

BILL ANALYSIS

Senate Research Center
86R20529 SRA-D

C.S.S.B. 982
By: Kolkhorst
Health & Human Services
4/2/2019
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

S.B. 982 requires the Texas Division of Emergency Management (TDEM) to develop a plan to increase the capabilities of local emergency shelters for the care of specialty populations during a disaster. The bill also instructs TDEM to increase the awareness of local volunteer networks, including the Medical Reserve Corps (MRC), on the part of local governments during a disaster or emergency.

After Hurricane Harvey, not all shelters were equipped to properly care for certain medically needy populations, such as those that are technology-dependent. For example, a number of dialysis centers closed due to Harvey and shelters were not equipped to handle the influx of dialysis patients; thus the patients were transferred to hospital ERs that were already beyond their care capacity.

Additionally, the sheer number of volunteers creates management issues. When an individual registers as a medical volunteer through the Texas Disaster Volunteer Registry (TDVR), they must select a local, county-level organization that is affiliated with the TDVR. Deployment and coordination happen locally, usually by MRC, however, not all counties have an MRC. Since county resources vary, most counties have a different list of registered organizations while some counties lack a single organization. The Texas Medical Association, which referred physicians who wanted to volunteer to MRC units, testified that “while urban areas have active MRC units, MRC is not well known in other parts of the state, resulting in slower deployment of volunteers in hard-hit small and rural towns.

S.B. 982 was filed in response to a recommendation contained in the Senate Committee on Health and Human Services's Interim Report (see page 4). (Original Author's/Sponsor's Statement of Intent)

C.S.S.B. 982 amends current law relating to awareness of and access to health care service programs available during a disaster or emergency.

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 Subchapter C, Chapter 418, Government Code, by adding Sections 418.054 and 418.055, as follows:

Sec. 418.054. EMERGENCY PLAN FOR SPECIALTY CARE POPULATIONS. Requires the Texas Division of Emergency Management (TDEM), in consultation with the Department of State Health Services (DSHS) and local governmental entities that have established emergency management plans, to develop a plan to increase the capabilities of local emergency shelters in the provision of shelter and care for specialty care populations during a disaster.

Sec. 418.055. ACCESS TO LOCAL VOLUNTEER NETWORKS; VOLUNTEER MOBILE MEDICAL UNITS. (a) Requires TDEM, in consultation with DSHS, to increase awareness of and encourage local government emergency response teams to utilize services provided by local volunteer networks, including the Medical Reserve Corps, that are available in the area to respond during a disaster or emergency.

(b) Requires TDEM to develop a plan to create and manage state-controlled volunteer mobile medical units in each public health region to assist counties that lack access to a volunteer network described by Subsection (a).

SECTION 2. Requires TDEM to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. Authorizes, but does not require, TDEM, if the legislature does not appropriate money specifically for that purpose, to implement a provision of this Act using other appropriations available for that purpose.

SECTION 3. Effective date: September 1, 2019.