



*Department of State Health Services
Stakeholder Briefing – Legislative Appropriations Request
July 26, 2022*

Testimony of Valerie Smith, MD, submitted on behalf of:

Texas Medical Association; Texas Pediatric Society;
Texas Academy of Family Physicians; American College of Physicians Services, Texas
Chapter; Texas Association of Obstetricians and Gynecologists; American College of
Obstetricians and Gynecologists - District XI (Texas); and the Texas Public Health Coalition

On behalf of the more than 56,000 members of the Texas Medical Association and the above-named organizations, we appreciate the opportunity to provide stakeholder input on the Texas Department of State Health Services' (DSHS) 2024-25 legislative appropriations request.

The backbone of a strong health care system is a robust public health infrastructure. As such, we strongly support funding that will allow DSHS to strengthen efforts to prevent, detect, and respond to infectious diseases; respond swiftly to natural disasters and emergencies; and assess factors that will help Texas improve the quality and safety of maternal and child health services. Further, we support strengthening health promotion and chronic disease prevention – initiatives critical not only to the state's efforts to improve health but also to lowering health care costs. We urge DSHS to pursue enhanced funding for public health statewide, especially support for communities that do not have a health department. Continued investments in Texas' public health infrastructure ultimately will defray health care costs in the future.

Invest in immunization services. Vaccines are safe, cost-effective ways to prevent infectious diseases. However, vaccine hesitancy and rising nonmedical exemptions continue to be serious concerns for physicians. Funding is critical to allow the agency to improve public health awareness about vaccine safety and efficacy as well as to help children and adults obtain them. We ask that DSHS pursue additional funding to:

- Maintain a strong Adult Safety Net (ASN) Program: ASN is an indispensable service for uninsured adults, allowing them to access potentially life-saving vaccinations.
- Modernize ImmTrac2: Texas' immunization registry must provide current, accurate, and granular information to allow the state to better gauge a school's or community's vulnerability to disease outbreak. Additionally, Texas should ensure ImmTrac2 data are bidirectional and interoperable with school health systems. We also strongly support making ImmTrac2 "opt-out" versus "opt-in," which will save dollars by reducing staff needed to validate "opt-in" entries.

Strengthen infectious disease prevention, monitoring, reporting, and response. Infectious disease outbreaks not only contribute to illness and potential death, but also economic disruptions. We urge DSHS to request necessary funding to ensure timely infectious disease prevention and epidemiological activities. We ask that DSHS pursue funding to:

- Maintain a strong HIV Medication Program, which provides life-saving medications to uninsured and underinsured Texans living with the virus.
- Ensure a reliable, timely public health laboratory. Federal COVID-19-related funds allowed DSHS to expand its laboratory capacity, including hiring direly needed epidemiologists, laboratory specialists, and other skilled staff.

When the federal funds run out, Texas should continue funding to maintain these worthwhile investments.

Improve maternal and infant health. We commend DSHS for its enduring leadership to promote safer, high-quality maternal and infant health services, providing key analytical and administrative support to the Perinatal Advisory Council (PAC), Maternal Mortality and Morbidity Review Committee (MMMRC); TexasAIM, a set of maternal safety bundles to help reduce preventable maternal deaths; and the Texas Collaborative for Healthy Mothers and Babies (TCHMB), a multidisciplinary network that works to advance health care quality and patient safety for all Texas mothers and babies. For the 2024-25 biennium, we ask that DSHS seek funding to:

- Maintain the important work of PAC, MMMRC, TexasAIM, and TCHMB and facilitate coordinated quality improvement and educational initiatives, with an emphasis on reducing maternal and child health disparities.
- Establish a statewide perinatal data collaborative to provide hospitals designated as neonatal and/or maternal level of care facilities with more robust quantitative data on the effectiveness of maternal and infant health patient safety and quality improvement initiatives.
- Implement a statewide campaign raising awareness about congenital syphilis (CS), a preventable, chronic infectious disease that can harm not only the health of the mother, but also her newborn. Texas has the highest case count in the country, yet the Centers for Disease Control and Prevention states that stillbirth or premature death occur in “40% of babies born to women with untreated syphilis.” Many other develop complications later, including visual and hearing loss.
- Maintain a modern Newborn Screening System, including ample laboratory staffing and up-to-date equipment to allow whole genomic sequencing, which can more accurately detect underlying genetic conditions. Early intervention and management are critical to mitigating potential harm from these conditions. While the dedicated Newborn Screening Preservation account is meant to fund genetic screening best practices, it is unclear whether the account will have sufficient funds by the next biennium to allow it to make needed upgrades.
- Establish a statewide “preventive health care matters” campaign to raise awareness about the importance of early screenings as well as immunizations. Many Texans skipped these services during the height of the pandemic. It’s time to get them back.

Invest in health promotion and chronic disease prevention. The top 10 leading causes of death in Texas include heart disease, cancer, stroke, Alzheimer’s disease, and diabetes.¹⁰ Individuals with underlying chronic conditions such as diabetes, heart disease, obesity, and others are at an increased risk for severe illness or even death.¹¹ Investment in prevention will help avoid high medical costs and promote future savings overall for our state. We ask DSHS to seek funds supporting:

- Vibrant, statewide health promotion and chronic disease prevention efforts encouraging Texans to be physically active, make healthy food choices, get their routine health screenings, get vaccinated, and other strategies to prevent chronic illnesses.
- Dynamic tobacco-control initiatives to curb tobacco usage, particularly among teens and women of reproductive age. Tobacco use is a key, preventable factor in maternal morbidity.

Invest in vital statistics. Ensuring reliable vital statistics is key to DSHS’s mission. We support investments to help the agency fulfill its statutory responsibilities including to:

- Simplify TxEVER, the state’s death certificate registry, by requesting funds to make upgrades that will automatically renew account access for physicians when they biennially renew their Texas medical license, and by extending the TxEVER password expiration time to 180 days or more, among other reforms.

Our organizations commend DSHS for its resolute, data-driven efforts to combat COVID-19. Practicing physicians are a key ally in Texas’ efforts to improve public health. As you refine your exceptional items, we look forward to the opportunity to elaborate on our recommendations as well as to discuss ways in which we can ensure more robust physician and community engagement in the design, implementation and roll out of DSHS initiatives.

Should you have any questions, please contact Helen Kent Davis, associate vice president, Governmental Affairs, at Helen.Davis@texmed.org; Christina Ly, associate vice president, PublicHealth, at christina.ly@texmed.org or Matt Dowling, Director, Public Affairs, at matt.dowling@texmed.org.