



END OF SESSION REPORT 2023

TABLE OF CONTENTS

3	INTRODUCTION
5	THE ROLE OF THE GOVERNOR
6	LT. GOVERNOR AND SPEAKER PRIORITIES
8	THE STATE BUDGET
11	PRIORITY 1: IMPROVING ECONOMIC DEVELOPMENT
14	PRIORITY 2: EXPANDING AND PROTECTING PATIENT ACCESS
20	PRIORITY 3: EXPANDING AND PROTECTING RESEARCH AND COMMERCIALIZATION
24	PRIORITY 4: IMPROVING HEALTH AND HEALTH PROGRAMS
28	OTHER STATE LEGISLATION OF NOTE
30	CONSTITUTIONAL AMENDMENTS
31	COALITIONS AND PARTNERS, THBI BOARD AND STAFF

INTRODUCTION

The word unprecedented was used consistently during the 88th Texas Legislature. It started in the very first days of session when House Republicans adopted rules for the first time that would prevent Democrats, or any minority of members, from creating legislative logjams by breaking quorum. As the session progressed, the word was used again to describe actions that had not occurred in decades: an investigation into allegations of inappropriate conduct led to a State Representative submitting his resignation before being formally expelled from the House. Less than a month later, after a three-month investigation, the House adopted HR 2377 impeaching the Texas Attorney General. The Senate then adopted SR 735 which outlines the next steps in the impeachment process, which includes a trial that is expected to begin September 5. Even with all of this, there were other, more subtle ways this legislative session was unusual. The House was accused of moving with extraordinary slowness to consider legislation and the Senate was accused of acting with extraordinary partisanship.

Despite the drama, by our unofficial count, 1,255 bills and concurrent resolutions were passed and sent to the Governor and nine joint resolutions were filed with the Secretary of State. This amounts to only 15% of all filed bills passing both houses for the Governor's consideration. The Governor allowed 132 bills to become law without his signature and vetoed 77 bills.

For the 88th Legislative Session, THBI tracked 373 bills and resolutions, including two state budget bills. This report is a guide to the actions of this session and how those actions will impact the life science and biotech industry and its stakeholders, patients, and partners.

In preparation for the legislative session, THBI worked with its Board of Directors and State and Federal Legislative Committee, and with patient advocate stakeholders who requested industry support for their initiatives. This process resulted in defining four general priority principles that were used to determine the position THBI took on legislation.

THBI's Legislative Priority Principles:

- Support and expand economic development efforts in Texas, focusing on making this the best place to locate and grow a life science and biotech business.
- Support and expand efforts that ensure patients have access to the innovative therapies and treatments created

by the life science and biotech industry that are improving health and saving lives.

- Support and expand opportunities for research and technology transfer programs that are creating the future of medicine at research hubs across Texas.
- Support the improvement of the health of Texans and the expansion of health programs that provide care to the uninsured and under-insured in Texas, including working toward more effective and equitable programs and emergency response efforts.

This report provides in-depth analysis of the 88th Legislative Session, including the actions taken by the Governor, Lieutenant Governor, and Speaker of the House, the state budget, as well as the legislation that passed affecting each of THBI's policy priorities.

Economic development policy includes legislation affecting how this state attracts businesses to relocate here, how businesses grow and operate, changes to state taxes and regulations, and legislation that helps grow a more effective and prepared workforce.

Regarding improving patient access to innovation, the report outlines legislation that expands access to and improves maternal health services in the Medicaid program, addresses patient access to new drugs, treatments, and therapies as well as efforts to decrease the administrative hassles for those with insurance coverage.

In supporting and protecting research and commercialization, the report describes legislation that has an impact on institutions' of higher education efforts to conduct research, as well as the legislation that regulates the security, use, and other requirements for personal data, including personal genetic data.

Finally, with improving health and health programs, the report details several new initiatives to improve services provided by the Department of State Health Services (DSHS) and changes made to the public health system to address concerns with the COVID-19 response and the opioid addiction crisis.

While no stakeholder or industry group will walk away from any legislative session having passed all their priority items, THBI has a lot to celebrate. Many THBI priority bills passed through the legislative process to become law. HB 1283 ensures that

the Texas Medicaid formulary will continue to be operated by the state to ensure fair and responsible access to medications for Medicaid patients. HB 3286, which became central to the negotiations with health plans regarding the continuation of the state's single formulary, allows certain exceptions to the Preferred Drug List along with other changes to the operation of the state formulary. Additional THBI priority bills that passed are included throughout this report.

With the help of partners and stakeholders, THBI was able to stop certain legislative initiatives that would have had a negative impact on patients and the life science industry. SB 1583 would have prohibited gain of function research outright. SB 314, SB 2632, and HB 3152 would have added burdensome regulatory requirements that would have had a chilling effect on the industry. HB 4800 would have put procedures in place to heavily favor health plans, leaving patients without coverage they paid for, and SB 1581 would have created significant barriers for patient advocate groups to access the legislative process. THBI was pleased to see that, of the nearly 50 bills that were filed in an attempt to address issues for anti-vaccine stakeholders, only HB 44, which prohibits providers in Medicaid and CHIP from discriminating against patients solely for their vaccination status, became law.

At final count, an unprecedented 8,344 bills and joint resolutions were filed for consideration by the 88th Texas Legislature, and 1,256 of them have become law, affecting every business in Texas in some way. THBI looks forward to continuing to work on these and future initiatives to help ensure the continued growth of the life science and biotech industry in Texas.



Join Texas's leading life science organization and become a THBI member today!

THBI members receive exclusive benefits including:

- Connections across our broad network of public, private, and academic/research participants.
- Collaboration with Texas's life science community, working to create a thriving ecosystem for companies to develop, grow, and flourish.
- Invitations to our robust programming schedule and the opportunity to participate in THBI events as a speaker.
- Regular updates on the latest policy issues and industry news through weekly e-newsletters and the monthly members-only President's Call.
- Opportunity to gain company visibility through THBI's channels, including weekly e-newsletter, President's Call Member Profiles, and social media channels.
- Access to BIO Business Solutions purchasing program, offering special rates on 15+ participating vendors.

To effectively advocate on behalf of the life science ecosystem, we need support from all companies, big and small. Your voice is critical to our success as an industry.

Contact THBI to join or learn more!
Email: info@thbi.com
Phone: 512-708-8424

THE ROLE OF THE GOVERNOR

The Texas Constitution provides the Governor with limited influence during a legislative session. However, the Governor can designate "emergency items," and at the end of the session, he has the final say on each bill that passes by deciding whether to veto, sign, or allow a bill to become law without his signature.

When the Governor designates an emergency item, that means that the House and Senate can take up and consider legislation related to that issue during the first 60 days of a regular session without a four-fifths vote. At the beginning of the 88th Texas Legislature, the Governor declared the following issues as emergency items:

- Cutting property taxes
- Ending COVID-19 restrictions forever
- Education freedom for all Texans
- School safety
- Ending "revolving door" bail
- Securing the border
- Fighting the fentanyl crisis

The most successful of these emergency items were the efforts to end the COVID-19 restrictions, improve school safety, and fight the fentanyl crisis. SB 29 passed to end COVID-19 restrictions, and new funding was included in both budgets for increasing school safety and to address the fentanyl crisis. While funding was allocated to address securing the border, a key bill that included additional new enforcement reforms did not pass, nor did school choice or property taxes. The Governor called a Special Session on May 29 to address property taxes and border security.

The most direct influence and power the Governor has in the legislative process is that he ultimately has the last word on whether any bill will live or die. Upon receiving a bill that has passed both houses of the Legislature (an enrolled bill), the Governor has the option to sign it, veto it, or allow it to become law without a signature. The Governor has 10 days in which to act unless the bill was sent within 10 days of final adjournment, in which case the Governor has until 20 days after final adjournment to act.

This session, the Governor had 1,255 bills to consider during the "veto period." He allowed 132 to become law without his signature and issued 77 vetoes. Two bills that were vetoed were being tracked by THBI. One created a sickle cell registry but the Governor found that the bill failed to include enough privacy protections. The second was a bill that required the Texas Department of Insurance (TDI) to create a consistent form for coordination of benefits between health plans. This bill was vetoed because it was not as important as property taxes, which had not yet passed. All veto statements are available on the [Office of the Governor's website](#).

While the Governor's influence during a regular session is limited, he is the only official who can call a Special Session. The Texas Constitution states "the Governor may, on extraordinary occasions, convene the Legislature at the seat of Government, or at a different place, in case that should be in possession of the public enemy or in case of the prevalence of disease threat. His proclamation therefore shall state specifically the purpose for which the Legislature is convened."

On May 29, the Governor called the First Special Session for the 88th Texas Legislature for the following purpose:

- Legislation to cut property-tax rates solely by reducing the school district maximum compressed tax rate in order to provide lasting property-tax relief for Texas taxpayers.
- Legislation solely for the purpose of increasing or enhancing the penalties for certain criminal conduct involving the smuggling of persons or the operation of a stash house.

For the House of Representatives, the first-called Special Session was a short one. In one day, they passed the bills requested by the Governor and then promptly adjourned Sine Die, ending the session for the House. The Senate continued to meet, as they disagreed with the bill passed by the House. They developed an alternative tax bill proposal, but the House could not reconvene without the Governor calling a new Special Session. The Senate also used this Special Session to create the rules and process for the Impeachment Trial for the Attorney General.

LT. GOVERNOR AND SPEAKER PRIORITIES

This session saw a significant battle between the Lieutenant Governor and Speaker over their declared priority legislative initiatives. Both presiding officers designated 30 bills as their priority items, and of those, there were five bills on which they both agreed: two budget bills, the creation of new specialty business courts, a fund to assist certain universities with expanding their research capacity, and a cost-of-living adjustment for retired teachers. Each of these bills passed and became law.

The majority of the priority bills passed; 22 of the Lieutenant Governor's priority bills and 19 of the Speaker's priority bills passed. Key among the bills that did not pass, and thereby generating significant tension between the presiding officers, were the property tax relief bills. While both prioritized the issue, they did not agree on the how to structure the tax reduction and the resulting lack of action led to the calling of the First Special Session.

