

Include when we discuss legislative agenda, please.

Keith Self
County Judge
Collin County

From: Rainey Owen [<mailto:owenro@hotmail.com>]
Sent: Saturday, November 12, 2016 4:22 PM
To: Keith Self Judge <keith.self@co.collin.tx.us>
Subject: Need Your Help

Dear Judge Self,

Now that we finally have the election behind us, let me give you a brief update on the upcoming Legislative Session as this relates to getting some healing treatment for our Texas Veterans who have suffered a Traumatic Brain Injury (TBI) while on active duty.

I am attaching a copy of the first draft of a new bill that Representative Rick Miller will be introducing in the House in January. I'm also attaching some comments that I have sent to him concerning changes/additions that I feel should be included.

After you read the bill itself, you may have comments you'd like to add. Please let me know.

I'm glad you were able to be at the taping for the McCuistion Report that aired last month. Having some of the Doctors who have actually been involved with healing some of our Veterans has got to have been very compelling. Wish I could have made it.

I would very much appreciate your bringing before your Commissioners' Court for approval a Resolution similar to the one attached. As of now 79 other counties have approved similar Resolutions. I will be presenting these to the House and Senate Committees when the new Bill comes before each. I'd like very much to also have one from Collin County.

Please call if you have any questions.

Rainey Owen
Grandfather of a 'Restored from TBI' Veteran
979-542-7909

STATE OF TEXAS

COUNTY OF LEE



Hyperbaric Oxygen Therapy for TBI and PTSD

Whereas, the 'signature wounds' of Iraq and Afghanistan are Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD) and are significant health issues for **Texas Veterans** returning from service in Iraq and Afghanistan (Operation Enduring Freedom(OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND)), and

Whereas, the effects of these conditions are usually long lasting and often life threatening (frequently suicide), and currently there are no definitive medical treatments for TBI and the treatments being provided today are only palliative drugs and/or counseling, and

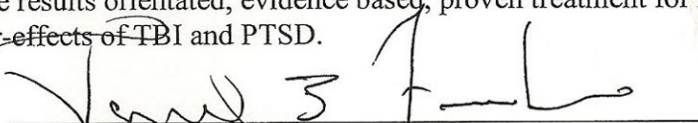
Whereas, several, well documented, more curative therapies are available, including Hyperbaric Oxygen Therapy (HBOT), that offer additional, alternative, curative ways to restore affected Veterans lives and minds., and

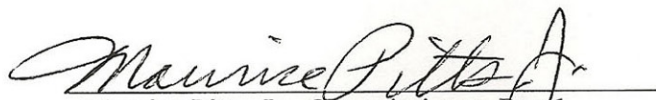
Whereas, numerous studies have demonstrated that the untreated, lingering effects of these injuries adversely impact the returned Veterans' lives, resulting frequently in destroyed families, drug and alcohol use, unemployment, mental illness, incarceration, and homelessness, and

Whereas, these results show up in society and communities as increased unemployment rates, public health care treatment costs, mental illness costs, alcohol and drug treatment costs, family breakups, and disrupted lives, and

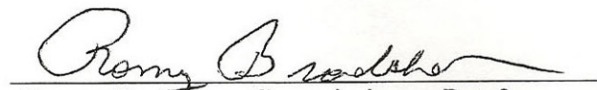
Whereas, neither the VA, Military Medicine, nor Medicare will reimburse Medical Practitioners for their efforts to help these Veterans, and

Therefore, Be It Resolved, that Lee County strongly urges the Texas State Government to provide appropriate funding and focus to provide results orientated, evidence based, proven treatment for returning Texas Veterans that suffer the residual, after-effects of TBI and PTSD.

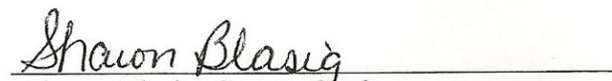

Paul E Fischer, County Judge


Maurice Pitts, Jr., Commissioner, Pct. 1


Douglas Hartfield, Commissioner, Pct. 2


Ronny Bradshaw, Commissioner, Pct. 3


Linda Kovar, Commissioner, Pct. 4


Sharon Blasig, County Clerk
Lee County, Texas

Comments on first Draft of Texas Veterans Recovery Pilot Program

Introduction

In my opinion, this draft is a good basis as a starting point. The following comments are things I feel can and should be considered/included.

