

## **BILL ANALYSIS**

C.S.S.B. 1692  
By: Miles  
Public Health  
Committee Report (Substituted)

### **BACKGROUND AND PURPOSE**

Currently, only registered nurses (RNs) are authorized to oversee home dialysis care, including hemodialysis, in nursing homes or skilled nursing facilities, which increases the cost of the service and limit its use. Because of this limitation, many individuals residing in these facilities and homes must be transported to outpatient dialysis facilities to receive dialysis, which can be dangerous during disasters when residents cannot leave the facility to seek treatment. C.S.S.B. 1692 seeks to lower costs and provide more individuals with safe, quality dialysis treatment by amending licensure requirements for certain facilities that provide end stage renal disease care and authorizing properly trained and competent dialysis technicians, under the personal supervision of an RN who is in compliance with Health and Human Services Commission rules regarding training and competency of RNs who provide care at end stage renal disease facilities, to provide dialysis treatment.

### **CRIMINAL JUSTICE IMPACT**

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

### **RULEMAKING AUTHORITY**

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 2 of this bill.

### **ANALYSIS**

C.S.S.B. 1692 amends the Health and Safety Code to authorize a dialysis technician to provide home dialysis care in a nursing facility, including hemodialysis, under the following conditions:

- the care is provided under the personal supervision of a registered nurse (RN) who is in compliance with all Health and Human Services Commission (HHSC) rules regarding training and competency for RNs to provide care at end stage renal disease facilities and employed by the same entity that employs the dialysis technician; and
- the dialysis technician has complied with all HHSC rules regarding training and competency for dialysis technicians.

The bill defines "personal supervision" as supervision of a dialysis technician by an RN who is physically present in the room during the administration of dialysis services by the dialysis technician. The bill requires the executive commissioner of HHSC to adopt rules necessary to implement these provisions.

C.S.S.B. 1692 specifies that the home and community support services agencies and physician's offices that are exempt from the requirement to be licensed as an end stage renal disease facility are those that have not more than five patients at any time as a total number of patients to whom the agency or office provides dialysis services or are certified by the federal Centers for Medicare and Medicaid Services as an end stage renal disease facility under Medicare.

**EFFECTIVE DATE**

September 1, 2021.

**COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE**

While C.S.S.B. 1692 may differ from the engrossed in minor or nonsubstantive ways, the following summarizes the substantial differences between the engrossed and committee substitute versions of the bill.

The substitute includes provisions that were not included in the engrossed specifying the home and community support services agencies and physician's offices that are exempt from the requirement to be licensed as an end stage renal disease facility.

With respect to the authorization included in the engrossed for a dialysis technician to provide home dialysis care under certain conditions, the substitute specifies that the care is provided in a nursing facility and includes as an additional condition of the authorization that the RN under whose supervision the technician is providing the care is in compliance with HHSC rules regarding training and competency for RNs to provide care at end stage renal disease facilities. Whereas the engrossed required the technician's care to be provided under the direct supervision of an RN who is physically present on the premises at which such a technician provides that care and is immediately available to respond to patient needs, but not necessarily present in the room where the services are provided, the substitute requires that the care be provided instead under the personal supervision of an RN who is physically present in the room during the technician's administration of the services.

The substitute does not include the technician's successful completion of orientation and skills education requirements equivalent to those of a registered or licensed vocational nurse who provides home dialysis care as a condition of the authorization to provide the care, which was included in the engrossed.