LT. GOVERNOR'S PRIORITY LEGISLATION

SB 1	State budget SFY2024/2025	Passed
SB 2	Illegal voting	Passed as HB 1423
SB 3	Homestead exemption	Failed
SB 4	Additional property tax relief	Failed
SB 5	Business personal property tax exemption	Failed
SB 6	Texas Energy Insurance Program	Passed
SB 7	Improving the Texas Grid	Failed
SB 8	School choice	Failed
SB 9	Teacher pay increase	Passed as SB 10
SB 10	Retired teachers cost-of-living increase	Passed
SB 11	School safety	Passed as SB 12
SB 12	Protect children from obscene material	Passed
SB 13	Banning obscene books in school libraries	Passed as SB 14
SB 14	Ending child gender modification	Passed
SB 15	Protecting women's college sports	Passed
SB 16	Banning critical race theory in higher education	Failed
SB 17	Banning DEI policies in higher education	Passed
SB 18	Eliminating tenure	Passed with amendments
SB 19	Creating Texas University Fund	Passed as HB 1595
SB 20	District attorneys discipline	Passed as HB 17
SB 21	Judicial discipline	Failed
SB 22	Rural law enforcement funding	Passed
SB 23	10-year prison sentence for gun crimes	Failed
SB 24	Thriving Texas Families Act	Passed
SB 25	Scholarships for nursing students	Passed
SB 26	Expanding mental health care services	Passed
SB 27	New business specialty court	Passed as HB 19
SB 28	Addressing Texas future water needs	Passed
SB 29	Banning local COVID-19 mandates	Passed
SB 30	Supplemental budget SFY2023	Passed

SPEAKER'S PRIORITY LEGISLATION

HB 1	State budget SFY2024/2025	Passed
HB 2	Property tax relief	Failed
HB 3	School safety	Passed
HB 4	Data privacy	Passed
HB 5	Local tax incentives program	Passed
HB 6	Fentanyl-related crimes	Passed
HB 7	Legislative Border Safety Oversight Committee	Failed
HB 8	Community college funding reform	Passed
HB 9	Rural broadband infrastructure	Passed
HB 10	Water infrastructure development	Passed as SB 28
HB 11	Teacher recruitment and retention	Failed
HB 12	Expanding postpartum Medicaid coverage	Passed
HB 13	School safety funding	Passed as HB 1 & SB 30
HB 14	Streamline property development approvals	Passed
HB 15	Texas Brain Research Institute	Failed
HB 16	Juvenile justice reform	Failed
HB 17	Uniform enforcement of criminal laws	Passed
HB 18	Privacy protections for minors	Passed
HB 19	Creating business court system	Passed
HB 20	Creating Border Protection Unit	Failed
HB 100	School funding increase, teacher pay	Failed
HB 200	Prosecuting Attorneys Coordinating Council	Failed
HB 300	Abolish sales tax on feminine and childcare products	Passed as HB 379
HB 400	Psychiatric specialty innovation grant program	Passed
HB 500	Supplemental budget SFY2023	Passed as SB 30
HB 600	Retired teachers cost-of-living adjustment	Passed as SB 10
HB 700	Texas Health Insurance Exchange	Failed
HB 800	10-year sentence for human trafficking	Failed
HB 900	Restricting Explicit & Adult Designated Educational Resources Act	Passed

During the First Special Session, the tensions between the two presiding officers seemed to deepen. However, the statewide leaders all appear committed to providing significant property tax relief to Texas homeowners, and therefore it is expected that additional Special Sessions will be called.

YOUR TRUSTED PARTNER FOR BUYING AND SELLING LAB EQUIPMENT

**PREMIUM
REFURBISHED
EQUIPMENT**



**UP TO ONE-YEAR
WARRANTY**



50-80% OFF RETAIL



TESTED TO OEM SPECS

**SELL YOUR
SURPLUS
EQUIPMENT**



**OUTRIGHT
PURCHASE**



CONSIGNMENT



AUCTION



WWW.ALT.BIO
NASDAQ: HGBL
860-691-2213

THE STATE BUDGET

Since the Texas Legislature only meets every other year, the state budget covers the full two-year period, called a biennium. The Texas Constitution mandates that the budget be passed every legislative session and that the budget be certified as balanced by the Comptroller of Public Accounts. This session, the Legislature also took up and passed a "supplemental budget" bill to provide additional funding for the current biennium; SB 30 provides funding for the current fiscal year, SFY2023. HB 1, the budget bill, funds state government activity for the next biennium, referred to as state fiscal years 2024 and 2025 (SFY2024/2025).

SENATE BILL
30

SUPPLEMENTAL APPROPRIATIONS

The final version of SB 30 incorporates \$13.2 billion in all funds and \$7.35 billion in general revenue into the current biennium ending August 31, 2023. The funding allows the Comptroller of Public Accounts and various state agencies to complete certain spending requirements and obligations that arose since the last legislative session when the budget was approved, as well as appropriate additional federal funds received. Funding for health and human services programs accounted for more than half of the general revenue provided through SB 30.

Items of note in SB 30:

- Opioid abatement - \$26.8 million in general revenue to the opioid abatement trust fund.
- Medicaid shortfall - \$2.5 billion to address the budget shortfall in Medicaid client services in SFY2023.
- COVID-19 response costs - \$50 million to close out COVID-19 response costs not reimbursed by the Federal Emergency Management Agency (FEMA).
- School safety - \$1.1 billion in general revenue to assist school districts in implementing additional school safety measures.

SB 30 will have immediate effect to facilitate the remainder of the current biennium.

GENERAL APPROPRIATIONS

HB 1 provides an overall funding for agency operations of \$321.3 billion in all funds. Of that amount, \$144.1 billion are general revenue state funds and \$102.3 billion are federal funds. Other funding sources make up the remaining balance. Of that all funds amount, \$48.2 billion is allocated to health and social services programs in Article II of the budget, which is almost a 10% increase over the previous biennium.

Items of note in HB 1:

- \$5.1 billion for border security, the most in Texas history, including funds for a new border force.
- \$3.4 billion for a cost-of-living adjustment for Teacher Retirement System (TRS) retirees and \$1.6 billion for one-time supplemental payments to certain TRS retirees.
- \$1.8 billion for an across-the-board pay raise for state employees of 5% increase in annual state employee salaries, with a minimum \$3,000 annual increase, in SFY 2024 and again in SFY 2025.
- \$1.4 billion for school safety measures.
- \$691 million for community college finance reform, including additional formula funding, grants for regional and statewide workforce needs, and additional financial aid.
- \$351.9 million to enhance the economic growth of Texas.

HOUSE BILL
1

HOUSE BILL

1

GENERAL APPROPRIATIONS

- \$3 billion, if approved by voters, for a new endowment to fund non-flagship universities trying to improve their research operations and rise in national rankings.
- \$18 million opioid overdose prevention, education, and overdose reversal medication.

While HB 1 committed \$17.6 billion toward property tax relief, the enabling legislation did not pass, and the Legislature must determine the type of property tax relief to provide in a Special Session.

Funding included in HB 1 specifically for health care programs of interest:

- \$80.8 billion in all funds was appropriated across all three health and human services agencies for Medicaid, including increased pay for attendant care and \$206.8 million to increase rates for pediatric services, women's health related surgeries, private duty nursing, and ground ambulances. Rural hospitals also were addressed with an increase of \$178.2 million.
- \$447.2 million in all funds for women's health programs, an increase of \$160.1 million over current spending.
- \$30.6 million for Kidney Health Care to improve access to health care by providing a source of limited benefits for eligible Texas residents with end-stage renal disease (ESRD) or residents who have had a kidney transplant.
- \$507.2 million for HIV and STD Prevention providing needed medications and services to persons living with HIV/AIDS. HIV medications keep viral loads suppressed, which in turn reduces the likelihood of transmitting the virus.
- \$5.6 million is provided for the Alzheimer's Disease Program to address public awareness, implementation of a state plan, coordination with other state agencies and institutions of higher education, contracts for direct caregiver support, and promoting early detection and diagnosis. This funding is directed through Rider 31 of the appropriation to the Department of State Health Services (DSHS).

HB 1 also includes directives to each state agency, referred to as riders, that provide additional direction for how spending funds should be conducted. THBI worked to ensure that Art. II Rider 152, which requires HHSC to continue to maintain a clear process for including approved prescription drugs on the Texas Drug Code Index, was included in the final budget. This requires all newly approved drugs to be approved as a Medicaid benefit within 90 days, ensuring patients have access to these new innovations as soon as possible.

Other riders passed in the budget include the traditional "cost containment rider" which requires the Health and Human Services Commission to implement \$450 million in savings through innovation, fraud reduction, and other means in the next biennium, and riders requiring a study of opioid-related expenditures, a pilot project for colorectal cancer, and directions for spending in the DSHS HIV Medication Program and for Alzheimer's services.

HB 1 goes into effect on September 1, 2023.

USEFUL RESOURCES

General Appropriations Act, SFY 2024-2025

[Highlights of House Bill 1](#)

[Full text of House Bill 1](#)

Supplemental Appropriations Bill, SFY 2023

[Highlights of Senate Bill 30](#)

[Full text of Senate Bill 30](#)





1.1M SF Innovation Science Megacampus

Find Your Highpoint

Highpoint 2222 is transforming the way Austin does business by giving you complete control over your space.

Scan to Visit Website



IMPROVING ECONOMIC DEVELOPMENT

01

Economic development programs in Texas operate at both the state and local levels. At the state level, the [Governor's Office of Economic Development and Tourism \(EDT\)](#) is responsible for operating programs that provide incentives and programming to support businesses. [The Texas Economic Development Corporation](#) is a non-profit organization that works alongside the EDT to attract businesses to Texas.

The local economic development incentive programs are operated by cities, counties, school districts and other types of districts that operate and have taxing authority in each region. The State of Texas often provides support to these programs, and they work in tandem to develop attractive incentive packages to attract new business to Texas.