1. Sec. 49.003 – I feel there should be some sort of time frame or time limit for the rules to be defined and published.
2. Insert the following on line 3 after the word ‘standards’ ‘, standards to insure that the Medical practitioner in overall charge has had some level of experience with actually using or testing this treatment with TBI/PTSD individuals suffering from these kinds of injuries,’ Without this requirement, there is no requirement that the medical practitioner has any knowledge or background with Hyperbaric Oxygen.
3. After the end of line 7, add the following – ‘as well as requiring regular reporting of activity and patient progress.’
4. Sec. 49.004, (d) – Add (3) – ‘a veteran's necessary travel and living expenses for a veteran required to travel to obtain treatment under the pilot program.’ There also needs to be provision for covering the costs of having his immediate family with/around him during treatment, if he so chooses.
5. Sec. 49.004, (e) insert on line 6, after the phrase ‘Department of Defense’ – ‘the Veterans Administration,’
6. Sec. 49.007 – TERMINATION OF RESERVATION OF FUNDS (a) – need to strike the words ‘the conclusion of’ from line 4 of this section.
7. Sec. 49.008 – REPORT – need to strike the words ‘even numbered’. Reports need to be submitted at least every year in order to determine if the Pilot is successful.
8. Should the payment schedule to both Medical personnel and the Facility be defined in some way? Since these schedules already exist for similar types of procedures, maybe Medicare rates should be used as a basis?
9. There should be, somewhere in the Bill, wording to the effect that the Medical individual developing the treatment protocols has had some level of experience with actually using or testing this treatment with TBI/PTSD individuals suffering from these kinds of injuries. My concern is that without this constraint, the errors in the earlier trials (improper pressurization (not in the 1.5 ATM range), invalid ‘sham’ controls, etc.) will be repeated or used as models or a pattern, thus defeating the whole purpose of the Pilot.

By: _____

____.B. No. _____

A BILL TO BE ENTITLED

AN ACT

relating to the establishment of the Veterans Recovery Pilot Program to provide certain veterans with hyperbaric oxygen treatment.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subtitle B, Title 2, Health and Safety Code, is amended by adding Chapter 49 to read as follows:

CHAPTER 49. VETERANS RECOVERY PILOT PROGRAM

Sec. 49.001. DEFINITIONS. In this chapter:

(1) "Facility" includes a hospital, public health clinic, outpatient health clinic, community health center, and any other facility authorized under department rules to provide hyperbaric oxygen treatment under this chapter.

(2) "Health care practitioner" means a person who is licensed to provide medical or other health care in this state and who has prescriptive authority, including a physician.

(3) "Hyperbaric oxygen treatment" means treatment for traumatic brain injury or post-traumatic stress disorder prescribed by a health care practitioner and delivered in:

(A) a hyperbaric chamber approved by the United States Food and Drug Administration; or

(B) a hyperbaric oxygen device that is approved by

the United States Food and Drug Administration for investigational use under the direction of an institutional review board with a national clinical trial number.

(4) "Physician" means a person licensed to practice medicine by the Texas Medical Board.

(5) "Pilot program" means the Veterans Recovery Pilot Program established under this chapter.

(6) "Traumatic brain injury" means an acquired injury to the brain. The term does not include brain dysfunction caused by congenital or degenerative disorders or birth trauma.

(7) "Veteran" means an individual who has served in:

(A) the army, navy, air force, coast guard, or marine corps of the United States;

(B) the state military forces as defined by Section 431.001, Government Code; or

(C) an auxiliary service of one of the armed forces described in Paragraphs (A) and (B).

Sec. 49.002. ESTABLISHMENT AND OPERATION OF PILOT PROGRAM.

(a) Except as provided by Subsection (b), the department, using existing resources, shall establish and operate the Veterans Recovery Pilot Program to provide diagnostic services, hyperbaric oxygen treatment, and support services to eligible veterans who have post-traumatic stress disorder or a traumatic brain injury.

(b) If there is insufficient money in the veterans recovery account established under Section 49.004 to cover the department's

expenses in administering the pilot program, the department may not operate the pilot program.

(c) The commissioner may appoint an advisory board to assist the department in developing the pilot program.

Sec. 49.003. RULES. The executive commissioner shall adopt rules to implement this chapter, including standards for veteran and facility eligibility under the pilot program and standards to ensure patient confidentiality is protected under the pilot program. The standards must require that:

(1) eligible facilities comply with applicable fire codes, oversight requirements, and any treatment protocols provided in department rules; and

(2) eligible participants in the pilot program reside in this state.

Sec. 49.004. VETERANS RECOVERY ACCOUNT. (a) The veterans recovery account is a dedicated account in the general revenue fund.

(b) The veterans recovery account consists of:

(1) gifts, grants, and other donations received for the account; and

(2) interest earned on the investment of money in the fund.

(c) Section 403.071, Government Code, does not apply to the veterans recovery account.

(d) The commissioner shall administer the veterans recovery

account. Money in the account may be used only to pay for:

(1) expenses of administering the pilot program;

(2) diagnostic testing and treatment of a veteran with post-traumatic stress disorder or a traumatic brain injury under the pilot program; and

(3) a veteran's necessary travel and living expenses for a veteran required to travel to obtain treatment under the pilot program.

(e) The commissioner shall seek reimbursement for payments made under the pilot program from the TRICARE program of the United States Department of Defense, appropriate federal agencies, and any other responsible third party payor.

