By: Price, et al. (Senate Sponsor - Nelson) H.B. No. 1697 (In the Senate - Received from the House April 10, 2017; April 19, 2017, read first time and referred to Committee on Health 1-1 1-2 1-3 & Human Services; May 5, 2017, reported adversely, with favorable Committee Substitute by the following vote: Yeas 9, Nays 0; 1-4 1-5 1-6 May 5, 2017, sent to printer.)

COMMITTEE VOTE 1-7

1-8		Yea	Nay	Absent	PNV
1-9	Schwertner	Χ			
1-10	Uresti	Х			
1-11	Buckingham	Χ			
1-12	Burton	Х			
1-13	Kolkhorst	Х			
1-14	Miles	X			
1-15	Perry	Х			
1-16	Taylor of Collin	Χ			
1-17	Watson	Х			

COMMITTEE SUBSTITUTE FOR H.B. No. 1697 By: Taylor of Collin 1-18

1-19 A BILL TO BE ENTITLED 1-20 AN ACT

1-21 establishment pediatric relating to the of а health tele-connectivity resource program for rural Texas.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subtitle I, Title 4, Government Code, is amended by adding Chapter 541 to read as follows:

CHAPTER 541. PEDIATRIC TELE-CONNECTIVITY RESOURCE PROGRAM FOR RURAL TEXAS

DEFINITIONS. In this chapter: 541.001.

(1) "Nonurban health care facility" means a hospital der Chapter 241, Health and Safety Code, or other licensed under licensed health care facility in this state that is located in a rural area as defined by Section 845.002, Insurance Code.

(2) "Pediatric specialist" means a physician who is

certified in general pediatrics by the American Board of Pediatrics

- or American Osteopathic Board of Pediatrics.

 (3) "Pediatric subspecialist" means a physician who is certified in a pediatric subspecialty by a member board of the American Board of Medical Specialties or American Osteopathic Board of Pediatrics.
- (4) "Pediatric tele-specialty provider" means a pediatric health care facility in this state that offers continuous access to telemedicine medical services provided by pediatric subspecialists.

(5) "Physician" means a person licensed to practice medicine in this state.

(6) "Program" means the pediatric tele-connectivity resource program for rural Texas established under this chapter.

(7) "Telemedicine medical services" means health care services delivered to a patient:

(A) by a physician acting within the scope of the physician's license or a health professional acting under the delegation and supervision of a physician and within the scope of the health professional's license;

(B) from a physical location that is different

from the patient's location; and

(C) using telecommunications or information

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technology.

Sec. 541.002. 1-58 PEDIATRIC TELE-CONNECTIVITY RESOURCE PROGRAM FOR RURAL TEXAS. The commission with any necessary assistance of 1-59 pediatric tele-specialty providers shall establish a pediatric 1-60

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C.S.H.B. No. 1697
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tele-connectivity resource program for rural Texas to award grants to nonurban health care facilities to connect the facilities with pediatric specialists and pediatric subspecialists who provide telemedicine medical services.

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Sec. 541.003. USE OF GRANT. A nonurban health care facility awarded a grant under this chapter may use grant money to:

(1) purchase equipment necessary for implementing a

telemedicine medical service;

(2) modernize the facility's information technology infrastructure and secure information technology support to ensure an uninterrupted two-way video signal that is compliant with the Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191);

(3) pay a service fee to a pediatric tele-specialty

provider under an annual contract with the provider; or

(4) pay for other activities, services, supplies, facilities, resources, and equipment the commission determines necessary for the facility to use a telemedicine medical service.

Sec. 541.004. SELECTION OF GRANT RECIPIENTS. (a) The commission with any necessary assistance of pediatric tele-specialty providers may select an eligible nonurban health care facility to receive a grant under this chapter.

(b) To be eligible for a grant under this chapter, nonurban health care facility must have:

(1) a quality assurance program that measures the of the facility's health care providers with the compliance facility's medical protocols;

(2) on staff at least one full-time equivalent physician who has training and experience in pediatrics and one person who is responsible for ongoing nursery and neonatal support and care;

a designated neonatal intensive care unit or an (3) emergency department;

(4) a commitment to obtaining neonatal or pediatric education from a tertiary facility to expand the facility's depth and breadth of telemedicine medical service capabilities; and

(5) the capability of maintaining records and producing reports that measure the effectiveness of a grant received by the facility under this chapter.

Sec. 541.005. GIFTS, GRANTS, AND DONATIONS. (a) The commission may solicit and accept gifts, grants, and donations from any public or private source for the purposes of this chapter.

(b) A political subdivision that participates in

program may pay part of the costs of the program.

Sec. 541.006. WORK GROUP. (a) The commission may establish a program work group to:

(1) assist developing, the commission with

grants awarded under this chapter.

(b) A member of a program work group established under this section is not entitled to compensation for serving on the program work group and may not be reimbursed for travel or other expenses incurred while conducting the business of the program work group.

(c) A program work group established under this section is not subject to Chapter 2110.

Sec. 541.007. REPORT TO GOVERNOR AND LEGISLATURE. later than December 1 of each even-numbered year, the commission shall submit a report to the governor and members of the legislature regarding the activities of the program and grant recipients, including the results and outcomes of grants awarded under this chapter.

Sec. 541.008. RULES. The executive commissioner may adopt rules necessary to implement this chapter.

Sec. 541.009. SPECIFIC APPROPRIATION REQUIRED. The commission may not spend state funds to accomplish the purposes of this chapter and is not required to award a grant under this chapter unless money is appropriated for the purposes of this chapter.

SECTION 2. Not later than December 1, 2017, the Health and

C.S.H.B. No. 1697 Human Services Commission shall establish and implement the pediatric tele-connectivity resource program for rural Texas

authorized by Chapter 541, Government Code, as added by this Act.

SECTION 3. Not later than December 1, 2018, the Health and
Human Services Commission shall provide the initial report to the
governor and the legislature as required by Section 541.007, Government Code, as added by this Act.

SECTION 4. If before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 5. This Act takes effect September 1, 2017.

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