

## **BILL ANALYSIS**

Senate Research Center  
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S.B. 807  
By: Deuell  
Health & Human Services  
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As Filed

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

Each year, many individuals enter the United States who are from areas of the world where tuberculosis (TB) is endemic.

Intake into a United States Immigration and Customs Enforcement (ICE) detention facility includes an initial health care screening completed within 12 hours of arrival, which includes checking for signs and symptoms of TB. These facilities are not, however, equipped to treat patients with complicated TB.

Individuals in the custody of ICE who have TB may be released from ICE facilities into Texas's general population. Treatment of most persons with TB or latent TB infection takes place at the community level in regional and local health department outpatient settings. The Department of State Health Services (DSHS) also operates the Texas Center for Infectious Disease (TCID), which provides inpatient treatment of TB.

Patients admitted to TCID generally are persons with the most complicated cases of TB. TCID is also Texas's designated facility for court-ordered (quarantined) management of TB for patients whose non-adherence with control orders issued by public health authorities poses a threat to public health or safety. Inpatient care is usually necessary for successful treatment of complicated comorbid conditions, such as cases of multi-drug-resistant TB and extensively drug-resistant TB.

Section 13.037 (Determination of Residency), Health and Safety Code, specifies that only "residents" of the state may be admitted to TCID. A person is a resident if the person is physically present and living voluntarily in Texas, intends to make a home in Texas, and is not in Texas temporarily.

Illegal immigrants with TB released by ICE while awaiting removal or asylum proceedings can constitute a public health threat in Texas, and yet are ineligible for TCID admission because of TCID's statutory eligibility criteria.

To protect Texans from exposure to this serious disease, S.B. 807 gives DSHS the ability to admit a federal detainee who poses a significant threat to public health into TCID, pending final disposition of the detainee's immigration proceedings.

As proposed, S.B. 807 amends current law relating to the authority of the Department of State Health Services to admit certain nonresident tuberculosis patients to a state chest hospital.

[**Note:** While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services, as the successor agency to TDH.]

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

## **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 13.046, Health and Safety Code, by adding Subsections (c) and (d), as follows:

(c) Authorizes the commissioner of public health (commissioner) to admit a person to a state chest hospital if the person is in the custody of United States Immigration and Customs Enforcement, or other appropriate federal agency, pending completion of deportation or political asylum proceedings or has been released from custody pending completion of the proceedings, and the commissioner determines the person is a tuberculosis patient.

(d) Requires the Texas Department of Health, if the commissioner admits a tuberculosis patient under Subsection (c), to attempt to recover from the appropriate federal agency the costs associated with the treatment of the patient.

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