The Secretary of State (SOS), the Comptroller of Public Accounts (CPA), and the [Texas Workforce Commission \(TWC\)](#) are all state agencies that have oversight and regulatory authority over Texas businesses. The [TWC also partners](#) with the Texas Education Agency (TEA) and Texas Higher Education Coordinating Board (THECB) to develop strong policies and programming to grow a strong workforce with the skills necessary for Texas businesses.

For life science and biotech companies to thrive in Texas, the economic development environment, regulatory burdens, and workforce policies must be designed to promote and support the growth of those businesses. THBI supports legislation that achieves these goals.

For the life science and biotech industry, the most significant victory this session was the passage of SB 2289 and SJR 87 which, if approved by voters in November, will create a new property tax exemption for tangible personal property that is used or produced by medical and biomedical manufacturers, such as medical devices, pharmaceuticals, and personal protective equipment. Under the bill, medical and biomedical manufacturers will continue to pay all other applicable taxes including real property taxes, margins tax, unemployment taxes, sales taxes, and all existing tax agreement requirements. However, the bill levels the playing field for Texas medical and biomedical manufacturers and ensures the long-term viability of Texas' medical supply chain.

Unfortunately, the Legislature did not pass HB 2466 which THBI developed with Sen. Royce West and Rep. Angie Chen Button to create the Texas Technology and Innovation Program. This program would have provided matching grants to Texas-based companies who receive and complete a federal SBIR or STTR grant. While THBI was able to garner the support of over 18 business groups and organizations, the funding was not made available for the program, resulting in the bill not passing. It is not unusual for a new state program to require more than one legislative session to pass and THBI has secured commitments from the sponsors to make this initiative a priority throughout the interim and into the next legislative session.



GENDER MODIFICATION

A tremendous amount of controversy surrounded the passage of SB 14, which prohibits minors from receiving health care services related to gender modification. Contained within the bill is a provision that all businesses and organizations need to have awareness of. Health & Safety Code Section 161.704 prohibits the use of public money from being used, directly or indirectly, for any entity, organization, or individual that provides or facilitates the provision of a procedure or treatment to a child that is prohibited under the act. Due to the scope and breath of this prohibition, and of the enforcement authority granted to the Attorney General, any entity that receives any funds that could be considered public funds, should maintain awareness regarding any activity that could be perceived as being related to these services.

ECONOMIC DEVELOPMENT PROGRAMS

The 88th Texas Legislature put significant effort into improving economic development opportunities for the State of Texas. They passed HB 1515, the Sunset Bill continuing the operation of the Governor's Office of Economic Development and Tourism. They also created a new program to create incentives to attract businesses to Texas communities. HB 5, the Texas Jobs, Energy, Technology, and Innovation Act, creates an incentive program to provide temporary and limited incentives for certain eligible projects, including local school property tax reductions and establishing new standards for the projects along with new accountability requirements.

IMPROVING TEXAS WORKFORCE

Several measures passed that focused on improving the Texas Workforce Commission (TWC) and its role in developing the state's workforce. HB 1703 requires the TWC to modernize the data currently collected to evaluate the different workforce programs to provide a more valuable assessment of the effectiveness of the programs. SB 2315 creates a taskforce to study whether it would be effective to combine social services programs currently operated by the Health and Human Services Commission (HHSC) into the TWC to create a stronger focus for those programs on workforce training and participation. The bill is designed to give state lawmakers a better understanding of the cost, benefits, and other challenges related to this type of merger. While federal law currently prohibits this combination of programs, efforts exist to end that federal restriction; the Legislature passed SCR 26 to indicate support for that effort.

In a significant step toward improving workforce preparation, the Legislature passed HB 8 which redefines the financing and quality of services at state community colleges. Under HB 8, Texas community colleges will move to a performance-based financing system that rewards graduation or transfer to a four-year institution rather than the current formula, which is based on the number of classroom hours for students. The bill is the result of a two-year study by a commission of lawmakers

and community college presidents. The bill also includes new programs to provide scholarships and grants for students. HB 8 lays out a road map for the Texas Higher Education Coordinating Board to implement the new funding system, but it would require the state agency to determine specifics, such as the new formulas to calculate how much money each college would receive. As the bill is written, the state agency has until September 1, 2023, to put the new system in place.

Another step the Legislature made towards improving the preparation of Texas workers is HB 4451, which requires the TWC to work with the state's 28 local workforce development boards to determine the availability of apprenticeships in high-growth professions and to issue a report to create greater awareness around the availability of apprenticeships. HB 1755 seeks to improve the skill level in the workforce by creating the Lone Star Workforce of the Future Fund, which will fund qualifying workforce training programs to provide Texans with the opportunity to be trained and equipped with the skills necessary to obtain sustaining, full-time employment.

Two bills were considered that would greatly increase the authority of the Attorney General to sue businesses under federal anti-trust laws. This new cause of action (HB 5232) and the subsequent increase in available penalties related to possible violations (HB 5214) were opposed by all major business groups and THBI. HB 5214 failed to pass, although HB 5232 became law. Another significant change in law that will impact all Texas businesses is the passage of HB 19, which creates a specialized business trial court system. The bill defines and outlines the jurisdictional parameters of the court, the qualifications for the judges that will be appointed by the Governor, the judicial regions, and all other administrative requirements of the courts. As implementation occurs over the next two years, Texas businesses' legal matters will transition to these new courts.

IMPROVING ECONOMIC DEVELOPMENT BILL SUMMARIES

SB 2289 & SJR 87

Sen. Huffman
Rep. Bonnen

Creates, upon approval by Texas voters in November, a new property tax exemption for certain inventory held by a manufacturer of medical or biomedical products as a finished good or used in the manufacturing or processing of medical or biomedical products.

HB 1515

Rep. Clardy
Sen. Springer

Continues the Texas Economic Development and Tourism Office until September 1, 2035.

HB 5

Rep. Hunter
Sen. Schwertner

Known as the Texas Jobs, Energy, Technology, and Innovation Act, creates a new incentive program to provide temporary and limited incentives for certain eligible projects. New eligibility requirements, reporting requirements, and accountability provisions are included.

HB 1703

Rep. Ordaz
Sen. Blanco

Updates the data collected by the Texas Workforce Commission used to evaluate the job placement performance of each workforce development program and creates a pilot program in the Borderplex area for workforce development.

SB 2315

Sen. Hughes
Rep. Clardy

Creates a taskforce to develop a plan for the consolidation of the functions of workforce development programs administered by the Texas Workforce Commission and social services programs administered by the Health and Human Services Commission to be ready when federal law allows the consolidation of safety net programs in Texas.

SCR 26

Sen. Hughes
Rep. Clardy

Urges Congress to amend federal law to allow states to consolidate federally funded workforce development services with federally funded social safety net services.

HB 8

Rep. VanDeaver
Sen. Creighton

Improves the quality of and reforms the financing for the state's community college system; creates the Financial Aid for Swift Transfer program, revises the public community and junior college funding formulas based on outcomes, allows for the establishment of an institutional collaboration center, and makes additional reforms to increase the graduation rates and successful transfers for community college students.

HB 4451

Rep. Bhojani
Sen. Flores

Requires the Texas Workforce Commission to issue a report outlining available apprenticeship programs for high-demand occupations and make recommendations to expand the availability of apprenticeship programs in emerging and high-demand industries each year.

HB 1755

Rep. Button
Sen. Alvarado

Establishes the Lone Star Workforce of the Future Fund Grant Program under the Texas Workforce Commission to provide grants to public junior colleges, public technical institutes, and nonprofits that apply to the commission and satisfy certain eligibility requirements.

HB 5232

Rep. Spiller
Sen. Hughes

Expands the authority of the Texas Attorney General to pursue antitrust enforcement actions under the Texas Free Enterprise and Antitrust Act of 1983.

HB 19

Rep. Murr
Sen. Hughes

Creates a specialized business trial court appointed by the Governor, defines the assignment of business court judges to align with the state's Administrative Judicial Regions, and sets up specific jurisdictional parameters for the court. The intent is to streamline resolutions of business disputes, and ensure the court is staffed by qualified and skilled judges, ideally giving businesses confidence in Texas' legal system, and encouraging them to incorporate and headquarter in Texas.

IN MEMORIAM

HB 2466 would have created the Texas Technology Innovation Program in the Governor's Office of Economic Development and Tourism to provide companies headquartered in Texas that receive grants or contracts under either Phase I or Phase II of the federal Small Business Innovation Research (SBIR) or Small Business Technology Transfer (STTR) programs with an additional state matching grant. THBI will be working with our sponsors and stakeholders to prepare to file the bill again in the next legislative session.

102 EXPANDING AND PROTECTING PATIENT ACCESS

The life science and biotech industry creates new innovations in therapies, treatments, patient care, and wellness. For those innovations to have the greatest impact, patients need to be able to access them. Texas patients face many barriers in accessing these new and innovative treatments, therapies, and other health care services. Primary among those barriers is a lack of health insurance coverage, but even those with coverage face strict and often secret restrictions and administrative burdens that make it impossible to gain access to what they need. In response to those challenges, many Texas patients organize and develop their own patient advocate groups to create networks that support patients in their struggles accessing medications and services. THBI partners with patient advocate groups to help decrease the barriers they face. To that end, THBI worked to support bills that created coverage protections, decreased administrative hassle and out-of-pocket costs for patients, and expanded access to health care services for the uninsured.

IMPROVING MEDICAID AND MATERNAL HEALTH

This session, the Legislature took steps to expand eligibility for Medicaid and to improve the care that Texas mothers receive following pregnancy. Currently in Texas, qualifying pregnant women receive 60 additional days of coverage postpartum. HB 12 expands that to one full year. Many studies have shown that the most dangerous period for maternal health is in the first year following birth, and HB 12 goes a long way in improving maternal health and safety in Texas. The Legislature also sought to improve the care and services for women in state programs

by passing HB 1575, which requires the Health and Human Services Commission to adopt standardized assessment questions to screen for, identify, and aggregate data regarding the nonmedical health-related needs of pregnant women eligible for Medicaid and the Alternatives to Abortion program.

