

Public Health

Conscientious Objection to Immunization

A new provision under state law allows parents who register a “conscientious objection” to enroll their children in public school without the required set of immunizations. Advocates of this new option say that it gives parents greater choice over which and how many shots their children get, while opponents say it poses a potential risk to public health. As of the last week in October, the Texas Department of Health (TDH) had received affidavit forms for 1,713 children to be admitted to school without proof of full immunization.

Texas law requires children entering public or private schools to be immunized against certain diseases but makes exceptions for medical contraindications or religious conflicts. A five-year-old entering kindergarten is required to have proof of vaccination against diphtheria and tetanus, polio, measles, German measles, mumps, hepatitis B, haemophilus influenza type B, and chickenpox (unless there is a reliable history of the disease — see Table 1 on page 2).

A parent or guardian may obtain a medical exception to the requirement though an affidavit signed by a physician stating that the immunization could injure the child or a family member. A medical exemption may apply to any or all of the required immunizations.

A religious exemption may be claimed through an affidavit signed by the child’s parent or guardian stating that the immunization conflicts with the tenets and practices of a recognized religion of which the child is a member, including Jehovah’s Witnesses and Christian Scientists. A religious exemption applies to all immunizations, not selected ones, but does not apply in times of emergency or outbreak.

The 78th Legislature added a third exemption for conscientious objections as a part of the omnibus health and human services reorganization bill, HB 2292 by Wohlgenuth. During floor debate, the Senate adopted an amendment by Sen. Estes to create an exemption for reasons of conscientious objection in cases where an applicant’s sibling had experienced an adverse reaction. The conference committee report for the bill broadened the exemption by eliminating the sibling adverse-reaction requirement in the Estes amendment. To obtain the exemption, which can cover a single immunization or the whole panel of shots, a parent or guardian must submit an affidavit on a form supplied by TDH.

(See Immunization, page 2)

Summary of Speaker’s Interim Charges to House Committees

House Speaker Tom Craddick on November 4 issued his charges to House committees to conduct interim studies of issues likely to be considered by the 79th Legislature when it convenes in January 2005. The charges are summarized briefly here, and the complete list is available on the House web site at <http://www.house.state.tx.us/committees/charges/78interim/03nov4.pdf>.

(See Committees, page 8)

**Voters approve 22
constitutional
amendments**

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(Immunization, from page 1)

During the second called session of the 78th Legislature, Rep. Capelo introduced HB 27 that would have repealed the conscientious objection option while retaining the medical and religious exemptions. That bill, and a similar one filed in the third called session, died in the House Public Health Committee.

While exemptions for religious reasons are permitted in 48 states, and all states offer a medical exemption, in 2000 only 15 states permitted a philosophical exemption. According to the National Conference of State Legislators, 11 states since have introduced legislation to permit a philosophical exemption, but only Texas and Arkansas enacted such a law.

Table 1
Required Immunizations for Admission to School in Texas

Immunization	Number of doses	Notes
Diphtheria/tetanus, DTaP or DPT	Five doses, unless fourth dose was administered on or after fourth birthday.	Booster required every 10 years.
Polio	Three doses with at least one on or after fourth birthday.	Not required after age 18.
Rubeola (measles)	Two doses after first birthday for students over age five born after 1991.	Serologic proof of immunity is acceptable.
Rubella (German measles)	One dose after first birthday.	Serologic proof of immunity is acceptable.
Mumps	One dose after first birthday.	Serologic proof of immunity is acceptable.
Hepatitis B	Three doses for students over age five born after 1992.	Children born after 1988 but before 1992 must show proof of three doses within 30 days of twelfth birthday.
HIB (haemophilus influenza type B)	One dose for children 15 months to four years of age.	Primary series of three doses and booster before 15 months is acceptable.
Varicella (chickenpox)	One dose after first birthday for children born after 1994.	Children born after 1988 but before 1994 must show proof of one dose within 30 days of twelfth birthday. Two doses required if over age 12. Reliable history of disease is acceptable.

Source: Texas Department of Health

Note: Vaccine requirements are incorporated in T.A.C., Title 25 Health Services, §§ 97.61-97.77. The Texas Department of Health is authorized to set the immunization requirements by Texas Education Code, ch. 38 and Human Resources Code, ch. 42.

