



Texas House of Representatives Committee on Appropriations October 12, 2021



The House Appropriations Committee met to consider the following bills:

[HB 160](#) Wilson

Relating to making supplemental appropriations for education initiatives, institutions, and related agencies and giving direction regarding appropriations.

[HB 161](#) Capriglione

Relating to making supplemental appropriations relating to health and human services and giving direction regarding appropriations.

[SB 8](#) Nelson | et al.

SB8 by Nelson (relating to making supplemental appropriations and giving direction regarding appropriations, **Committee Report 2nd House, Substituted**).

The Committee heard invited testimony only.

This report addresses HB161 and SB8 only.

Having Heard Testimony at a Previous Meeting, The Committee substitute for SB8 Was Reported Favorably

BACKGROUND AND PURPOSE

The federal American Rescue Plan Act of 2021 provided fiscal relief to states aimed at mitigating the continuing effects of the COVID-19 pandemic. In part, the legislation established the Coronavirus State Fiscal Recovery Fund and the Coronavirus Capital Projects Fund, from which Texas was allocated billions of dollars. C.S.S.B. 8 makes appropriations of federal COVID-19 relief money received by the state from these two funds.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY



It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.S.B. 8 makes supplemental appropriations from money received by the state and deposited to the credit of the state's coronavirus relief fund from the Coronavirus State Fiscal Recovery Fund and from the Coronavirus Capital Projects Fund, each of which were established under the federal American Rescue Plan Act of 2021. The bill also gives direction regarding certain of those appropriations. Unless otherwise noted, the appropriations described below come from money received from the Coronavirus State Fiscal Recovery Fund.

Appropriation of Federal COVID-19 Relief Funds

Comptroller of Public Accounts

State Unemployment Compensation Fund

C.S.S.B. 8 appropriates \$7,245,419,946 to the comptroller of public accounts for use during the 2022 state fiscal year for the purpose of immediately depositing that amount to the credit of the state's unemployment compensation fund to pay back outstanding advances received by the state under federal law and to return the fund to the statutory floor computed under applicable state law on October 1, 2021, as reimbursement for payments made as a result of the COVID-19 pandemic.

Broadband Infrastructure

C.S.S.B. 8 appropriates \$500,475,163 to Fiscal Programs-Comptroller of Public Accounts for the purpose of providing funding for broadband infrastructure in accordance with applicable state and federal law during the two-year period beginning on the bill's effective date. Of that money, \$75,000,000 is restricted for use for the Texas broadband pole replacement program. This appropriation comes from money received from the Coronavirus Capital Projects Fund.

Trusted Programs Within the Governor's Office

C.S.S.B. 8 appropriates \$160,000,000 to the trusted programs within the governor's office for the purpose of providing funding for grants for crime victims during the two-year period beginning on



the bill's effective date. The bill establishes that it is the legislature's intent that grants made for crime victims during the 2022 state fiscal year and the 2023 state fiscal year equal grants made for crime victims during the 2021 state fiscal year.

Department of Agriculture

C.S.S.B. 8 appropriates \$100,000,000 to the Department of Agriculture (TDA) for the purpose of providing supplemental funding to food banks in response to the COVID-19 pandemic during the two-year period beginning on the bill's effective date.

Department of Information Resources

C.S.S.B. 8 appropriates \$200,000,000 to the Department of Information Resources (DIR) for deposit into the technology improvement and modernization fund and for use during the two-year period beginning on the bill's effective date for the purpose of cybersecurity projects. Accordingly, the bill increases DIR's capital budget authority in Chapter 1053 (S.B. 1), Acts of the 87th Legislature, Regular Session, 2021 (the General Appropriations Act), by the same amount for that appropriation. Before spending the appropriated money, DIR must receive approval for the proposed cybersecurity projects from the Joint Oversight Committee on Investment in Information Technology Improvement and Modernization Projects.

Texas Facilities Commission

C.S.S.B. 8 appropriates \$40,000,000 to the Texas Facilities Commission (TFC) for the purpose of constructing a 100-bed comprehensive behavioral health center to serve the Permian Basin region during the two-year period beginning on the bill's effective date, contingent on the completion of a signed agreement between the TFC and the Ector County Hospital District and the Midland County Hospital District guaranteeing the ongoing operations of the comprehensive behavioral health center by the Permian Basin Behavioral Health Center to ensure the continuing benefit to the residents of Texas. Upon completion of the construction, ownership of the building transfers to the Permian Basin Behavioral Health Center controlled by the Ector County and Midland County Hospital Districts.