Two other bills passed that will help ensure that Texans enrolled in Medicaid have an accessible and effective drug benefit. HB 1283 and HB 3286 work together to help protect patients in Medicaid maintain fair and effective access to their medications by maintaining the current state-operated drug formulary and creating new rules and requirements to ease patient access to medications when there is a drug shortage or a newly approved drug on the market.

IMPROVING PATIENT ACCESS TO MEDICATIONS

Even for those who have insurance, there are still many barriers to getting effective and affordable health services. Fortunately, the Legislature put a strong focus on increasing access to prescription drug benefits. HB 999 provides protections to patients using coupons or discounts to purchase drugs through their insurance. SB 622 furthers the goals of that bill by requiring health plans to provide information about the coverage, benefits, and options at the time a prescription is being requested, so that the patient and their provider can choose the best option before writing or receiving a prescription. HB 1647 limits a health plan's ability to restrict access to clinician-administered drugs. These complex drugs are administered by a provider, often through an injection or infusion, and health plans may require the use of a specialty

pharmacy, often owned by that plan, to access the drugs. This creates additional costs and administrative requirements to access these drugs. HB 1647 puts restrictions on this practice and helps ensure greater access to needed medications.

HB 755 is also designed to increase patient access to medications. Health plans utilize prior authorizations to require physicians to obtain approval of the medical necessity and appropriateness of a health care service before it is provided. This process can lead to a delay of much-needed care and, at times, may result in a denial of a particular course of treatment altogether. HB 755 prohibits an insurer from requiring prior authorization for drugs prescribed to treat autoimmune diseases, hemophilia, or Von Willebrand disease more than once annually. These protections help ensure these patients maintain medication adherence without overly burdensome administrative requirements.

HB 1337 establishes protections to help individuals with serious mental illness who have stabilized on a particular therapy protocol by permitting them to remain on that protocol if they change health plans or get new insurance. This increases medication adherence and decreases the

administrative burdens and costs for those patients.

HB 916 requires health plans to provide a full year of prescription contraceptives at one time, rather than one month at a time. These bills make great strides toward ensuring those with health insurance have access to medications without barriers or unnecessary costs.

For patients who are facing chronic diseases with limited treatment options, SB 773 permits the use of investigational drugs, biological products, and devices for patients who, in consultation with their physician, have considered all other approved treatment options and determined they are unavailable or unlikely to provide relief. These treatments and therapies, which may still be in the early stages of the FDA approval process, may be the only opportunity for these patients to seek relief. This bill was amended at THBI's request to clarify when investigational drugs must be provided.



BIO Business Solutions®, the largest cost-savings program for the life sciences industry, is FREE with your company's membership in BIO or participating state or regional life science associations. Receiving savings from our lab and office partners is incredibly simple. We've already vetted the suppliers and negotiated discounted pricing and favorable end-user agreements.



Lab Supplies & Equip.
up to 75% off



Regulatory & Professional Services
10% off



Human Capital Solutions
7.5-10% discount



Premium Refurb. Lab Equip.
minimum 15% off



Audit & Compliance Software
10-15% off

CHUBB® P2C, Clinical Trial, Cyber Insurance
10% premium credit



Packaged & Bulk Gases
up to 25% off



Workwear & Cleanroom Services
30-50% off



Small Group Health Insurance
competitive premiums



Corporate Credit Card Services
bonus points & waived fees



Payroll, Benefits & HR
up to 25% & waived fees



Office Supplies from formerly Office Depot
up to 75% off



Environmental Services
up to 40% off



R&D Tax Credit Services
20% off & free initial assessment



Secure Document Sharing
minimum 25% off



Microscope Systems
15% off



Executive Liability Insurance
competitive premiums



Moving & Storage
up to 65% off



Shipping
up to 74% off

IMPROVING PATIENT CARE

Patients with insurance may also have trouble accessing other health care services beyond prescription benefits. THBI partnered with the American Cancer Society-Cancer Action Network to help pass SB 989, which ensures that insured patients can access certain biomarker tests necessary to define the most effective course of treatment. A biomarker test is a medical test of any biological aspect of a person that provides key information to help define the most effective treatments designed to work with that patients' biology and thereby increasing their chances of recovery.

In a growing number of cases, individuals with insurance are choosing to use health care services that are out of network or not covered because those services cost less through the alternative route than they would using their insurance coverage. However, when services are purchased this way, the funds don't count toward the deductibles established for the health plan. HB 2002 will allow any out-of-pocket cash payments made for medically necessary services and supplies to be credited toward their deductible and maximum out-of-pocket expenses.

DECREASING ADMINISTRATIVE HASSLE FOR PATIENTS

Increasing transparency regarding the price of health care services was a high priority for this Legislature and SB 490 seeks to address that concern. Medical bills are already complicated enough, but many medical providers still give customers a bill with a single "balance due" notation without fully disclosing the services rendered and their corresponding charges. SB 490 requires providers to include an itemized bill which is a crucial patient protection measure that allows patients to be aware of the charges they are receiving and enables them to check that the bill is accurate. Previously, patients were legally entitled to an itemized bill upon request, but SB 490 requires health care

providers to issue an itemized bill prior to or at the same time as attempting to collect payment from the patient after providing a health care service.

Every session, there are bills filed that seek to change the way that insurance companies and health plans provide benefits. These bills often look to hold the health plan accountable for the services that are covered under the contract and to decrease the invisible barriers that block patients' access to care. A primary restriction on the use of health benefits is caused by restrictive networks authorized by a health plan. HB 711 prohibits a plan or provider from signing contracts with clauses that restrict competition. This means that providers will have greater flexibility to participate in multiple networks and see a broader variety of patients. HB 3359 expands on this work by establishing network adequacy requirements in law for preferred provider networks. The Texas Department of Insurance (TDI) will develop enforcement standards for these requirements, designed to provide patients with more timely access to care within the plan's network. An additional bill to address challenges accessing in-network providers, HB 1592 expands current balance billing prohibitions and out-of-network dispute resolution procedures to more Texans by applying those requirements to self-insured or self-funded employee welfare benefit plans.

Two additional bills passed that are designed to decrease the administrative burdens for patients. HB 4500 requires health plans to maintain and make available a secure web-based system that allows a health care provider at a hospital or freestanding emergency medical care facility to determine coverage status at any time. SB 1051 requires TDI to develop a standardized form and process for coordinating benefit coverage for persons with multiple sources of insurance. Unfortunately, Governor Abbott vetoed SB 1051 stating that this measure was not as important as property tax reductions.



EXPANDING AND PROTECTING PATIENT ACCESS BILL SUMMARIES

HB 12

Rep. Rose
Sen. Kolkhorst

Extends the coverage for pregnant women in Medicaid from 60 days to twelve months after the end of pregnancy. The Health and Human Services Commission must submit a State Plan Amendment for the Centers for Medicare and Medicaid for approval prior to implementation.

HB 1575

Rep. Hull
Sen. Kolkhorst

Enhances the screening process for pregnant women who are eligible for public benefit programs managed by the Health and Human Services Commission. The enhanced process is targeted to better identify nonmedical health-related needs that could impact birth and maternal health outcomes, and report back to the Legislature on additional needs. The bill also allows for community health workers and doulas to be reimbursed for services shown to improve maternal and infant health outcomes, as well as those that increase self-sufficiency.

HB 1283

Rep. Oliverson
Sen. Hughes

Maintains the current Texas Medicaid single formulary by extending the Sunset provision currently in law from August 31, 2023, to August 31, 2033. This extension ensures that Medicaid managed care organizations must continue to use the state's vendor drug program formulary, preferred drug list, and prior authorization procedures. By ensuring consistency across managed care plans, patients and their healthcare providers can better understand what drugs are covered and the process to get them.

HB 3286

Rep. Klick
Sen. Hancock

Reflects negotiations with the health plans regarding the continuation of the state single formulary, and allows certain exceptions to the Preferred Drug List, includes additional representation for Medicaid managed care organizations on the Drug Utilization Review Board, grants temporary non-preferred status to new drugs that have not been reviewed by the Drug Utilization Review Board, and adds all therapeutic equivalents for a generic preferred drug and all drugs on the federal Medicaid Drug Rebate Program to the Preferred Drug List.

HB 999

Rep. Price
Sen. Schwertner

Known as the co-pay accumulator bill, requires health benefit plans to apply any discounts, coupons, or other financial assistance to a patient's deductible, copayment, cost-sharing, or out-of-pocket expenses for certain prescription drugs that the health benefit plan covers. The provisions apply to drugs that do not have a generic or biologically similar product.

SB 622

Sen. Parker
Rep. Smithee

Aims to mitigate surprise costs at the pharmacy by requiring health benefit plan issuers to provide specific pricing information for prescription drugs to an enrollee or their prescribing provider upon requests. When providers and patients understand the financial impact a drug might have on them, they are able to work together to find a treatment plan that best fits the patient's current situation.

HB 1647

Rep. Harris
Sen. Schwertner

Known as the "white bagging" bill, seeks to protect patient choice and safety and the patient-physician relationship by prohibiting issuers of certain health plans from imposing certain limitations relating to coverage of clinician-administered drugs under certain circumstances for patients with chronic, complex, rare, and life-threatening medical conditions.

DRUG IMPORTATION

Following in the footsteps of Florida and Colorado, the Texas Legislature nearly unanimously passed HB 25, authorizing the importation of drugs from Canada. HB 25 creates a wholesale prescription drug importation program for consumers in Texas to be implemented by the Health and Human Services Commission. While the bill requires consumer protections to ensure the quality of the drugs purchased, Canada does not have a track-and-trace system like the United States, potentially increasing the risk of unsafe medicines. The measure faces significant challenges related to implementation, including a prescription drug shortage in Canada, which makes it unlikely for them to be willing to export prescription drugs to the United States. THBI will monitor the implementation and provide updates as developments occur.