“Reasons of conscience”

Supporters of the new exemption say that it gives parents appropriate authority over their children’s medical treatments. The prior exemptions were too narrowly defined to accommodate some parents’ beliefs. While the religious exemption did allow members of certain faiths to obtain an exemption, it applied only to recognized religions that had a stated policy against immunizations. Parents who were not members of those religions but who wanted an exemption for their children had to lie in an affidavit to use the exemption.

Also, supporters of the new exemption say that parents’ affidavits sometimes were questioned by the schools. Because the new exemption includes “reasons of conscience” and is submitted through a TDH form, parents can obtain an exemption in a truthful manner and no longer will be subject to questioning by the school.

Another limitation of the religious exemption was that it was an “all or nothing” exemption. Parents had to attest that they were against immunization on religious grounds, when many were opposed only to a single vaccine or type of vaccine. The exemption for reasons of conscience is more flexible and better suited to the reality of parental concerns.

The medical exemption also was insufficient to protect children’s health, supporters of the new exemption say. They claim that some vaccines may have significant side effects and that there could be a link between childhood immunizations and autism. Some doctors are reluctant to act on parents’ decisions about vaccines and refuse to write the needed documentation for a medical exemption. Physicians also may be pressured to refuse to write an exemption because insurers are ranked based on the level of full immunization among their practitioners. The National Committee for Quality Assurance, a national non-profit watch dog organization that ranks health plans, uses immunization rates as one of the indicators for quality health care. In order to obtain a high ranking, insurers may pressure participating physicians to resist exemptions or delays.

Supporters of the conscientious objection exemption say it signals the medical community that the power to decide belongs to parents, not to the state.

The decision over medical care should be in the hands of the parents, according to supporters. In no other case, they say, does the state force parents to subject their children to some form of medical treatment. Because state law requires immunization, the schedule for vaccinations takes on a rigidity unlike other elective treatments. Consequently, the medical community administers immunizations often without a parent’s fully informed consent. For example, the side effect information is written at a sixth-grade level and glosses over potential harm. While

a parent may glean the basics, this does not constitute fully informed consent. Busy doctors, mobile clinics, and other situations where vaccines may be administered without a thorough review of a child’s medical history can leave parents without an opportunity to make an informed decision. The change in

state law signals the medical community that the power to decide belongs to parents, not to the state.

Parents should not fear legal repercussions for acting in their children’s best interests, say supporters of the new exemption. They say that it will deter pediatricians who strongly support immunization from threatening parents who choose not to have their children vaccinated. They say that parents sometimes are intimidated by overbearing pediatricians who hint that the state, in the form of Child Protective Services, could intervene because immunizations are required by state law. The new exemption validates the right of parents to determine their children’s best interests and to act accordingly.

Supporters predict that the conscientious objection exemption will not lead to generations of unimmunized children. Some parents might want to slow down the frequency of immunizations so that the side effects may be better observed. Often physicians administer multiple vaccines in a single visit, which can make it difficult to determine which vaccine has caused a reaction. By permitting an exemption based on a conscientious objection, parents can have their children immunized over a number of years instead of rushing to get it done before they start school.

Public health risk?

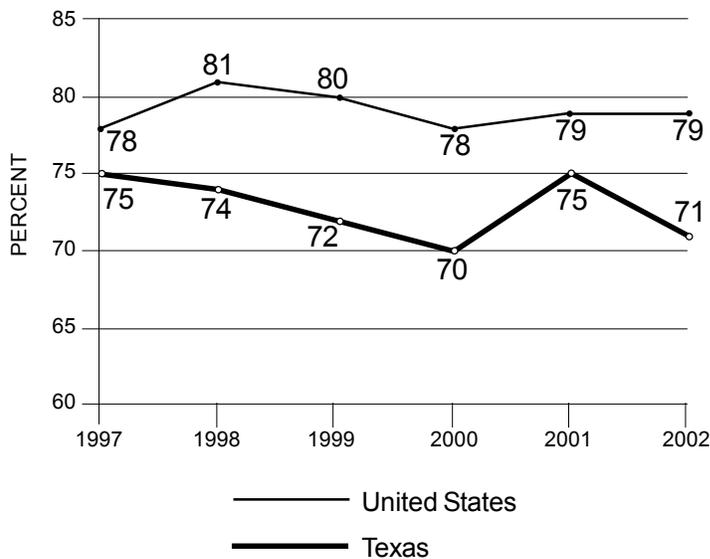
Opponents of the new exemption say that it threatens general public health because high rates of immunization among a population are the best way to prevent certain communicable diseases. Immunization against childhood infectious illnesses often is lauded as the most effective public health intervention in the history of modern medicine. Diseases that used to sweep through a population with lethal consequences, such as diptheria and polio, are virtually unknown today.

