



Texas HIMSS Advocacy Newsletter - June 2021

Health IT policy is complex. To make a real impact on public policy, health advocacy is vital and requires strong, respected and coordinated voices.

HIMSS Chapter advocates connect with and educate policymakers at state, provincial and local levels, amplify public policy priorities, research the issues, build coalitions and monitor legislation—all with the goal of influencing public policy. When successful, health advocacy has the power to:

- Guide health IT policy roadmaps
- Enact legislation
- Secure funding for strategic public policy support
- Share stories, data, information and public policy positions

A newsletter to update you on Texas Health Advocacy.

Your Texas HIMSS Advocacy Committee

Texas Advocacy Team



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Texas Virtual Health Advocacy Day Summary

- The 2021 session of the Texas Legislature commenced Tuesday January 12th and ended May 31st. Governor Abbott did follow through with his promise to veto funding for the legislature and its staff and support agencies in order to force a

special session on his unfinished priorities. He has announced July 8th as a start date and the session could take up to 30 days. There has been a lawsuit filed at the Texas Supreme Court, on behalf of the Democrats as well as some of their staff, which asks the court to weigh in on the legitimacy of the veto and alleges a constitutional violation of separation of powers.

In Texas, the Governor has complete control over what's called "the call" that makes up the agenda for the special session. So far Governor Abbott has stated that election reform and bail reform are the two pieces of unfinished business that he would like to see addressed,

- Virtual Health Advocacy Day was held February 2nd from 9:30 am to 1:30 pm CST.

Virtual Health Information Technology (HIT) Day

Our focus for this year was Telehealth and we had a successful panel of leading experts from across the state.



Telehealth Texas -
Nora Belcher,
Executive Director at
Texas e-Health
Alliance



Reimbursement –
Steve Love, President
and CEO at DFW
Hospital Council



Rural Health – Mark
Steiger, Senior
Director of Operations
for Ascension Connect



Telehealth National –
Mei Kwong, Executive
Director at Center for
Connected Health
Policy

Virtual Health Information Technology (HIT) Day Zoom Registration Links

Texas Telehealth Policy (9:30-10:15am): Nora Blecher

Results

194 attendees and 19 representing Texas Legislative

16 attendees wanted to learn more of the following:

Telehealth Reimbursement Overview (10:30-11:15am): Steve Love

158 attendees and 10 representing Texas Legislative

Telehealth in Rural Areas Overview (11:30-12:15am): Mark Steiger

135 attendees and 6 representing Texas Legislative

National Telehealth Policy Overview (12:30-1:15pm): Mei Kwong

170 attendees and 10 representing Texas Legislative

Overall

4 Legislative Representation at all 4 sessions, 4 Legislative Representation attended 3 sessions and 2 Legislative attended 2 sessions.

Overall Survey Results

- 6 I am interested in a HIMSS Membership
- 3 I want to establish a local HIMSS Contact
- 20 To learn more about HIMSS/HIMSS Advocacy
- 16 National Telehealth Policy
- 16 Telehealth in Rural Areas
- 25 Telehealth Reimbursement
- 25 Texas Telehealth Policy

Texas Legislature Sessions 2021 Results

The Texas Legislature meets in the regular session on the second Tuesday in January of each odd-numbered year. The Texas Constitution limits the regular session to 140 calendar days.

Each time the legislature meets local government entities pause and follow the thousands of bills introduced in each session because many of them can have a direct impact on budgets for the next two years through what are known as “unfunded mandates.”

The following is the status of health-related bills that were reviewed in the Texas Legislative Session 2021.

Legislation

We are now past the 20-day veto period, where the Governor makes decisions about signing or vetoing bills. Governor Abbott also completed the veto process, vetoing a total of 20 bills. The only one vetoed relevant to Healthcare is HB 2667, which would have, among other things, added Voice Over IP services to our state's Universal Service Fund program. The Governor was concerned that it would result in new fees on millions of Texans. The Governor also allowed 105 bills to be filed without his signature. In looking at the list, it looks like about 40 of them raised fees and/or taxes locally, which is most likely why he's allowing them to become law despite any objections he may have. The one bill from our list that he didn't sign was SB 1827 which sets up the opioid settlement fund and outlines some of the allowed uses for the settlement.

HB 2 and SB 1 The House and the Senate both approved SB 1 and HB 2 (supplemental appropriations bill). **SB 1** has several references to telemedicine and telehealth, including a directive for HHSC to encourage the use of telemedicine, telehealth, or telephone services as part of their cost containment efforts. **HB 2** funds several one-time IT items that we care about, including the MMIS procurement at HHSC.

HB 4 Expanding Telemedicine and Telehealth: Ensures that enrollees in Medicaid, CHIP and other specified public benefits programs have the option to receive certain services through telemedicine or telehealth including preventive health and wellness; case management, including targeted case management; certain behavioral health services; occupational, physical and speech therapy; nutritional counseling; and assessments, including nursing assessments under certain Section 1915(c) home and community-based services waiver programs. The bill also requires that HHSC develop and implement a system to ensure behavioral health services can be provided using audio-only technology to enrollees in Medicaid, CHIP and other specified public benefits programs. The bill also allows HHSC to determine whether to use audio-only technology through nonbehavioral health services if the executive commissioner determined that using that technology would be cost-effective and clinically effective.