EXPANDING AND PROTECTING PATIENT ACCESS BILL SUMMARIES

HB 755

Rep. Johnson
Sen. Menéndez

Prohibits an insurance company from requiring prior authorization for drugs prescribed to treat an autoimmune disease, hemophilia, or Von Willebrand disease more than once a year. There are exceptions to the law, including opioids, drugs with an FDA boxed warning, and drugs that typically have a treatment period of less than 12 months. This bill lowers the barrier to care for those who struggle with chronic illnesses.

HB 1337

Rep. Hull
Sen. Menendez

Protects consumers by limiting health plans' use of step therapy protocols when determining coverage of a prescription drug prescribed to an enrollee aged 18 or older to treat a serious mental illness that is already stable on a drug that is not on the formulary.

HB 916

Rep. Ordaz
Sen. Paxton

Requires health plans to provide coverage for a twelve-month supply of prescription contraceptive drugs at a time after covering an initial three-month supply.

SB 773

Sen. Parker
Rep. Toth

Known as the "right to try" bill, expands access to investigational medications for those suffering from severe chronic illness by allowing them to qualify for experimental treatments that are not yet approved by the FDA, but that may provide relief for their current illness. These provisions are similar to those passed previously in Texas for individuals suffering from terminal illness. THBI worked with the authors to clarify when a manufacturer is required to provide access to certain investigational drugs, biological products, and devices when they are still in the clinical trial stage.

SB 989

Sen. Huffman
Rep. Bonnen

Requires health benefit plans to provide coverage for biomarker testing when the test is supported by medical and scientific evidence and provides clinical utility, in a manner that limits disruptions in care, including minimizing the number of biopsies and biospecimen samples needed. The provisions of this bill apply to certain health care plans offered across the state, including those offered by the Employees Retirement System and Teacher Retirement System.

HB 2002

Rep. Oliverson
Sen. Hancock

Allows any out-of-pocket cash payment made by an individual for a medically necessary service or supplies to be credited towards their deductible and maximum out-of-pocket expenses. By allowing these payments to be credited, it increases health care affordability and access and improves patient satisfaction.

SB 490

Sen. Hughes
Rep. Harris

Requires healthcare providers to issue an itemized bill prior to, or in conjunction with, attempting to collect payment after providing a service or related supply to a patient. The goal is to increase health care transparency for patients and ensure they are able to verify the services billed for were accurately provided.

HB 711

Rep. Frank
Sen. Kolkhorst

Aims to address rising healthcare costs due to consolidation in the insurance market by guaranteeing market competition through contractual requirements. The bill prohibits insurance companies and providers from entering provider network contracts with anti-competitive clauses.

HB 3359

Rep. Bonnen
Sen. Schwertner

Codifies measurable network adequacy standards for preferred provider benefit plans and requires the plans to meet these standards prior to offering the networks. The bill came about because the Texas Department of Insurance had previously testified that 90% of health plans offered in Texas were granted waivers because they did not meet current network adequacy standards.

HB 1592

Rep. Oliverson
Sen. Hancock

Builds on existing protections from surprise billing laws by allowing self-funded health insurance plans to opt into the Texas law rather than the federal No Surprises Act. The goal is to provide a choice to plan sponsors and employers when deciding which law they would prefer to be regulated by to protect employees from surprise medical billing.

EXPANDING AND PROTECTING PATIENT ACCESS BILL SUMMARIES

HB 4500

Rep. Harris
Sen. Hughes

Requires insurance companies to provide a secure web-based system for a physician or health care provider at a hospital or freestanding emergency medical care facility to determine at any time if the patient is covered by the insurance plan and what the deductible, copayment, or coinsurance for which the patient would be responsible for, to help minimize surprise costs for patients receiving care.

SB 1051 - VETOED

Sen. Hughes
Rep. Harris

Would have required the Texas Department of Insurance to adopt rules to establish a uniform coordination of benefits questionnaire to be used by all health benefit plan issuers in Texas to help reduce hassle and errors when coordinating with various forms for insurance carriers and plans, minimizing the chances of a patient receiving a surprise bill.

IN MEMORIAM

Just before session began, THBI learned that the organization representing health plans was preparing to file legislation that would create a process whereby a bill filed in the Legislature could be submitted to the All-Payer Claims Database team to be analyzed to determine the cost implication of the bill. Bills like SB 1581 have been passed in many other states and are designed to give the health plans an advantage in the legislative process. The analysis is often one-sided and incomplete, ignoring both the cost avoidance impact of a proposal and the benefit the proposal would have on the health and success of recovery for the patient. THBI requested many amendments to the proposal that were not accepted and then worked with other stakeholders to oppose the legislation, which ultimately did not pass.



TEXAS STATE UNIVERSITY'S ROUND ROCK CAMPUS

is poised to be the next epicenter of the life-sciences industry in the Austin Metro Area with the development of a life-sciences business incubator, complemented by academic and research programming and a workforce ready to engage.



TEXAS STATE
UNIVERSITY
ROUND ROCK CAMPUS

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

03

EXPANDING AND PROTECTING RESEARCH AND COMMERCIALIZATION

At the foundation of nearly every aspect of the life science and biotech industry is innovation. Every product, therapy, and treatment, even the processes that create them, always starts with some kind of research, and that research must become a product, and that product must get to market. For new medications, that means traversing a ten-year, \$2.5 billion product development cycle. Raising funds, meeting deadlines and regulatory requirements, finding the right partnerships, and developing the strategies to make it is a grueling process familiar to the entire life science industry. The state's business environment, taxes, and regulations all contribute to whether a product is successful, but the state must provide support, resources, and infrastructure to perform research. Many bills this session sought to both grow and limit research in this state. Fortunately, THBI and many of our members, partners, and stakeholders were successful in both supporting efforts to improve research in the state and to stop the passage of bills that would have prohibited some types of research.

Unfortunately, one initiative that was not successful was HB 15 and HJR 135, which would have created the Mental Health and Brain Research Institute of Texas. The bill was identified as a Speaker priority early in the session and over 40 individuals and organizations supported the bill during the House Committee hearing. However, the Lieutenant Governor refused to refer the bill to committee once received in the Senate as a way to indicate his opposition to the measure, ultimately killing the bill.

IMPACTING RESEARCH OPPORTUNITIES IN HIGHER EDUCATION

Research happens in many settings: in institutions of higher education, in private research groups, and in private

companies. This session, the Legislature was focused on increasing research resources at public institutions of higher education. HB 1590 creates the Texas Leaders Scholarship Fund, which includes a research scholarship program for certain graduate students enrolled in doctoral programs at Texas public universities and is available to economically disadvantaged doctoral students who graduated from a Texas high school or institution of higher education. Taking an additional step forward, HB 1595 and its enabling resolution HJR 3 create the Texas University Fund to provide funding dedicated to four state universities becoming emerging research universities and achieving national prominence as major research universities. Texas State University, Texas Tech University, the University of Houston, and the University of North Texas will be the initial institutions eligible to use the funding. The bill requires the passage of a constitutional amendment by voters in November to become law.

Two additional high-profile bills made it through the legislative process, generating controversy and significant discussion around current practices at state institutions of higher education. SB 17 and SB 18, when originally filed, would have banned diversity, equity, and inclusion (DEI) programs and the use of tenure at public universities, respectively. SB 17, as passed, states that universities cannot, except as required by federal law, create diversity offices, hire employees to conduct DEI work, or require any DEI training as a condition for being hired by or admitted to the university. Language was included that if a federal granting agency or accreditation agency requires DEI programs, a Texas university or employee can submit a statement that highlights the school's work helping first-generation college students, low-income students, or underserved student populations. The requirements must be

implemented by January 1, 2024. SB 18, as passed, looked significantly different than the filed bill. In the end, lawmakers advanced legislation that would not ban tenure programs but codifies the century-old practice into law, including provisions to make it easier for institutions to revoke the designation from individual professors. It is unclear what impact these two bills will have on Texas' higher education institutions. Many opponents claim that their passage will put at risk eligibility for federal grants that require DEI programs and recruitment efforts for highly skilled researchers. THBI will monitor this activity and work to promote Texas' significant research support environment.

REGULATING THE USE OF DATA

One of the most important aspects of research is the proper care and handling of data. Data is the number one resource in research and there are state, federal, and even international regulations related to the handling of data. Lawmakers considered several bills related to consent requirements, storage, and privacy protections for both personal data and research-related data. Primary among those bills was HB 4, establishing the Texas Data Privacy and Security Act. The product of several sessions of study and debate, the bill aims to regulate the collection, use, processing, and treatment of consumers' personal data by certain business entities. Modeled after the Virginia Consumer Data Protection Act, the bill grants consumers various rights over their personal data, such as the right to access, correct, delete, and obtain a copy of their data. It imposes obligations on businesses regarding data protection, transparency, and accountability, and sets forth requirements for third-party data sharing and contractual obligations. The bill includes exemptions requested by THBI and other stakeholders to exempt an entity already covered by the federal Health Portability and Accountability Act (HIPAA).

HB 18 also took up the issue of privacy but focusing on minors, establishing the Securing Children Online through Parental Empowerment (SCOPE) Act. The bill prohibits a digital

service provider (DSP) from entering into an agreement with a known minor without the consent of a parent or guardian, and requires a DSP to provide in those agreements the ability for the parent or guardian to permanently enable certain settings. SB 2105 creates a comprehensive framework in the Texas Business and Commerce Code to regulate data brokers and empower Texans to control the collection and sale of their personal information to these entities. HB 2545 also addresses the issue of personal information, but specifically an individual's genetic data. Aimed at companies that do personal genetic testing, HB 2545 establishes a legal framework for the security and use of genetic data and biological samples. The bill includes a similar exemption for entities already covered by HIPAA, as well as an exemption for health care providers.

On the opposite end of the data spectrum, HB 3414 looks to make more data available. The All-Payor Claims Database (APCD) is a database of health care claims files created in the 87th Legislative Session. All "payers" (mostly insurance companies) that are subject to Texas law must submit claims forms to the database. The APCD is administered by the UT Health Science Center at Houston and the UTHealth School of Public Health and overseen by the Texas Department of Insurance. The data within it is fully de-identified, meaning that patient privacy is always fully protected. While the data that is collected is excellent, researchers face severe restrictions on what they can publish, which limits the APCD from reaching its full potential. HB 3414 allows access to the data, specifies how entities qualify to access the data, and includes what data is shareable in its aggregated form.