Studies of communities with an exemption option for reasons of conscience have shown that those communities are at greater risk for communicable diseases. A 2000 study of children ages three to 18 in Colorado, a state that permits philosophical exemptions, found that the prevalence in a community of children exempted from immunization was associated with an increased incidence of measles and pertussis (whooping cough) in vaccinated children. There also was a link between the number of exempted children in a community and the likelihood of an outbreak.

It is unfair, opponents say, to jeopardize the health of children who cannot be immunized and who may come into contact with exempted children in school or through the community. Children who are immuno-compromised, such as those receiving chemotherapy, could die if they contracted a communicable disease such as measles or mumps. Because those children are in school as well, the presence of non-immunized children there could create a hostile environment. Also, even children who are immunized against pertussis can, in a location where the disease is prevalent, carry the illness home to infant siblings who have not yet been immunized. A smaller number of immunized children in a population increases the likelihood of exposure for everyone.

The new exemption may put some communities at greater risk than others because those seeking exemptions tend to cluster. The concept of “herd immunity” is common regarding the efficacy of immunizations. The resistance of a group of people to attack by a disease because a large proportion of the members is immune, or vaccinated, lessens the likelihood of the disease coming into contact with a susceptible individual. If most of the population is immunized,

Figure 1
Texas' Immunization Rates According to CDC Survey Data



Source: TDH, *Rider 35: Report to the Legislative Budget Board and the Governor on Plans to Increase Immunization Rates in Texas*, September 30, 2003.

the disease will find it difficult to spread to the few that are susceptible. Because those seeking exemptions tend to cluster, the protection of group immunity is weakened, and the disease can spread more easily through the population.

Opponents of the new exemption say that the religious and medical exemptions were sufficient to protect public health and the well-being of individual children. The anti-immunization movement is fueled by clinically unsound theories, such as a purported link between vaccines and autism, propagated on the Internet and spread by word of mouth. The medical exemption ensured that a physician had some input on whether or not a specific vaccine could be harmful to a child. Without that input, parents could be swayed by something they read and choose not to immunize even though the source of the information may be faulty. The medical exemption ensured that the decision about the medical appropriateness of a vaccine was left to a trained physician, not to a poorly informed parent.

Opponents of the new exemption say the previous system of exemptions was not as onerous as its critics contend. For example, opponents say, the religious exemption was not an “all or nothing” option. The only time the exemption came into consideration was when the child began school. Parents who did not want their child to have all the required immunizations or wanted to delay them could obtain the religious exemption and then immunize later without the school’s knowledge. Other issues related to immunizations, such as the disclosure of side effect information or pressure from doctors who disagree with the decision not to immunize, would not be changed by the new exemption and should not be reasons to retain it, say its opponents.

New exemption not enough?

Other supporters of the conscientious objection exemption say that it is an important step in the right direction but that it does not go far enough. They say that the state should adopt a moratorium on mandatory vaccinations because too many are required. While some

vaccines prevent diseases that a child may be exposed to, supporters of a moratorium say that other vaccines are unnecessary and the risk of side effects may outweigh any potential benefit. For example, children are required to be vaccinated against hepatitis B, a disease that young children are unlikely to encounter because it is transmitted primarily through sexual contact.

Opponents of a moratorium say that each new vaccine is added based on the public health merits of that vaccine.

While the Advisory Committee on Immunization Practices (ACIP) recommends a schedule of vaccines, TDH evaluates the medical, public health, and financial concerns about each before making a recommendation to the commissioner of health, who then could initiate the rule-making process. They say that a total moratorium would be unwise from a public health standpoint and inappropriate as

much of the controversy over the current set of required immunizations concerns the hepatitis B vaccine. While hepatitis B can be transmitted sexually, it also can spread through contact with open sores, the sharing of toothbrushes or washcloths, or human bites, events that easily could occur among school-age children.