Attorney General's Office

Sexual Assault Program Account

C.S.S.B. 8 appropriates \$52,277,114 to the attorney general's office for deposit into the sexual assault program account and for use by the office as authorized by other law during the two-year period beginning on the bill's effective date.

Crime Victims Compensation

C.S.S.B. 8 appropriates \$54,756,000 to the attorney general's office for deposit into the compensation to victims of crime account and for use by the office during the two-year period beginning on the bill's effective date for the purpose of compensating crime victims.

Court Fee Shortfall

C.S.S.B. 8 appropriates the following amounts to the following entities for the indicated purposes for the two-year period beginning on the bill's effective date to address matters related to shortfalls in court fee collections:

- judiciary section of the comptroller's office: \$14,854,228 for the purpose of addressing the backlog in court cases, including to pay for visiting judges and support staff;
- Office of Court Administration (OCA), Texas Judicial Council:
 - \$10,338,158 for the purpose of addressing the backlog in court cases, including information technology support; and
 - for Strategy D.1.1., Texas Indigent Defense Commission (TIDC), as listed in the General Appropriations Act: \$63,698,784 for the purpose of addressing the backlog in court cases, including to pay for public defenders, and \$13,942,466 for deposit into the fair defense account and for use by OCA in addressing the backlog in court cases, as authorized by other law;
- Office of Capital and Forensic Writs (OCFW): \$200,000 for the purpose of addressing the backlog in court cases and paying costs related to the COVID-19 pandemic; and
- Texas Commission on Law Enforcement (TCOLE): \$9,400,000 for deposit into the Texas Commission on Law Enforcement account for use by TCOLE as authorized by other law.

The bill increases OCA's capital budget authority in the General Appropriations Act by \$1,330,680 and authorizes the employment of additional full-time equivalent employees (FTEs) during the two-year period beginning on the bill's effective date as follows:

- OCA may employ eight additional FTEs out of the \$10,338,158 appropriation and two additional FTEs out of the \$63,698,784 appropriation; and
- the OCFW may employ one additional FTE out of its appropriation.

Commission on State Emergency Communications

C.S.S.B. 8 appropriates \$150,000,000 to the Commission on State Emergency Communications (CSEC) for deposit into the next generation 9-1-1 service fund and for use by the CSEC as authorized by other law for the deployment and reliable operation of next generation 9-1-1 service, including equipment and administration costs, during the two-year period beginning on the bill's effective date. The bill establishes that, in accordance with applicable state law, it is the legislature's intent that all money appropriated to the CSEC by the bill be distributed not later than December 31, 2022, and spent not later than December 31, 2024, for the authorized purposes.

Department of Transportation

C.S.S.B. 8 appropriates \$15,000,000 to the Texas Department of Transportation (TxDOT) for the purpose of providing funding for a customs inspection station on the South Orient Rail Line in Presidio, Texas, during the two-year period beginning on the bill's effective date.

General Provisions

C.S.S.B. 8 establishes the following:

- it is the legislature's intent that:
 - the appropriations made by the bill are one-time appropriations made for the purpose of addressing the state's needs for the two-year period beginning on the bill's effective date;
 - the appropriations made by the bill be used only for purposes authorized by state and federal law, including guidance issued by the U.S. Department of the Treasury in 86 Fed. Reg. 26786 (May 17, 2021);
 - the appropriations made by the bill be used before all other methods of finance if more than one method of finance is available for the applicable purpose; and
 - if a qualified state or federal authority determines that a purpose for which money is appropriated by the bill is an improper use of that money, the appropriated money not be spent and instead be retained in the treasury for later legislative appropriation;
- certain of the appropriations made by the bill, as specified therein, are made in accordance with 42 U.S.C. Section 802(c)(1)(C), which allows money from the federal Coronavirus State Fiscal Recovery Fund to be used to provide government services to the extent of a reduction in the revenue of a state government caused by the COVID-19 public

health emergency relative to revenues collected in the most recent full fiscal year of the state government that ended before that emergency; and

- the transfer provisions of Part 14, Article IX, in the General Appropriations Act and the transfer provisions of Section 65, Chapter 995 (H.B. 2), Acts of the 87th Legislature, Regular Session, 2021 (the Supplemental Appropriations Act), apply to the appropriations made by this bill to allow appropriate transfer of appropriations made by this bill as if the appropriations made by the General Appropriations Act, the Supplemental Appropriations Act, and this bill were all a part of the same bill, to the extent permitted by federal law.

EFFECTIVE DATE

On passage.