By expanding access to scholarships for research graduate students and putting focus on expanding research projects across the state university system, the Legislature expressed a commitment to growing innovation in Texas.

REGULATING THE USE OF AI

HB 2060 establishes the Artificial Intelligence Advisory Council to study and monitor the use of AI systems by state agencies in Texas. The council, composed of legislators, industry experts, and certain state agency executives, is tasked with assessing the need for a state code of ethics for AI systems in state government, making recommendations for administrative actions that state agencies can take without further legislative authorization, and making recommendations for the 89th Texas Legislature. The bill also requires an inventory report of any automated decision systems that include information about the algorithms, data-based analytics, machine learning or other AI techniques, used to make or support governmental decisions, judgments, or conclusions. The council will review these reports, assess their impact on the liberty, finances, livelihood, and privacy interests of Texas residents, and make recommendations to the Legislature by December 1, 2024.

RESEARCH AND COMMERCIALIZATION BILL SUMMARIES

HB 1590

Rep. Plesa
Sen. West

Creates the Texas Leadership Scholars Program, a merit-based scholarship and leadership opportunity program for high-achieving, emerging leaders with financial need to be administered by the Texas Higher Education Coordinating Board. The program provides Texas public high school graduates who qualify for automatic admission and are economically disadvantaged to receive financial assistance at a Texas institution; it also includes funding for a research scholarship for eligible graduate students.

HB 1595 & HJR 3

Rep. Bonnen
Sen. Huffman

Upon passage of a statewide constitutional amendment, redesignates the National Research University Fund as the Texas University Fund to provide additional funding to Texas State University, Texas Tech University, the University of Houston, and the University of North Texas. The fund will support these institutions' efforts to achieve national prominence as major research universities, known as Tier 1 status, and help drive the Texas economy.

SB 17

Sen. Creighton
Rep. Kuempel

Prohibits institutions of higher education from establishing or maintaining DEI offices, officers, employees, or contractors that perform the duties of a DEI office. Implementation is required by January 1, 2024.

SB 18

Sen. Creighton
Rep. Kuempel

Codifies tenure in state law and requires university governing boards to ensure they have clear guidelines to grant tenure and conduct regular performance reviews for those who earn it, something that Texas university systems already have in place. By placing these requirements in statute, the bill establishes a mechanism for the Legislature to more closely regulate the practice in the future.

HB 4

Rep. Capriglione
Sen. Hughes

Known as the Texas Data Privacy and Security Act, addresses regulation of the collection, use, processing, and treatment of consumers' personal data by certain business entities. It provides consumers residing in Texas with certain rights regarding personal data, including the right to request confirmation of whether a controller is processing the consumer's personal data; the right to correct inaccuracies in personal data; the right to delete personal data provided by or obtained about the consumer; the right to obtain data (if feasible) in a portable, readily usable format so that the consumer may transmit it to another controller; and the right to opt out of the processing of personal data for purposes of targeted advertising, sale of personal data, or profiling "in furtherance of a decision that produces a legal or similarly significant effect."

HB 18

Rep. Slawson
Sen. Hughes

Requires digital service providers to obtain consent from parents and guardians before known minors could enter into certain agreements, gives digital service providers certain duties when providing services to minors, and allows parents and guardians to take certain actions regarding a minor's data.

SB 2105

Sen. Johnson
Rep. Holland

Outlines in the Texas Business and Commerce Code a framework for the use of personal and sensitive data by data brokers, who will be required to register with the Secretary of State and comply with these requirements. Penalties for violation include civil monetary penalties and other penalties provided under the Deceptive Trade Practice Act.

HB 2545

Rep. Capriglione
Sen. Johnson

Establishes protections for personal genetic data by holding genetic data testing companies accountable for how they use and secure genetic data and biological samples. It further ensures that Texans must be informed and in control of how their genetic data will be shared and prohibits the data from being shared with a governmental entity without a warrant. THBI and other stakeholders worked to get language in the bill to exempt clinical health care providers, like MD Anderson, from the definition of "direct-to-consumer" genetic testing company.

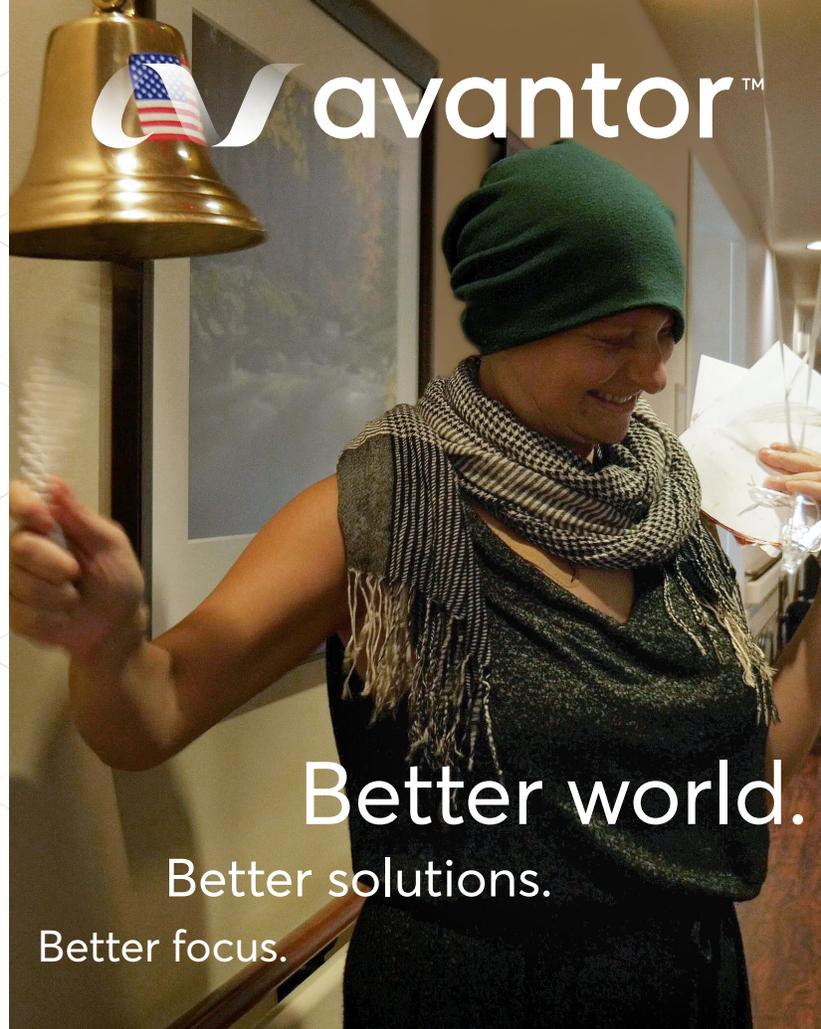
HB 3414

Rep. Oliverson
Sen. Hancock

Builds on previously passed legislation (HB 2090 from the 87th Legislative Session) and updates requirements for the All-Payer Claims Database operated by UT Health Science Center at Houston, the UTHealth School of Public Health, and the Texas Department of Insurance. It seeks to expand the utility of the database by expanding access to research entities, market participants, and market consultants to conduct research using the data. Specific and appropriate restrictions on access and use of data by each applicable entity are included.

IN MEMORIAM

While nationally there is a significant and thorough debate occurring on the importance of and safety issues related to “gain of function research of concern,” with SB 1583, the Texas Legislature decided to jump far out in front by proposing a full ban on any research considered to be “gain of function” related. The broad nature of the definitions and provisions in the bill would have shut down a significant amount of research related to the development of vaccines anti-viral, anti-fungal, and even certain kinds of cancer research. Working with a coalition of research institutions, THBI took the lead on negotiations with the bill’s author, which ultimately failed to find middle ground. Concerns with the possible impacts of the bill resulted in the bill not gaining enough votes to be passed out of the Senate.


avantor™


Better world.

Better solutions.

Better focus.



Join THBI and receive exclusive pricing on products and services. THBI members receive access to the BIO Business Solution purchasing program, the largest cost-savings program for the life sciences industry. To learn more about how to access these special savings and become a member, email us at info@thbi.com or call 512-708-8424.

Science has the power to change lives for the better.

Every day, from discovery to delivery, Avantor is an essential partner to the scientific community — pioneers, scientists, innovators and educators — relentlessly focusing on breakthroughs that help solve the world’s most complex challenges.

Our proven expertise and trusted portfolio of products and services, combined with a global reach and ability to provide customized materials of the highest quality for highly regulated applications move science forward.

As a global leader in life sciences, we fulfill our mission: to set science in motion to create a better world.

📍 Visit vwr.com or avantorsciences.com



IMPROVING HEALTH AND HEALTH PROGRAMS

04

THBI supports legislation designed to improve patient health and the programs that provide care to the uninsured and underinsured in Texas. This includes ensuring effective and equitable public health programs and emergency response efforts as well as fair and reasonable regulations.

IMPROVING DSHS PROGRAMS

This session, those efforts tended to focus on the programs at the Department of State Health Services (DSHS). Several initiatives passed to improve the services provided to these unique populations.

For individuals living with sickle cell disease, HB 181 established a registry to ensure that health care providers who are treating persons with sickle cell have complete and accurate information for more appropriate and effective care. Unfortunately, Governor Abbott vetoed HB 181 stating that the bill did not include enough privacy protections. To further improve care, HB 1488 requires the Health and Human Services Commission (HHSC) to take a more comprehensive look at all health care programs including Medicaid, and work to adopt national standards and initiatives to improve care

throughout the system. THBI supported both bills to improve the lives and care for people with sickle cell.

