of Newborn Screening Kits on the DSHS Website</b>  HF	<p>Relating to required notice of the cost and health benefit plan coverage of newborn screening tests</p> <p>SB 747 directs DSHS to post publicly on the DSHS website the costs of newborn screening kits. DSHS is also required to provide a 90-day notice before changing the cost of the kits. The bill also prohibits a health benefit plan that provides maternity benefits or accident</p>	<b>Senator Lois Kolkhorst</b>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>Amends the Health and Safety Code.</p>	9/1/2019

	and health coverage for additional newborn children from being issued in this state if the plan excludes or limits certain coverage including coverage for administration of the newborn screening tests required by Section 33.011, Health and Safety Code, including for the cost of a newborn screening test kit in the amount provided by DSHS on its website.			
<b>SB 748</b>  <b>Newborn Screening Dedicated Account</b>  HF	Relating to newborn screening and the newborn screening preservation account  Newborn screenings are the highest volume area of the DSHS public health laboratory (the lab tests 400,000 infants/year for 53 conditions) and there is a gap in funding to maintain current lab testing or expand to the 61 federally recommended screenings. SB 748 creates a dedicated account for newborn screenings to establish a consistent and long-term funding stream to repair, upgrade, and expand screenings conducted by the lab.	<b>Senator Lois Kolkhorst</b>	No amendments to the NPA or direct implications for the BON.  Amends the Health and Safety Code.	9/1/2019
<b>SB 749</b>  <b>Level of Care Designations Process</b>	Relating to level of care designations for hospitals that provide neonatal and maternal care	<b>Senator Lois Kolkhorst</b>	No amendments to the NPA or direct implications for the BON.  Amends the Health and Safety Code.	6/10/2019

<p><b>related to Neonatal and Maternal Care</b></p> <p>HF</p>	<p>SB 749 seeks to improve the current level of designations process. The bill requires DSHS to establish a process for a hospital to appeal its level of designation to an independent third party, and clarifies the role of telemedicine and practitioners' scope of practice. The bill also provides a waiver process from certain designation rules to address variability in hospital volume and capability, requires a strategic review of the designation rules, and aligns the PAC sunset date with the sunset date for DSHS.</p>			
<p><b>SB 750</b></p> <p><b>Efforts to Address Maternal Mortality</b></p> <p>HF</p>	<p>Relating to maternal and newborn health care and the quality of services provided to women in this state under certain health care programs</p> <p>SB 750 builds upon the successes of SB 17 (85<sup>th</sup> legislature) by seeking to maximize Texas' efforts to address maternal mortality as detailed by the Health and Human Services Commission's report, State Efforts to Address Maternal Mortality and Morbidity in Texas; address the findings and recommendations of the Maternal Mortality and Morbidity Task Force; and update Texas law to align with new federal legislation on</p>	<p><b>Senator Lois Kolkhorst</b></p>	<p>No amendments to the NPA or direct implications for the BON.</p> <p>Amends the Health and Safety Code.</p>	<p>6/10/2019</p>

	maternal mortality review committees.			
<p><b>SB 752</b></p> <p><b>Relating to liability of volunteer health care providers and health care institutions for care, assistance, or advice provided in relation to a disaster.</b></p> <p>VA</p>	<p>The bill states that the volunteer health care provider includes an individual who is not affiliated with a charitable organization. Except in the case of reckless conduct or intentional, willful, or wanton misconduct, a volunteer health care provider is immune from civil liability for an act or omission that occurs in giving care, assistance, or advice if the care, assistance, or advice is provided in relation to an incident that is a man-made or natural disaster and within the scope of the provider's practice under the laws of the state. Further, a health care institution is immune from civil liability for an act or omission by a volunteer health care provider at the institution's facility or under the institution's direction if the provider is immune from civil liability and the institution does not have an expectation of compensation from or on behalf of the recipient of the care. The immunity provided by this section is in addition to any other immunity or limitations of liability provided by law.</p>	<p><b>Senator Joan Huffman</b></p>	<p>The bill has no implications for the NPA or Board Rules and Regulations. It will be helpful for nurses to be aware of this change in statute.</p> <p>The bill amends Chapter 79, Civil Practice and Remedies Code, Section 79.0031.</p>	<p>9/01/2019</p>
<p><b>SB 999</b></p>	<p>Due to calls for an updated state plan on Alzheimer's disease, this bill seeks to</p>	<p><b>Senator Donna Campbell</b></p>	<p>The bill has no implications for the NPA or Board Rules and Regulations. It will</p>	<p>9/01/2019</p>