COMPARISON OF SENATE ENGROSSED AND SUBSTITUTE

While C.S.S.B. 8 may differ from the engrossed in minor or nonsubstantive ways, the following summarizes the substantial differences between the engrossed and committee substitute versions of the bill.

The substitute omits the following appropriations, which were present in the engrossed version:

- \$180,000,000 to the trustee programs within the governor's office for tourism, travel, and hospitality recovery grants;
- \$1,200,000 to the trustee programs within the governor's office for information technology case management system improvements for children's advocacy centers;
- \$2,462,085,730 to the Department of State Health Services (DSHS) for certain COVID-19 services;
- \$5,000,000 to DSHS for the federally qualified health center incubator program;
- \$16,700,000 to DSHS to upgrade existing laboratory facilities in Starr County;
- \$2,729,912,000 to the Texas Department of Criminal Justice and \$806,836,021 to the Department of Public Safety for compensating agency employees;
- \$286,337,761 to the Teacher Retirement System of Texas for funding certain coronavirus-related claims in TRS-Care and TRS-ActiveCare;
- \$113,082,887 to the Texas Higher Education Coordinating Board (THECB) for supporting the operations and expansion of the Texas Child Mental Health Care Consortium;
- \$325,000,000 to the THECB for university construction;
- \$15,000,000 to the THECB for operating the Texas reskilling and upskilling through education (TRUE) program;

- \$20,000,000 to the THECB for performance-based funding for at-risk students at comprehensive regional universities;
- \$300,000,000 to the Texas Division of Emergency Management for the purpose of acquiring land for, and the construction of, a state operation center;
- \$237,800,000 to the Health and Human Services Commission (HHSC) to complete construction of a state hospital in Dallas;
- \$400,000,000 to HHSC to administer one-time grants related to critical staffing needs of frontline health care workers affected by COVID-19;
- \$75,000,000 to HHSC to fund grants to support rural hospitals that have been affected by the COVID-19 pandemic;
- \$20,000,000 to HHSC to fund the creation of a consolidated Internet portal for Medicaid and CHIP medical services provider data;
- \$5,000,000 to HHSC to fund technology updates to the Medicaid eligibility computer system;
- \$14,250 to HHSC for the Texas Civil Commitment Office;
- \$15,000,000 to HHSC for expanding the capacity of Sunrise Canyon Hospital;
- \$40,000,000 to The University of Texas Health Science Center at Houston for operating the Texas Epidemic Public Health Institute;
- \$5,000,000 to the TDA to fund home-delivered meals;
- \$35,000,000 to the General Land Office and the Veterans Land Board to fund HVAC upgrades, negative pressure COVID-19 wards, and mobile HEPA air filtration units for Texas state veterans' homes; and
- \$20,000,000 to the Texas Historical Commission to fund the commission's capital plan project for the Washington-on-the-Brazos state historic site.

The substitute includes the following appropriations, which were absent in the engrossed version:

- \$40,000,000 to the TFC to fund construction of a 100-bed comprehensive behavioral health center to serve the Permian Basin region, contingent on completion of the requisite signed agreement;
- \$52,277,114 to the attorney general's office for deposit into the sexual assault program account;
- \$54,756,000 to the attorney general's office for deposit into the compensation to victims of crime account;
- for purposes of addressing matters related to shortfalls in court fee collections:
 - \$14,854,228 to the judiciary section of the comptroller's office;
 - \$87,979,408 to OCA, of which \$77,641,250 is for the TIDC strategy;
 - \$200,000 to the OCFW; and

- \$9,400,000 to TCOLE;
- \$150,000,00 to the CSEC for deposit into the next generation 9-1-1 service fund; and
- \$15,000,000 to TxDOT to fund a customs inspection station on the South Orient Rail Line in Presidio.

The substitute increases the amount appropriated to the TDA for providing supplemental funding to food banks from \$95,000,000, as in the engrossed version, to \$100,000,000.

The substitute includes a provision not in the engrossed version requiring DIR to receive approval from the Joint Oversight Committee on Investment in Information Technology Improvement and Modernization Projects for proposed cybersecurity projects to be funded from appropriations made by the bill.

The substitute revises a procedural provision in the engrossed version regarding certain appropriation authority under federal law to reflect the changes in appropriations made by the substitute.

