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LSG Floor Report For General Calendar- Thursday, May 27, 2017

<p>HB 2 By: Gonzales, Larry</p>	<p>Relating to the repeal of certain riders for the Texas Medical Board and the Texas State Board of Examiners of Psychologists from the General Appropriations Act that are contingent upon the approval of certain Acts continuing those agencies during the 85th Regular Session.</p>	<p>Appropriations</p>	<p>This bill repeals two riders passed by SB 1, Acts if the 85th Legislative, Regular Session, which makes appropriations for the Texas Medical Board, and the Texas State Board of Examiners of Psychologists, that were contingent on the continuation of the boards during the 85th Regular Session. If this language is not repealed the funds allocated through these riders cannot be used to continue these entities since the Sunset Legislation was not be passed during the 85th Regular Session.</p> <p>The following riders are repealed:</p> <ul style="list-style-type: none"> • Rider 6 in Article VIII regarding the Texas Medical Board • Rider 2 in Article VIII regarding the Texas State Board of Examiners of Psychologists <p>With the repeal of these riders the funds allocated for these Boards would be available if the legislature chooses to pass the Sunset bill or HB 1 during the 85th (1).</p>	<p>Favorable Evaluated by: Ana Ramon 210-382-4295 Ana@Texaslsg.org</p>
<p>HB 7 By: Phelan</p>	<p>Relating to a tree planting credit to offset tree mitigation fees imposed by a municipality.</p>	<p>Urban Affairs</p>	<p>This bill implements a tax credit for a tree mitigation fee. Municipalities with tree ordinances may require permit with a corresponding fee, for the removal of protected size trees. HB 7 allows a person who must pay a tree mitigation fee for the removal of a tree due to development or construction to apply for a credit. To receive the credit a tree must be planted either on the property which the mitigation fee was assessed or a place mutually agreed upon by the person and the municipality. The rates of the credit are laid out in the bill. HB 7 will help to neutralize the loss of trees due to construction and development. Property within five miles of a federal military base are not subject to this bill.</p> <p>Concerns: This bill has the potential to negatively impact local control by placing state limitations on local ordinances.</p>	<p>Will of the House w/Concerns Evaluated by: Ana Ramon 210-382-4295 Ana@Texaslsg.org</p>
<p>HB 13 By: Capriglione / Sheffield / Burkett /</p>	<p>Relating to reporting requirements by certain physicians and health care facilities for abortion complications; authorizing a civil penalty.</p>	<p>State Affairs</p>	<p>HB 13 adds to the complicated and restrictive web of administrative abortion restrictions already in place at the state and federal level. It requires hospitals, abortion clinics, freestanding emergency care facilities, and physicians in certain situations to report to the Health and Human Services Commission (HHSC) outlining each abortion complication diagnosed or treated at the facility or by the physician, even though clinics and physicians are already reporting this information.</p> <p>Physicians who are subject to this reporting requirement include:</p>	<p>Unfavorable Evaluated by: Ana Ramon 210-382-4295 Ana@Texaslsg.org</p>

<p>Springer / et al.</p>			<ul style="list-style-type: none"> • physicians who performs an abortion at an abortion facility and the procedure results in an abortion complication or; • treats an individual with an abortion complication that resulted from an abortion procedure performed by another physician at the abortion facility. <p>A report must be filed if a physician who is subject to this bill treats or diagnoses an abortion related complication no later than 72 hours after the incident or a healthcare facility applicable to this legislation must report by the 30th day any abortion complication diagnosed or treated at the facility. HHSC will develop a form for reporting these abortion complications to be published on their website. The bill mandates that this report will not include any identifying information about a patient. However, the name of a physician who is subject to the aforementioned reporting requirements and the physician or the health care facility submitting the report must provide their names.</p> <p>Information contained in the report will include:</p> <ul style="list-style-type: none"> • The name and type of facility in which the abortion was performed • The name and type of any facility other than the reporting facility in which the complication was diagnosed or treated • The date and type of the abortion that caused the complication • The patient’s year of birth, race, marital status, state and county of residence • The date of the first day of the patients most recent menstrual cycle that occurred before the abortion associated with possible complications • The gestational age of the fetus when the abortion was performed • The date the complication was diagnosed or treated • A description of the complication • The number of previous live births of the patient • The number of previous induced abortions of the patient <p>The reports made under this subchapter are confidential and not subject to open records requests. The bill describes certain situations under which the information may be released, including for statistical purposes with patient consent or to appropriate state licensing boards for the purpose of enforcing licensure laws. Additionally, HHSC will develop and publish an annual report that aggregates each abortion complication reported within the previous calendar year. HB 13 imposes a civil penalty of \$500 for each instance where a facility or physician violates these reporting requirements. Each day of a continuing violation constitutes a separate ground for recovery. A facility or physician’s third separate violation of this section constitutes cause for the suspension or revocation of its operational license or permit. Physicians who violate any of the provisions of this legislation shall be reported to the Texas Medical Board by HHSC.</p> <p>While this bill primarily seeks to obtain abortion complication data, it will almost certainly have negative unintended consequences. Women who already feel stigmatized for accessing a safe, legal medical procedure may be less likely to present with what they perceive to be a complication for fear that their information may be included in this type of report. Especially for smaller clinics, it</p>	
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			<p>could be possible to deduce that a woman accessed an abortion there based on date, location, and other identifying factors; this is concerning, as it could violate patients' confidentiality and privacy.</p> <p>Statistics show that just .05% of abortions performed result in a complication (with less than 0.2% of these being severe complications); this illustrates that abortion is one of the most statistically safe medical procedures that Texas access each year. If reporting requirements are being implemented to pursue public health benefit, this should be done across the board on procedures that are statistically more dangerous, such as appendectomies and wisdom tooth extractions. HB 13 is a thinly veiled attempt to shame women for attempting to access reproductive healthcare and will likely overregulate many clinics providing abortions into non-compliance, resulting in decreased access for Texas women.</p>	
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