<p><b>Relating to a state plan for education on and treatment of Alzheimer's disease and related disorders.</b></p> <p><b>HHSC/Managed Care</b></p> <p>VA</p>	<p>address the issue by requiring the Department of State Health Services (DSHS) to develop and implement a state plan for education on and treatment of Alzheimer's disease and related disorders.</p> <p>The bill requires the plan to include strategies for: improving early detection of, reducing disease onset risks for, and improving treatment of Alzheimer's disease and related disorders for specific demographic groups; educating health care professionals, caregivers, and the public to increase awareness of Alzheimer's disease and related disorders; providing caregiver support; advancing basic science and applied research related to Alzheimer's disease and related disorders; and collecting and evaluating information on efforts to prevent and treat Alzheimer's disease and related disorders.</p>		<p>be helpful for nurses to be aware of this state plan.</p> <p>The bill requires DSHS to develop the strategies for improving early detection, reducing disease onset risks, and improving treatment in consultation with physicians and other health care providers licensed in Texas who have clinical training and experience in caring for persons with Alzheimer's disease or related disorders.</p> <p>Further, the bill requires DSHS, in developing the plan, to seek comments from interested parties and requires DSHS to meet with interested parties at least two times each year to facilitate comments on and discuss the progress of developing and implementing the plan and to gather information for the report required under the bill's provisions.</p> <p>Nurses could be valuable contributors in the development and implementation of the plan.</p> <p>The bill amends the Health and Safety Code.</p>	
<p><b>SB 1217</b></p> <p><b>Legal</b></p> <p>JWJ/JA</p>	<p>Relating to the consideration of certain arrests in determining an applicant's eligibility for an occupational license.</p> <p>For purposes of determining a person's fitness to perform the</p>	<p><b>Senator Carol Alvarado</b></p>	<p>Amends Occupations Code Chapter 53.</p> <p>For disciplinary purposes, the Board may not consider an individual's <i>arrest</i> that did not result in a conviction or deferred adjudication.</p>	<p>6/14/2019</p>

	duties and discharge the responsibilities of the licensed occupation, a licensing authority may not consider an arrest that did not result in the person's conviction or placement on deferred adjudication community supervision.			
<b>SB 1264</b>  Relating to consumer protections against billing and limitations on information reported by consumer reporting agencies.  VA	Due to concerns that consumers who receive surprise medical bills face unnecessary hurdles in addressing those bills under the existing mediation system, this bill was designed to address these concerns by making certain changes to the current mediation process, establishing an arbitration process, expanding the types of plans that are eligible for mediation, and prohibiting providers from sending surprise balance bills to consumers.	<b>Senator Kelly Hancock</b>	The bill has no implications for the NPA or Board Rules and Regulations. It will be helpful for nurses to be aware of this change, especially nurses who are employed in the insurance industry.  The bill amends the Insurance Code.	9/01/2019
<b>SB 1370</b>  Legal  JWJ/JA	Relating to invoices and payments under certain state contracts for outside legal services.  This bill only applies to services provided to a state agency by outside counsel (attorneys who are not employed by the agency or by the Attorney General's Office). In order to hire outside counsel,	Senator Robert Nichols	Amends Government Code §402.0212 and §2251.021	9/1/2019

	<p>permission must be given by the Attorney General's Office.</p> <p>A bill for outside counsel services must be submitted to the Attorney General's Office within 25 days of receipt to determine if the services provided are within the scope of the outside counsel contract and are reasonably necessary. A written certification must be provided by the agency's office of general counsel attesting that the charges are within the scope of the contract and are reasonably necessary.</p> <p>If a bill is challenged by an agency or the Attorney General's Office, a revised bill may be re-submitted for payment.</p> <p>A payment owed by an agency is overdue on the 46<sup>th</sup> day after the agency received the invoice.</p>			
<p><b>SB 1404</b></p> <p><b>Electronic consent for newborn and infant screening tests</b></p> <p>EMc</p>	<p>Relating to consent to the disclosure of certain information and to other matters relating to newborn and infant screening tests.</p> <p>Allowing electronic consent for newborn and infant screening tests</p>	<p><b>Senator Beverly Powell</b></p>	<p>Does not amend NPA, amends Health and Safety Code.</p> <p>Permits the parent, managing conservator, or guardian of a newborn child to provide consent to and share information from screenings for certain heritable diseases and hearing loss through electronic means, including through audio or video recording. DSHS would have to determine the</p>	<p>9/1/2019</p>