HB 5 Broadband Improvements: Creates the Broadband Development Office (BDO) within the Comptroller's Office. The bill would require the Broadband Development Office to prepare, update and publish on the comptroller's website a state broadband plan that established long-term goals for greater access to, adoption and affordability of broadband service in the state. The Office will award grants, low-interest loans and other financial incentives to applicants for the purpose of expanding access to and adoption of broadband service in eligible areas.

HB 18 Insulin access and price cap would give those without insurance a discounted rate under a new drug savings program.

HB 133 Extension of Medicaid post-delivery: Extends Medicaid for six months post-delivery or involuntary miscarriage (current law is 2 months) for women who previously enrolled in Pregnant Women's Medicaid. This is for citizens who are under 200% of poverty and delivered or had an involuntary miscarriage. The bill also transitions the Healthy Texas Women's Program into managed care. The state will need to apply for an 1115 waiver to cover this extension of Medicaid.

HB 290/HB 2658 Continuous Eligibility for Children in Medicaid: Changes the continuous eligibility period for children in the Texas Medicaid program from one to two consecutive periods of continuous eligibility between each certification and recertification of the child's eligibility for the program, provided certain income requirements were met. This bill ensures continuity of care for Texas children enrolled in Medicaid.

HB 1616 Interstate Compact for Medical Licensure. Big congratulations to Dr. Bonnen and Sen. Huffman, and their staff, for all the work on the bill, and to the team at MD Anderson for taking the lead on strategy. Governor Abbott has signed HB 1616, officially making Texas a part of the Interstate Compact for Medical Licensure.

HB 2211 Visitation at Hospitals: Prohibits a hospital from restricting in-person visitation during a qualifying period of disaster unless federal law or a federal agency required the hospital to prohibit in-person visitation during that period. Allows hospitals to restrict the number of visitors and require screenings for infection control.

HB 4272 the ImmTrac fix bill, did not pass and is out of conference before the deadline to finalize conference committee reports. That's really unfortunate given the challenges with EHR integration with ImmTrac.

SB 827 Insulin access and price cap to combat insulin's rising costs, lawmakers passed legislation that would cap prices for the prescription drug that is used by people who live with diabetes.

SB 827 would cap the cost for prescription insulin for insured Texans at \$25. HB 18 would give those without insurance a discounted rate under a new drug savings program. Both were approved, went to the governor's desk for a signature.

In some cases, even insured Texans found themselves having to pay hundreds of dollars out-of-pocket to purchase insulin, which they need to survive.

SB 475 Cybersecurity: Implements recommendations by the Texas Cybersecurity Council and the Texas Privacy Protection Advisory Council to improve cybersecurity standards and improve data management practices for state agencies and local

governments. Provisions include establishing a volunteer cybersecurity incidence response team; establishing a regional network security center; implementing best practices for managing and securing data; and prohibiting state agencies from acquiring, retaining or disseminating data used to identify an individual or the individual's location without written consent.

SB 966 Public Health Legislative Oversight Committee: Establishes a legislative public health oversight board to provide oversight for declarations of public health disasters and orders of public health emergencies issued by the DSHS commissioner. Public health disasters or emergencies could only last 30 days, additional days would have to be approved by this oversight board.

SB 967 Public Health Orders: Requires that public health orders issued by local public health authorities would expire after 15 days unless a majority of the governing body of municipal or county commissioners' court approves of an extension.

SB 968 Texas Medical Board Requirements During Disaster and Prohibition of COVID-19 Vaccine Passports: Prohibits Texas Medical Board from limiting non-elective procedures during a declared disaster. Prohibits governments in Texas from issuing COVID-19 vaccine passports in the state besides for the purpose of healthcare. Also prohibits businesses from requiring COVID-19 vaccine passports of customers to gain access to or receive services from businesses. This does not prohibit businesses from implementing screening or infection control protocols.

SB 969: Data Reporting to DSHS: Requires DSHS to develop a standardized method for reporting data during a public health disaster/emergency, to make available all de-identified data related to a public health disaster in a timely manner and in an easy-to-read format. The bill also gives DSHS the authority to impose a civil penalty on a facility that does not report critical data.

SB 1165 Dallas County Hospital District keeps the DCHD Board of Managers at 11 members appointed by the Dallas County Commissioners Court.

SB 1827 Statewide Opioid Settlement Provides for the allocation of money obtained under a statewide opioid settlement agreement. The bill would require that 15% of the money obtained under a statewide opioid settlement agreement be deposited into an opioid abatement account that could be appropriated to state agencies and 15% of the settlement will be appropriated to cities and counties. The rest of the settlement (70%) would be deposited into an opioid abatement trust fund overseen by an opioid abatement fund council. This council would allocate money based on the opioid abatement strategy including 15% of the fund to hospital districts.

SB 2038 Relating to prices and fees charged by certain freestanding emergency medical care facilities, including prices and fees charged during a declared state of disaster, providing administrative penalties.

Conclusion and Future Events

This information was compiled and reviewed by many Healthcare Leaders and the purpose is to update the Texas HIMSS Community on the status of Bills impacting Healthcare.

The Texas HIMSS Committee will continue to update and organize events that will help our community get involved. Feel free to contact anyone on the committee if you have input and are wanting to get involved.

Future Events

Week of Oct 25 through 29, 2021 - Global Health Equity Week aka HIT Week

February 8, 2022 - Texas Health Advocacy Day in Austin

Sincerely,

Your Texas HIMSS Advocacy Committee