Sec. 49.005. HYPERBARIC OXYGEN TREATMENT; RESERVATION OF FUNDS. (a) The executive commissioner by rule shall adopt standards for the provision of hyperbaric oxygen treatment under the pilot program to veterans who have been diagnosed with post-traumatic stress disorder or a traumatic brain injury, have been prescribed hyperbaric oxygen treatment by a health care practitioner, and voluntarily agree to treatment under the pilot program.

(b) A facility providing medical care to a veteran who is eligible for hyperbaric oxygen treatment under the pilot program may apply for reimbursement for treatment under the pilot program.

(c) The facility must submit a treatment plan to the department before providing treatment under the pilot program. The

treatment plan must include:

(1) a prescription order for hyperbaric oxygen treatment issued by a health care practitioner;

(2) verification of facility and veteran eligibility;

(3) an estimate of the treatment costs and of the veteran's necessary travel and living expenses for a veteran required to travel to obtain the treatment; and

(4) any other information required by the department.

(d) The department shall approve or disapprove a treatment plan within a reasonable time as established by department rule. The department shall notify the facility whether the treatment plan was approved or disapproved by the department.

(e) The department may not approve the provision of hyperbaric oxygen treatment under the pilot program unless the facility is in compliance with applicable department standards and rules and the veteran is eligible for treatment under the pilot program.

(f) If there is sufficient money in the veterans recovery account, the department shall approve each treatment plan that meets the requirements of this section and the standards adopted under this chapter.

(g) The commissioner shall reserve in the veterans recovery account an amount equal to the estimated treatment costs and necessary travel and living expenses specified in the treatment plan for each veteran that is approved for treatment under the

pilot program.

Sec. 49.006. PROVISION OF SERVICES; REIMBURSEMENT. (a) A facility may provide hyperbaric oxygen treatment under the pilot program to a veteran who has post-traumatic stress disorder or a traumatic brain injury if the department approved a treatment plan under Section 49.005 for the veteran.

(b) A facility that elects to provide hyperbaric oxygen treatment to a veteran under Subsection (a) shall provide the treatment without charge to the veteran. A veteran receiving treatment under the pilot program is not liable for the cost of treatment or expenses incurred under the pilot program. The facility may submit to the department a request for reimbursement from the veterans recovery account for expenses incurred for the treatment.

(c) A facility that elects to provide treatment under the pilot program shall submit to the department regular reports, in the form prescribed by the department, of the veteran's measured health improvements under the treatment plan.

(d) The commissioner shall reimburse a facility for expenses the facility incurred in providing the hyperbaric oxygen treatment from the veterans recovery account if:

(1) the treatment was provided according to the treatment plan approved by the department;

(2) the expenses do not exceed the amount reserved for the treatment under Section 49.005; and

(3) the facility demonstrates in the reports described by Subsection (c) that the veteran is making measured health improvements.

(e) If expenses for the treatment exceed funds reserved for the treatment under Section 49.005, the state and the veterans recovery account are not liable for the amount in excess of the reserved funds.

(f) A facility may submit a modified treatment plan under Section 49.005 to request the reservation of funds in addition to funds reserved under the original treatment plan.

(g) From money in the veterans recovery account, the commissioner shall reimburse a veteran required to travel to obtain treatment under the pilot program for the travel and living expenses approved by the department in the treatment plan. The expenses may not exceed the amount reserved for those expenses under Section 49.005.

Sec. 49.007. TERMINATION OF RESERVATION OF FUNDS. (a) If the facility or veteran fails to request reimbursement for treatment or for travel and living expenses under the pilot program for at least six months following the conclusion of treatment, the department shall notify the facility and the veteran receiving treatment under the facility's treatment plan that the funding reserved for the treatment and expenses will be terminated on the 90th day after the date the department provides notice under this subsection unless the facility or veteran notifies the department

of continued treatment and expenses under the pilot program or requests reimbursement for the treatment already provided or expenses already incurred under the pilot program.

(b) If a facility or veteran fails to notify the department of continued treatment and expenses in the time required under Subsection (a), the commissioner shall terminate the reservation of funds in the veterans recovery account under the facility's treatment plan for that veteran.

Sec. 49.008. REPORT. Not later than October 1 of each even-numbered year, the department shall submit to the governor, lieutenant governor, speaker of the house of representatives, and appropriate standing committees of the legislature a report regarding the pilot program that includes an evaluation of the effectiveness of the pilot program and the number of veterans and facilities participating in the pilot program.

Sec. 49.009. EXPIRATION OF CHAPTER. This chapter expires September 1, 2023. Any remaining balance in the veterans recovery account on the expiration of this chapter is transferred to the general revenue fund.

SECTION 2. The executive commissioner of the Health and Human Services Commission shall adopt the rules necessary to implement Chapter 49, Health and Safety Code, as added by this Act, not later than January 1, 2018.

SECTION 3. This Act takes effect September 1, 2017.