			<p>manner of storing electronic consent records and ensure the newborn's attending physician had access to those records.</p> <p>Birth facilities or other persons required to obtain consent would not be required to use the electronic process.</p> <p>DSHS could provide disclosure statements in various formats and languages to ensure clear communication of information on screening tests.</p>	
<p><b>SB 1564</b></p> <p><b>Medication-assisted treatment for opioid or substance use disorder</b></p> <p>KB</p>	<p>Relating to access to certain medication-assisted treatment</p> <p>Aligns state Medicaid policy with federal law by requiring the Texas Health and Human Services Commission (HHSC) to amend policy to authorize Medicaid reimbursement for prescribing of buprenorphine for the treatment of opioid use disorder by an APRN who has obtained a federal waiver from registration requirements for dispensing narcotic drugs.</p>	<p><b>Senator Royce West</b></p>	<p>Does not amend the NPA or require BON rulemaking. APRNs who obtain federal waivers to prescribe buprenorphine and treat patients with opioid use disorder need to know these updates.</p>	<p>6/10/2019</p>
<p><b>SB 1640</b></p> <p>Open Meetings</p> <p>JWJ/JA</p>	<p>Relating to changing the criminal offense of conspiracy to circumvent the open meetings law.</p> <p>Makes it a violation of the Open Meetings Act if a member of a governmental body:</p>	<p><b>Senator Kirk Watson</b></p>	<p>Amends Government Code Chapter 551</p>	<p>6/10/2019</p>

	<p>1. knowingly engages in at least one communication, in a series of communications, that occurs outside of a public meeting;</p> <p>2. the communication concerns an issue within the jurisdiction of the governmental body;</p> <p>3. the total number of the members engaging in the series of communications constitutes a quorum of the governmental body, even if a single member only engaged in a single communication;</p> <p>4. the member knew at the time he/she engaged in the communication that the series of communications involved or would involve a quorum and would constitute a deliberation.</p> <p>Deliberation includes a written or verbal exchange between a quorum of a governmental body or an individual and a quorum of a governmental body about an issue within the body's jurisdiction or any public business.</p> <p>An offense under this section is still a misdemeanor punishable by a fine of \$100-\$500; confinement in county jail for 1 month-6 months; or both.</p>			
<b>SB 1995</b>		<b>Senator Brian Birdwell</b>	Amends Occupations Code Chapter 57	9/1/2019

<p>NC Antitrust, Rule Review</p> <p>JWJ/JA</p>	<p>Relating to the review of certain occupational licensing rules by the Office of the Governor.</p> <p>Creates a new division within the Governor's Office to review agency rules, primarily for anti-competitive effect. The division will have a director who serves a 2-year term.</p> <p>All agencies must submit all rules <i>that affect market competition</i> to the division for review prior to adoption of the rule.</p> <p>A rule affects market competition if it would create a barrier to market participation in Texas or results in higher prices or reduced competition for a product or service provided by, or to, a license holder in Texas.</p> <p>The division has 90 days to complete its review and may request information from the agency, require the agency to conduct an analysis of possible implications of the rule, solicit public comments, or hold public hearings.</p> <p>After its review, the division must approve or reject the rule and return it to the agency with</p>			
--	---	--	--	--

	<p>instructions for revision consistent with state policy.</p> <p>The division may also initiate a review of a proposed rule that was not submitted to it for review if it has reason to believe that the proposed rule may have an <i>anti-competitive market effect</i>.</p> <p>When conducting a review of a proposed rule or deciding whether to initiate a review, the division may only consider evidence or communications that are submitted to the division in writing from an identified person or entity and made available to the public, submitted in a public hearing, or generally known to the public.</p> <p>An agency may not adopt a rule that could affect market competition until it has been approved through this new review process.</p>			
<p><b>SB 2132</b></p> <p><b>Healthy Texas Women Program</b></p> <p>HF</p>	<p>Relating to the provision of information to certain women enrolled in the Healthy Texas Women program</p> <p>SB 2132 seeks to increase access to and use of the Healthy Texas Women program. In its September</p>	<p><b>Senator Beverly Powell</b></p>	<p>No amendments to the NPA or direct implications for the BON.</p>	<p>5/20/2019</p>

	<p>2018 report, the Maternal Mortality and Morbidity Task Force recommended increased access to healthcare for the year after a pregnancy. SB 2132 will help increase access to care for women who are enrolled in the Healthy Texas Women program after their Medicaid for Pregnant Women coverage expires.</p> <p>The bill directs the Health and Human Services Commission to alert eligible women of their enrollment into Healthy Texas Women and the services provided through the program, and to provide information on local health care providers that participate in Healthy Texas Women.</p>			
--	--	--	--	--