A key program at DSHS is the Newborn Screening Program. This program not only provides invaluable data to parents about the health and wellbeing of their newborn, but the program also provides the state with awareness around the incidents of rare diseases in Texas children. According to the National Institutes of Health, there are approximately 7,000 rare diseases affecting between 25 and 30 million Americans. This equates to 1 in 10 Americans. Because these diseases are often misdiagnosed or are difficult to diagnose, the Newborn Screening Program is an invaluable tool. HB 2478 makes improvements to the program, including an annual report and some expanded programming.

To stay in touch with the issues affecting different constituencies in the population, the state has established advisory committees within DSHS and HHSC that include public members with experience and expertise related to specific issues. The Legislature updated three of these committees this session. HB 852 updates the Texas Maternal Mortality and Morbidity Review Committee, HB 3808 makes

TEXAS PHARMACEUTICAL INITIATIVE

With the filing of HB 4990, the Legislature attempted to create the Texas Pharmaceutical Initiative, modeled after Mark Cuban Cost Plus Drug Company, to provide all state employees, retirees, university employees, retired teachers, and Medicaid and health program recipients with discounted prescription drugs. The original bill would have put the State of Texas in the business of manufacturing certain drugs and operating their own prescription drug program. After hearing concerns from many industries and the state agency responsible for implementing the initiative, the bill was dialed back significantly. The bill that passed establishes a governing board responsible for developing a business plan by October 1, 2024. The Legislature will consider whether the initiative can be successfully implemented and will have to pass legislation in the next session to continue the initiative beyond September 1, 2025.

changes to the Pediatric Acute-Onset Neuropsychiatric Syndrome Advisory Council, and HB 728 establishes the Statewide Interagency Aging Services Coordinating Council to develop a five-year aging services strategic plan, a biennial coordinated statewide interagency aging services expenditure proposal, and an annual inventory of state-funded interagency aging programs and services. THBI will track and monitor the activity of these advisory committees and provide industry input as needed throughout the deliberations.

ADDRESSING ADDICTION AND PUBLIC HEALTH

One issue related to improving health and health programs that was declared a priority by state leadership this session was addressing addiction to opioids and fentanyl. The Legislature approached the issue by comprehensively addressing supply, demand, treatment and increasing criminal penalties for related crimes. HB 6, a priority bill for the Speaker, improves law enforcement efforts related to the issue. HB 1 distributes funding received from the opioid lawsuit for treatment and services across the state and requires consolidated reporting of all expenditures and programming available related to abuse and misuse of opioids. HB 1357 and HB 4888 update requirements in Medicaid to ensure services are available, and SB 867 expands the use and presence of opioid antagonists at universities.

Several bills were introduced attempting to address concerns related to the state's response to the COVID-19 pandemic. Conservatives indicated concern that the state overreacted and that local governments acted outside their authority when shutting down businesses and implementing various mandates related to the response. SB 29 was the Lieutenant Governor's priority bill to address this concern. The bill prohibits a governmental entity, including a local government entity, an open-enrollment charter school, or a state or local government agency, from implementing mask or vaccine mandates or from closing down businesses during a pandemic. In HB 609, the Legislature granted legal immunity to all businesses that did not implement mask or vaccine mandates from any harm that might come to employees who work at that business. While these requirements are in statute related strictly to the COVID-19 pandemic, the precedent set for responding to a pandemic could have long-lasting impacts on a public health system. THBI will continue to support legislation that ensures the most effective state emergency response system.

Over 50 bills were filed attempting to make some changes to the way that the state provides, requires, and tracks vaccinations. There was significant debate over a variety of aspects of the system, including how to establish school vaccination requirements, who should be authorized to

provide vaccinations, how to improve the vaccination registry, and how to report adverse reactions to vaccines. THBI opposed most of those bills and worked diligently to develop alternative approaches where possible. Ultimately, only one of those bills passed, HB 44, which prohibits health care providers in Medicaid from discriminating against patients solely based on their vaccination status. Vaccinations are often misunderstood or specifically targeted by anti-vaccine stakeholders. Working with a variety of stakeholders and patient advocate groups is important to maintain this system responsibly.

UPDATING REGULATORY REQUIREMENTS

THBI works consistently to improve the regulation of the life science and biotech industry and its products. DSHS has regulatory authority over drug manufacturers in Texas and other programs such as the Medicaid program, and often establish regulatory requirements impacting THBI member companies. One package of bills focused on improving the regulation and availability of donated unused drugs. HB 4332, HB 4331, and HB 4166 seeks to increase the number and types of providers that can collect donated unused drugs, improve the safety of those drugs, and provide effective patient education about the use of those drugs. Another bill, SB 2173, creates the Controlled Substance Prescription Drug Safe Disposal Pilot Program, where pharmacies may apply for an onsite collection receptacle for consumer drug take-back. The bill seeks to expand drug take-back efforts and improve safety by removing unsafe drugs from private homes and provide for safe disposal of those drugs.

SB 241 requires insulin manufacturers whose drug appears on the Medicaid formulary, if a generic or biosimilar is not available, to submit a written verification to HHSC stating whether or not the unavailability of a generic or biosimilar insulin on the market is due to the manufacturer being engaged in market manipulation through "pay to delay" schemes, "evergreening," or patent manipulation either first hand or facilitating another entity to commit these actions.

IMPROVING HEALTH AND HEALTH PROGRAMS BILL SUMMARIES

HB 181 - VETOED

Rep. Johnson
Sen. West

Would have implemented a recommendation from the Sickle Cell Task Force to require the Department of State Health Services to create a sickle cell registry to provide data collection and surveillance throughout the lifespan of sickle cell patients to be used to improve the long-term care and treatment for persons with sickle cell disease.

HB 1488

Rep. Rose
Sen. Miles

A comprehensive reform bill designed to improve care for all persons with sickle cell disease, requires the Health and Human Services Commission to collaborate with the Sickle Cell Task Force to make improvements in care for those in the Medicaid managed care by promoting timely, evidence-informed health care services to enrollees diagnosed with sickle cell disease and ensure that services reflect national guidelines and protocols, as well as address sickle cell disease education for Medicaid providers to improve the diagnosis, treatment, and management of the disease. Additionally, the bill adds new members to the Sickle Cell Task Force, requires additional sickle cell disease awareness in public schools, and requires education regarding the disease to be provided in medical schools and graduate medical education programs.

HB 2478

Rep. Klick
Sen. Blanco

Requires DSHS to publish an annual report detailing plans and timelines for adding additional newborn screening tests to the panel, requires that facilities must test for congenital cytomegalovirus (CMV) when an infant does not pass the hearing screening, and expands the usage of the newborn screening preservation account to allow for DSHS to operate the testing lab seven days a week.

HB 852

Rep. Thierry
Sen. Kolkhorst

Expands the Texas Maternal Mortality and Morbidity Review committee from 15 to 21 members, specifically focusing on physicians practicing emergency care and cardiology and ensuring both urban and rural areas are represented.

HB 3808

Rep. Wilson
Sen. Flores

Expands the types of providers who are authorized to serve on the Pediatric Acute-Onset Neuropsychiatric Syndrome Advisory Council to ensure that qualified providers are able to serve, and the council is able to conduct business.

HB 728

Rep. Rose
Sen. Zaffirini

Creates a statewide interagency aging services coordinating council to develop a five-year statewide strategic plan submitted to HHSC's Executive Commissioner and the administrative heads of each of the eleven entities required to participate. Strategic plan updates are due each March and require the council to submit a plan to implement recommendations from the strategic plan. The strategic plan would coordinate aging services and programs to eliminate redundancy, replicate successful models for service coordination, ensure optimal service delivery, and collect data on results and effectiveness.

HB 6

Rep. Goldman
Sen. Huffman

Increases existing criminal penalties for the manufacturing or delivery of fentanyl, expands the conduct constituting murder, and creates two new criminal offenses involving the manufacturing or delivery of certain opioids. It also requires that the medical certification on a death certificate specifically notate if the cause of death is due to fentanyl toxicity.

HB 1357

Rep. Holland
Sen. Huffman

Removes a Sunset provision in statute that provides for reimbursement in Medicaid for medication-assisted opioid or substance abuse treatment, making that action state law.

HB 4888

Rep. Hefner
Sen. Perry

Requires that a Medicaid provider who performs non-opioid treatment services, including outpatient services and prescribing non-opioid treatments, be reimbursed separately under Medicaid for those services.

IMPROVING HEALTH AND HEALTH PROGRAMS BILL SUMMARIES

SB 867

Rep. West
Sen. Rose

Adds institutions of higher education to the list of institutions and individuals likely to be in a position to respond to an opioid overdose, and thus allowed to be provided opioid antagonists by the HHSC's Executive Commissioner as part of the opioid antagonist program.

SB 29

Sen. Birdwell
Rep. Lozano

Prohibits a governmental entity from implementing or enforcing a vaccine mandate, mask requirement, or private business or school closure to prevent the spread of COVID-19.

HB 609

Rep. Vasut
Sen. Middleton

Limits liability for business owners and operators for injury or death caused by the exposure of an individual to a pandemic disease if they choose not to require pandemic disease vaccination.

HB 44

Rep. Swanson
Sen. Middleton

Prohibits health care providers from discriminating against a patient solely because that patient chooses not to get immunized. This kind of prohibition will limit a provider's ability to protect any vulnerable populations in their offices from individuals who may have been exposed to or have communicable diseases.

HB 4332

Rep. Klick
Sen. Sparks

Seeks to increase access to affordable medication by authorizing providers who participate in the collection and redistribution of donated prescription drugs to dispense donated prescription drugs that are prepackaged in accordance with labeling and recordkeeping requirements.

HB 4331

Rep. Klick
Sen. Sparks

Expands the types of entities that can donate unused prescription drugs to a provider participating in the collection and redistribution of donated prescription drugs by including a prescription drug manufacturer or health care facility, including a pharmacy.

HB 4166

Rep. Klick
Sen. Sparks

Looks to promote sustainability in the health care system, reduce waste, and ensure the safety and effectiveness of donated prescription drugs by providing for the collection and redistribution of donated prescription drugs that are in a bottle or container and meet other existing packaging requirements.