Texas’ immunization rates

Texas’ immunization rate ranked forty-fifth among the 50 states in the 2002 National Immunization Survey conducted by the federal Centers for Disease Control and Prevention (CDC). While Texas consistently ranks lower than the national average for rates of immunized children between the ages of 19 and 35 months (79 percent), the state fell in the latest survey to 71 percent. Houston has the lowest vaccination rate among the nation’s urban areas (64 percent). The survey considers a child “immunized” if the parent reports that the child has received all of the doses recommended for that child’s age. In addition, the benchmark rates focus on coverage for a series of vaccines, including the 4:3:1:3 series (four DTP, three polio, one measles, and three HIB).

Opponents of the new exemption say that it threatens general public health because high rates of immunization are the best way to prevent childhood communicable diseases.

Critics of the survey's methodology say it is misleading and inaccurate to report that Texas has a low vaccination rate because the benchmark requires more immunizations than Texas law does. The survey is conducted when a child is between the ages of 19 and 35 months and counts only children who have received all doses in the CDC's benchmark, which recommends one more dose each of DTP and a different timing for a polio vaccine than does Texas law. A child who is vaccinated fully according to Texas law at the time of the survey, or who has had many of the required shots, would not show up in the CDC's fully vaccinated group.

Critics say that a better measure would be the percentage of school-age children who are vaccinated because many catch up on their immunizations just before entering school. They point to a TDH data indicating that 99 percent of school children in the state are vaccinated against diphtheria, tetanus, polio, measles, German measles, and mumps. The immunized rates for other diseases also are

above the CDC rate: 95 percent for hepatitis B, 97 percent for HIB, and 96 percent for chickenpox.

Supporters of the survey methodology say that it illustrates Texas' immunization problem, regardless of whether the standards are higher than those in Texas law. The CDC standard is based upon the recommendations of ACIP, a group of physicians, epidemiologists, academics, and public health professionals. Their recommendations, not Texas' minimum requirements, represent the best medical advice for immunization schedules. The CDC immunization schedule, supporters say, is linked to improved outcomes and, unlike data collected for children age five and older, provides a reliable indicator of the health of Texas' youth.

The distinction between the two standards may become moot if TDH implements proposed rules to make Texas law follow the CDC recommended schedule (see *Initiatives to improve immunization rates* below).

— by Kelli Soika

Initiatives to improve immunization rates

In early 2002, responding to low immunization rates in Texas, TDH convened the Texas Immunization Partnership of physicians and public health professionals to develop improvement strategies. Their final report, published in September 2002, includes many ideas that inspired legislation enacted by the 78th Legislature.

Changes to state policies on child immunization focused on ImmTrac, the state immunization registry, which tracks immunization of children from birth to age 18 and allows disclosure of information with written parental consent. HB 1921 by Capelo amends regulation of the immunization registry by requiring consent only once, adding additional protection for the information, and allowing providers to use the registry to send reminders. HB 1920 by Capelo requires TDH to develop continuing education programs for vaccine providers relating to immunizations and the federal Vaccines For Children program, which provides free vaccines to health-care providers for children of families that lack insurance or the ability to pay for early childhood immunizations.

New laws also change policies concerning immunization education and awareness. SB 43 by Nelson requires TDH to report to the Legislature on results of the Raising Immunization Through Education pilot program, a collaborative state effort funded by the CDC to implement peer training in best practices for increasing immunization rates in medical offices. SB 486 by Nelson requires TDH to develop and maintain partnerships with public and private entities to increase public awareness and support of early childhood immunizations.

In July 2003, Gov. Perry issued an Executive Order (RP25) designed to expedite implementation of the legislation enacted during the 2003 regular session, improvements in the TDH Immunization Program's business operations, Back-to-School and public awareness campaigns, and emergency rule-making to require adoption of ACIP's recommended immunization schedule. TDH has enacted emergency rules and drafted final rules to align Texas' schedule with the national one. The new requirement would apply to children entering school in the 2004-05 school year.

Voters Approve 22 Constitutional Amendments

Texas voters approved all 22 constitutional amendments proposed on the September 13, 2003, ballot. Official results released by the secretary of state are shown below. Including these amendments, voters have approved 432 amendments to the Texas Constitution since its adoption in 1876.

