

## **BILL ANALYSIS**

Senate Research Center  
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S.B. 413  
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Health & Human Services  
2/22/2013  
As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Freestanding emergency medical care facilities were licensed in 2010, by the Department of State Health Services (DSHS). These facilities meet the emergency medical care needs of our state's growing population. In addition to offering high quality and efficient care in convenient neighborhood locations, freestanding emergency medical care facilities are capable of providing services to patients that those patients may have a difficult time finding in their primary care physician office or even at a hospital.

DSHS's freestanding emergency medical care facility rules currently limit the scope of services provided in these facilities to those that are defined as purely "emergency services." Emergency departments in licensed hospitals are not subject to such a restriction in the services they are able to provide. S.B. 413 clarifies that freestanding emergency medical care facilities should be allowed to provide services permitted under a health care professional's scope of practice.

Some of the services that S.B. 413 allows include physical examinations, flu shots and other vaccines, and intravenous injections for treating certain conditions. An increasing number of physician offices are no longer offering certain types of vaccines due to low volume and reimbursement factors. Freestanding emergency medical care facilities are positioned to offer many types of vaccines. Furthermore, some freestanding emergency medical care facilities are able to administer intravenous injections for cancer patients who either do not have a primary care provider or have a primary care provider who does not have the proper equipment to administer them.

As proposed, S.B. 413 amends current law relating to medical care and public health services provided by a health care professional in a licensed freestanding emergency medical care facility.

### **RULEMAKING AUTHORITY**

Rulemaking authority previously granted to the executive commissioner of the Health and Human Services Commission is restricted in SECTION 1 (Section 254.002, Health and Safety Code) of this bill.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter A, Chapter 254, Health and Safety Code, by adding Section 254.002, as follows:

Sec. 254.002. APPLICABILITY OF CHAPTER; LIMITATIONS ON FACILITY FEES AND RULEMAKING AUTHORITY. (a) Prohibits this chapter from being construed as prohibiting a licensed health care professional in a freestanding emergency medical care facility licensed under this chapter (Freestanding Emergency Medical Care Facilities) from providing at the time emergency care is provided medical care or public health services that are within the scope of the health care professional's license and that are not required to be provided in another facility under other law. Authorizes the health care professional to charge a facility fee for the medical care or public health service provided to a patient only if the care or service is provided as part of the emergency care provided to the patient, or at the time nonrelated emergency care is provided to the patient.

(b) Prohibits the executive commissioner of the Health and Human Services Commission (executive commissioner) from adopting a rule under Section 254.151(a) (relating to the rules required to be adopted by the executive commissioner under this chapter) that conflicts with Subsection (a).

SECTION 2. Effective date: upon passage or September 1, 2013.