SB 2173

Sen. Alvarado
Rep. Dean

Requires the Texas State Board of Pharmacy to develop and implement a prescription drug safe disposal pilot program for the purpose of increasing the number of locations in the state where unused, unwanted, or expired prescription drugs could be collected from the public for safe disposal.

SB 241

Sen. Perry
Rep. Talarico

Requires insulin manufacturers who participate in the Medicaid program, if a generic or biosimilar isn't available, to submit a written verification to HHSC stating whether or not the unavailability of a generic or biosimilar on the market is due to the manufacturer being engaged in market manipulation through "pay to delay" schemes or patent manipulation either first hand or facilitating another entities to commit these actions.

IN MEMORIAM

Adding new regulatory requirements were referenced in several pieces of legislation, specifically relating to how products are labeled. There were bills attempting to require additional warning labels for opioids and listing the country of manufacture for drugs. SB 2632 attempted to require labels when specific ingredients like mRNA vaccine were in meat or other food products. SB 314 would have required new labeling for product that either contained manufactured using, or derived from research using aborted human fetal tissue. Through thorough education efforts, none of these bills passed.

OTHER STATE LEGISLATION OF NOTE

Every legislative session, there are bills considered that impact all stakeholders or make changes to a fundamental state practice. Several of these bills did not pass, including HB 1585, which would have reformed existing campaign finance reporting requirements to facilitate more efficient disclosure and transparency. HB 2139 would have made statute changes altering how courts interpret legislative actions, including the application of legislative intent and other provisions of code construction.

The most common bills with full state impact are those related to the [Texas Sunset Commission](#). Every 12 years, each state agency is scheduled to be repealed and must go through a thorough examination by Sunset Commission staff who will recommend changes to a legislative panel for approval. The recommendations indicate whether the agency should continue to exist and provide suggestions to statute to improve the operations and functions of the agency. SB 1659 and SB 1620 update the schedule for the Sunset Commission in future years. SB 821 requires the Commission to include an examination of that agency's use of personal data in each agency review.

This session, there were several bills changing the operations of the Health and Human Services Commission (HHSC). Due to SB 956, HHSC and DSHS will no longer be creating a Coordinated Strategic Plan. Instead, each agency will continue to create individual strategic plans. HB 3265 decreases and combines certain reports issued by HHSC. SB 24 continues the process of reorganization of the health and social services agencies by moving certain programs from DFPS to HHSC. There is also a bill that included non-substantive recodifications of certain statutes governing HHSC and the Texas Medicaid program. As time passes and new laws are added to existing statutes, it becomes necessary to update, restructure and make changes to the law to make it easier to read. These changes are made infrequently and are not intended to make any changes to the law, only to reorganize the law.

OTHER STATE LEGISLATION BILL SUMMARIES

SB 1659

Sen. Schwertner
Rep. Holland

Adjusts the Sunset review schedule, frequently referred to as the "sunset safety net bill," and realigns the overall scheduled Sunset reviews with the priorities of the Legislature and to balance the Commission's review workload each year. It primarily reorganizes the reviews scheduled for 2027-2035. Within the approved schedule, the Texas Department of Insurance and related agencies will be taken up in 2029 and all medical-related licensure boards have been moved to 2033. The Sunset Commission posts all review schedules on their [website](#).

HB 1620

Rep. Holland
Sen. Schwertner

Starting out as a "sunset safety net bill," the bill was amended late in the legislative process with provisions specific to the Texas Racing Commission. It also includes provisions related to several state agencies such as the Preservation Board and the Arts Commission. Per this bill, the Sunset Commission will focus on the criminal justice system in 2024-2025 and on Health and Human Services agencies in 2026-2027.

SB 821

Sen. Nichols
Rep. Bell

Requires the Sunset Commission to include in its review of a state agency an examination of the agency's use of collected personal data and provide a determination of whether the agency sold personal data it possessed. If the agency sold personal data, the Sunset Commission must provide an analysis of that data with a recommendation to either prohibit the sale of that data or provide a compelling state interest for continuing the practice.

OTHER STATE LEGISLATION BILL SUMMARIES

SB 956

Sen. LaMantia
Rep. Longoria

Repeals the requirement that HHSC and DSHS create a Coordinated Strategic Plan. Previously, HHSC and DSHS were required to biennially submit individual strategic plans and a Coordinated Strategic Plan, with both strategic plans in one document. The Coordinated Strategic Plan was designed to combine the strategies of several state agencies that all provided health and human related services prior to the consolidation of those agencies into the current structure.

HB 3265

Rep. Manuel
Sen. Alvarado

Decreases the reporting frequency requirements for multiple reports within HHSC. The Medically Dependent Children Program reporting will move from quarterly to semiannual reporting. HHSC will combine the annual report on quality measures and value-based payments, statewide initiatives to improve quality of maternal healthcare, and quality monitoring early warning system for long-term care facilities into one report and change the reporting requirement from annually to biannually.

SB 24

Sen. Kolkhorst
Rep. Frank

Renames Prevention and Early Intervention Services to Family Support Services, transfers oversight from DFPS to HHSC, and establishes the Thriving Texas Families Program. Included in the transfer are the Child Abuse Neglect Prevention Trust Fund and Operating Account; the Community Youth Development Grant Program; the Nurse Family Partnership Competitive Grant Program, and the Texas Home Visiting Program. Implementation is required by September 1, 2024.

HB 4611

Rep. Price
Sen. Johnson

Makes a non-substantive revision of health and human services laws governing HHSC, Medicaid, and other social services. The bill takes existing statutes in Chapters 531-541 of the Government Code and restructures those chapters into new Chapters 520-550 of the Government Code.

TEXAS REGULATORY CONSISTENCY ACT

HB 2127, the Texas Regulatory Consistency Act, significantly impacts the ability of a city or county to implement certain laws and regulations related to labor, employment and other areas of law. Under the bill, municipalities or counties are prohibited from adopting, enforcing, or maintaining an ordinance, order, or rule regulating conduct in a field of regulation that does not align with state law.

The prohibition would apply to the following codes:

- Agriculture
- Business & Commerce
- Finance
- Insurance
- Labor
- Natural Resources
- Occupations
- Property

Specifically, regarding the Labor Code, a local government would not be able to adopt regulations related to employment leave, hiring practices, breaks, benefits, scheduling practices, and any other terms of employment that exceed or conflict with federal or state law for employers other than a municipality or county. Regulation adopted before January 1, 2023, would still be valid and enforceable.

CONSTITUTIONAL AMENDMENTS

In the Texas Legislature, a joint resolution is a proposal that amends the State Constitution instead of state law. To change the Constitution, a joint resolution must first pass through the legislative process, gaining approval in each body with at least two-thirds in favor, before also being voted on and approved by Texas voters. Joint resolutions adopted by the Legislature are not submitted to the Governor for signing but are filed directly with the Secretary of State. Following the legislative session, the Secretary of State conducts a drawing to determine the order in which the proposed Constitutional Amendments will appear on the November ballot.

SJR 32	El Paso County bonds
SJR 64	Childcare facility property tax exemption
SJR 74	Centennial parks conservation fund for state parks
SJR 75	Texas Water Fund
SJR 87	Health and biomedical inventory tax exemption
SJR 93	Texas Energy Fund
HJR 2	Increased retired teachers' benefits
HJR 3	Texas University Fund to enhance research at certain universities
HJR 107	Mandatory retirement age for state justices and judges
HJR 125	Broadband and telecommunications infrastructure fund
HJR 126	Protecting right to engage in farming, ranching, timber production and wildlife management
HJR 132	Prohibition on the imposition of an individual net worth or wealth tax
HJR 134	Abolishes the office of county treasurer in Galveston County

THBI will be working to support SJR 87, creating a property tax exemption for health and biomedical inventory, and HJR 3, creating the Texas University Fund. THBI will reach out to all members and partners to keep them informed of how to support these propositions in the November election.

COALITIONS AND PARTNERS

THBI collaborates with various stakeholders for state and federal legislative advocacy. It is because of the collaboration among these partnering groups that THBI is successful.

- American Cancer Society Cancer Action Network (ACS CAN)
- Biotechnology Innovation Organization (BIO)
- Cancer Prevention and Research Institute of Texas (CPRI)
- Coalition for Texans with Disabilities (CTD)
- Council of State Bioscience Associations (CSBA)
- Dallas Regional Chamber
- Greater Houston Partnership
- Pharmaceutical Research and Manufacturers of America (PhRMA)
- Texas Association of Business (TAB)
- Texas Association of Manufacturers (TAM)
- Texas Immunization Partnership (TIP)
- Texas Copay Accumulator Coalition
- Texas e-Health Alliance
- Texas Hospital Association (THA)
- Texas Medical Association (TMA)
- Texas Rare Alliance
- We Work for Health - Texas

THBI BOARD AND STAFF

THBI BOARD OF DIRECTORS

David R. Margrave, Chairman | Lantern Pharma

Andrea Giuffrida, PhD, Vice Chairman | UT Health San Antonio

Holly Jacques Turner, Secretary | Merck

Bradley Westmoreland, Treasurer | Genentech

Victoria Ford, MPA, President & CEO | Texas Healthcare & Bioscience Institute

Brynna Clark | PhRMA

Holli Hill | Novartis Pharmaceuticals

Kyle Kamrath | Vertex Pharmaceuticals

Mark Moreno | The University of Texas MD Anderson Cancer Center

Amber Pearce Shaw | Pfizer

Maurice Rigsby | Johnson & Johnson

Joan Solem | Eli Lilly & Company

Jeffrey L. Wade | Lexicon Pharmaceuticals

THBI STAFF

Victoria Ford, MPA, President & CEO

Miranda Goodsheller, Director of Operations & Economic Development

Danielle Lobsinger Bush, Director of Policy

Julia Perkins, Director of Membership & Programming

THANK YOU TO OUR SPONSORS



KarlinInnovation

CONTACT Us

807 Brazos Street, Suite 607
Austin, TX 78701
tel: (512) 708-8424
www.thbi.com



[facebook.com/txhbi](https://www.facebook.com/txhbi)



[@TXHBI](https://twitter.com/TXHBI)