Prop. 1: Allowing Veterans' Land Board to use excess assets for veterans' homes

FOR	1,127,888	81.5%
AGAINST	256,735	18.5%

Prop. 2: Two-year redemption period for mineral interest sold at tax sale

FOR	830,009	62.4%
AGAINST	499,696	37.6%

Prop. 3: Tax exemption for property owned by a religious organization for expansion

FOR	730,127	52.9%
AGAINST	650,563	47.1%

Prop. 4: Allowing municipal utility districts to develop parks and recreational facilities

FOR	746,523	56.4%
AGAINST	576,164	43.6%

Prop. 5: Revising the property tax exemption for travel trailers

FOR	846,005	62.3%
AGAINST	511,507	37.7%

Prop. 6: Allowing the use of reverse mortgages to refinance a home equity loan

FOR	958,293	70.9%
AGAINST	393,239	29.1%

Prop. 7: Requiring six-person juries for misdemeanor trials in district court

FOR	1,033,199	74.7%
AGAINST	350,491	25.3%

Prop. 8: Canceling election for any office where the candidate is unopposed

FOR	781,330	56.4%
AGAINST	604,385	43.6%

Prop. 9: Adopting a total-return investment strategy for the Permanent School Fund

FOR	655,983	50.3%
AGAINST	648,167	49.7%

Prop. 10: Allowing cities to donate used equipment to rural volunteer fire departments

FOR	1,284,004	91.7%
AGAINST	116,677	8.3%

Prop. 11: Allowing wineries to sell wine for consumption on and off premises

FOR	851,809	62.4%
AGAINST	513,053	37.6%

Prop. 12: Capping noneconomic damages in medical and other liability cases

FOR	751,896	51.1%
AGAINST	718,547	48.9%

Prop. 13: Freezing elderly and disabled homeowners' property taxes

FOR	1,125,947	81.0%
AGAINST	264,069	19.0%

Prop. 14: Allowing borrowing by the Texas Transportation Commission

FOR	810,855	61.0%
AGAINST	517,606	38.0%

Prop. 15: Guaranteeing benefits earned in local public retirement systems

FOR	964,515	71.5%
AGAINST	383,710	28.5%

Prop. 16: Authorizing home equity lines of credit

FOR	862,009	65.4%
AGAINST	455,707	34.6%

Prop. 17: Freezing school taxes on residential homesteads owned by the disabled

FOR	1,063,917	77.7%
AGAINST	304,860	22.3%

Prop. 18: Canceling election for unopposed candidates in political subdivisions

FOR	720,479	53.1%
AGAINST	636,863	46.9%

Prop. 19: Abolishing the authority to create rural fire prevention districts

FOR	759,336	58.7%
AGAINST	533,264	41.3%

Prop. 20: Authorizing general obligation bonds for military enhancement projects

FOR	743,048	56.9%
AGAINST	563,848	43.1%

Prop. 21: Allowing college professors to be paid for serving on water district boards

FOR	692,937	52.3%
AGAINST	631,328	47.7%

Prop. 22: Filling temporary vacancies caused by military service of public officials

FOR	1,069,328	78.5%
AGAINST	293,083	21.5%

Source: Secretary of State's Office

(Committees, from page 1)

Standing committees

Interim study charges to the standing House committees include:

Agriculture and Livestock — potential destructive impact of feral hogs; state brush control efforts and impact of invasive aquatic plants and animals.

Appropriations — structure of general appropriations act (jointly with Senate Finance Committee); monitoring state agency fiscal performance; general revenue-dedicated accounts held outside state treasury; use of state agency contracts for professional services, consulting, construction, major information systems, etc.; history of use of state bonds and other debt financing instruments and Bond Review Board debt-service guidelines; graduate medical education funding streams, including the role of state teaching hospitals in addressing health-care needs; community supervision and parole supervision systems and progressive-sanctions model for adult criminal justice system (jointly with Corrections Committee).

Border and International Affairs — coordination and communication among state agencies, the state and federal governments, and the Texas and Mexico governments; collaborative scientific and technological research projects between Texas and Mexico universities; border health-care needs; Mexico's water debt and sister-city cooperation for water and waste water; border job training and retraining; border lending practices, including subprime and predatory lending; border transportation infrastructure, including impact on international trade and joint development projects with Mexico (jointly with Transportation).

Business and Industry — workers' compensation cost-driver reduction related to provider, surgical, and physical therapy services or care and reducing return-to-work delays; cost effectiveness of state workers' compensation system, including inclusion of additional agencies under risk management programs, allowing state agencies to self-insure, and creating provider networks for state employees; implementation of HB 2600, 77th Legislature and other workers' compensation legislation;

implementation of HB 1366, 78th Legislature, including possible use of remediation funds; employer and/or workers' compensation insurance carrier selection of initial treating doctor and change of doctor.

Civil Practices — inactive docket for claims from exposure to asbestos or mineral dust; monitoring legislation enacted by 78th Legislature, especially HB 4, the medical and tort liability law.

Corrections — community supervision and parole supervision systems and progressive-sanctions model for adult criminal justice system (jointly with Appropriations Committee); contracted prison services by private sector vendors; Council on Sex Offender Treatment, including treatment methods and effectiveness and licensing of registered-sex-offender treatment providers; criminal justice mental health initiative.

County Affairs — restructuring county government; costs of implementation of Fair Defense Act and heightened security requirements; substandard housing in counties not covered by Local Government Code, ch. 232, subchs. B and C; appropriate levels for county fees and fines; limiting unfunded state mandates; tax collection and service delivery comparison between incorporated and unincorporated areas.

Criminal Jurisprudence — moving DWI administrative license revocation hearing process from State Office of Administrative Hearings to the trial court handling the offense; defendant rights before parole board; peace officer authority to act outside of jurisdiction; ongoing functions of Office of State Prosecuting Attorney.

Defense and State-Federal Relations — assisting local communities affected by military base closures; developing homeland security strategy under HB 9, 78th Legislature; port security and use in deploying military troops.

Economic Development — effectiveness of job training programs; state promotion of tourism; unemployment compensation fund status; impact of workers' compensation system on business growth and expansion; Texas ports and economic growth; impact of state rural economic development programs.

Elections — compliance with federal Help America Vote Act; omnibus rewrite of Texas Election Code; implementation of HB 1606, 78th Legislature, ethics legislation.

Energy Resources — development of natural gas production, including liquefied natural gas; state promotion of alternative energy sources such as wind and hydrogen fuel cells (jointly with Regulated Industries); financial security requirements for oil and gas operators.

Environmental Regulation — on-site sewage disposal systems; compliance histories and incentives to reward compliance by entities regulated by Texas Commission on Environmental Quality (TCEQ); implementation of HB 1365, 78th Legislature, Texas Emission Reduction Plan.

Financial Institutions — access to capital by small businesses and consumers, including application of state usury laws to large commercial loans; limits to federal regulation of lending in relation to state enforcement.

General Investigating — Houston Police Department crime lab; special purpose districts.

Government Reform — duplication of services across state agencies, including combining small agencies by function or type; efficiency of state-agency hiring practices; efficiency of major-state-agency logistical operations; implementation of HB 7, 78th Legislature, omnibus government reform law.

Higher Education — student financial assistance programs; admissions eligibility and financial assistance access for mobile students and those obtaining nontraditional secondary education.

Human Services — adoption of special-needs children; abuse and neglect of individuals in community care settings; effectiveness of new marriage promotion initiatives in Temporary Assistance for Needy Families (TANF) program; impact of federal changes in TANF and child care policies; implementation of HB 669, 78th Legislature, requiring police presence with Child Protective Services workers during priority calls.

Insurance — implementation of SB 14, homeowners insurance revisions, and SB 127, handling water-damage claims and licensing public insurance adjusters, 78th Legislature; implementation of SB 418, 78th Legislature, requiring prompt pay of health insurance claims; implementation of SB 10, creating employer health benefit plan groups, and SB 541, allowing exclusion of some mandated health insurance benefits, 78th Legislature.

Judicial Affairs — visiting judge program; system for determining need for new district courts or county courts-at-law; review of appellate court decisions affecting legislative enactments or suggesting legislative action; derivation of jurors from pool of registered voters versus licensed drivers; court fee structure.

Juvenile Justice and Family Issues — presumption of parentage statute, including adequacy of relief for presumed parents who are child support obligors and assert a paternity fraud claim.

Land and Resource Management — implementation of SB 89, 76th Legislature, revising annexation procedures; long-term funding source for coastal hazard mitigation and coastal erosion program; funding mechanisms for purchase of development rights program.

Law Enforcement — requirements for incoming peace officers, police administration, police academies and initial and continuing education training; home alarm systems and interaction of law enforcement and private security in determining appropriate response; efficiency of concealed handgun licensing process.

Licensing and Administrative Procedures — implementation of HB 2519, 78th Legislature, bingo regulation; implementation of SB 283, 78th Legislature, Board of Architectural Examiners sunset, especially interior designer practice act; implementation of HB 1487, 78th Legislature, statewide licensing of electricians; implementation of HB 329, 78th Legislature, licensing mold remediators; identification of licenses and duties more efficiently handled by Department of Licensing and Regulation; incidence of underage drinking in Texas.

Local Government Ways and Means — property tax appraisal system, including appeals process, rollback rate application, and annual tax increase limits; use of “Texas purchasing companies” by businesses seeking local sales tax rebates outside of their actual location; property tax appraisal of timber land.

Natural Resources — Edwards Aquifer Authority, especially implementation of pumping limits; TCEQ authority to alter water contract terms; brackish groundwater and surface water as alternative water supply source.

Pensions and Investments — pension obligation bonds to reduce public retirement system unfunded liabilities; “retire in place” system for state retirement systems.

Public Education — textbook adoption and distribution system; promoting or opposing legislation using school tax dollars; educator contracts and certification; statewide educational initiatives, including dropout reduction and graduation rate increase; University Interscholastic League; comparison of Texas special education laws to those of other states and federal standards; impact of school start date change; state debt service aid to school districts; educational needs of military dependents.

Public Health — regulation of ephedra dietary supplement; impact of diabetes; transplantation of corneal tissue without prior consent; impact on unborn of drug and alcohol abuse by pregnant women; immunization and kidney health care programs.

Redistricting — redistricting court of appeals districts; structure and nomenclature of lower trial courts and their integration into new court of appeals districts; modification of district and county attorney districts.

Regulated Industries — Texas telecommunications market; broadband service deployment; process of economic dispatch, competitive electric utilities market improvements, and cost and pollution reduction by inefficient power plants; broadband-service-provider access to rights-of-way and easements; authority and structure of Electric

Reliability Council of Texas; broadband infrastructure platforms; encouraging investment in broadband networks by local exchange providers; state promotion of alternative energy sources such as wind and hydrogen fuel cells (jointly with Energy Resources); merger or streamlining of agency functions.

State Affairs — process for naming public buildings; disclosure of social security numbers without written consent; statistical information on judicial bypass proceedings for parental notification of minor’s abortion.

State Cultural and Recreational Resources — Texas Parks and Wildlife Department authority; firearm discharge in state-owned riverbeds; possible consolidation of Texas Commission on the Arts, Texas Historical Commission, and Texas State Library and Archives Commission; state tourism promotion; scenic byways and billboards.

Transportation — transportation best practices in other states; border transportation infrastructure, including impact on international trade and joint development projects with Mexico (jointly with Border and International Affairs); implementation of HB 3588, 78th Legislature, omnibus transportation bill (jointly with Senate Infrastructure Development and Security Committee).

Urban Affairs — special purpose districts, especially tax increment reinvestment zones; implementation of SB 264, 78th Legislature, Texas Department of Housing and Community Affairs sunset; meeting housing needs, including urban land banks, homestead preservation districts, and gap financing programs; rural housing needs.

Ways and Means — interstate sales and Streamlined Sales Tax Project; federal tax policy, including inheritance tax elimination and state sales tax deductibility; alternative school finance system (jointly with Public School Finance Select Committee).

The speaker also charged most of the standing committees with general oversight of the state agencies under their jurisdictions.

House select committees

The speaker established three new House select committees for the interim. ***Child Welfare and Foster Care*** will determine barriers to adoption, especially for minority children, consider promotion of substitute care with relatives of children removed from home by Child Protective Services, and review licensure requirements and performance for all types of foster care. ***Construction Industry-Related Workers' Compensation Issues*** will consider construction contract provisions that indemnify against loss or liability and study whether workers' compensation benefits should be an exclusive remedy for on-the-job injuries. ***Sex Offender Statutes*** will examine streamlining and clarifying statutory provisions for the sex-offender registration program.

The speaker previously created two other select committees. ***Health Care Expenditures*** will monitor implementation of the new trauma care fees, study the effects of "crowd out" of private insurance from the Children's Health Insurance Program and Medicaid, evaluate funding and criteria for the Medicaid Disproportionate Share Hospital program, study consumer-directed care models, especially the Program of All-Inclusive Care for the Elderly model, and identify and seek new models for providing ERS and TRS health care benefits. ***Public School Finance*** will continue its comprehensive review of the public education system.

HOUSE RESEARCH ORGANIZATION



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