HB161

BACKGROUND AND PURPOSE

The federal American Rescue Plan Act of 2021 provided fiscal relief to states aimed at mitigating the continuing effects of the COVID-19 pandemic. In part, the legislation established the Coronavirus State Fiscal Recovery Fund, from which Texas was allocated billions of dollars. H.B. 161 makes appropriations relating to health and human services from federal COVID-19 relief money received by the state from this fund.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 161 makes supplemental appropriations relating to health and human services from money received by the state and deposited to the credit of the state's coronavirus relief fund from the Coronavirus State Fiscal Recovery Fund established under the federal American Rescue Plan Act of 2021. The bill also gives direction regarding certain of those appropriations.

Appropriation of Federal COVID-19 Relief Funds

Department of State Health Services

COVID-19 Services

H.B. 161 appropriates \$2,005,581,271 to the Department of State Health Services (DSHS) for the following purposes related to the COVID-19 pandemic during the period beginning on March 3, 2021, and ending December 31, 2021:

- providing funding for state and local hospital surge staffing;
- purchasing therapeutic drugs, including drugs for monoclonal antibody treatments; and
- providing funding for the operation of regional infusion centers.

The bill establishes that it is the legislature's intent that any reimbursement received by DSHS from FEMA related to expenditures paid from this appropriated money be deposited to the general revenue fund and not expended until appropriated by the 88th Legislature. Any of the appropriated money that remains unobligated on January 1, 2022, lapses to the credit of the state's coronavirus relief fund and may not be expended until appropriated by the legislature.

Federally Qualified Health Center Incubator Program

H.B. 161 appropriates \$20,000,000 to DSHS for use during the two-year period beginning on the bill's effective date for the federally qualified health center incubator program.

Emergency Medical Services

H.B. 161 appropriates \$21,700,000 to DSHS for the purpose of providing funding for emergency medical response service staffing, including the following:

- funding for programs to incentivize and increase the number of emergency medical technicians (EMTs) and paramedics that provide care on an ambulance; and

- funding for emergency medical services (EMS) education programs, including distance learning programs, to increase the number of EMTs and paramedics graduating from EMS education programs.

The bill establishes that it is the legislature's intent that DSHS prioritize funding for rural and underserved areas.

Health and Human Services Commission

Dallas State Hospital Construction

H.B. 161 appropriates \$237,800,000 to the Health and Human Services Commission (HHSC) for the purpose of completing construction of a state hospital in Dallas during the two-year period beginning on the bill's effective date. Accordingly, the bill increases HHSC's capital budget authority in Chapter 1053 (S.B. 1), Acts of the 87th Legislature, Regular Session, 2021 (the General Appropriations Act), by the same amount for that appropriation.

Health Care Staffing Needs

H.B. 161 appropriates \$300,000,000 to HHSC for the purpose of providing funding during the two-year period beginning on the bill's effective date for HHSC to administer one-time grants related to providing critical staffing needs resulting from frontline health care workers affected by COVID-19, including providing recruitment and retention bonuses for the following persons:

- staff of nursing facilities, assisted living facilities, home health agencies, and facilities that serve persons with intellectual or developmental disabilities in intermediate care facility for individuals with intellectual disabilities or related conditions (ICF/IID);
- staff who provide community attendant services; and
- staff who provide home and community-based services and services through the Texas home living (HSC and TxHML) waiver programs.

Of the amount appropriated, half is restricted for grants for nursing facilities and the other half is restricted for all other grants.

H.B. 161 establishes that it is the legislature's intent that HHSC prioritize grants to grantees that comply with the reporting requirements prescribed by Rider 143 in the General Appropriations Act, the reporting requirements established by Chapter 588 (S.B. 809), Acts of the 87th Legislature, 2021, or equivalent reporting requirements established by HHSC. Additionally, the bill requires HHSC to report annually to the Legislative Budget Board the grants awarded and to include in the report, for the year covered by the report, the amount of grants awarded, the award recipients,

and the total amount of each grant used by the recipient. The report must be submitted not later than December 1 of the year in which the report is due.

Rural Hospitals

H.B. 161 appropriates \$75,000,000 to HHSC for the purpose of providing funding for grants to support rural hospitals that have been affected by the COVID-19 pandemic during the two-year period beginning on the bill's effective date.

Other Provisions

H.B. 161 establishes the following:

- it is the legislature's intent that:
 - DSHS and HHSC distribute the money appropriated by the bill only to entities in compliance with the hospital price transparency public disclosure requirements required by 45 C.F.R. Sections 180.10 - 180.60 and by Chapter 1044 (S.B. 1137), Acts of the 87th Legislature, Regular Session, 2021;
 - the appropriations made by the bill are one-time appropriations made for the purpose of addressing the state's needs for the two-year period beginning on the bill's effective date;
 - the appropriations made by the bill be used only for purposes authorized by state and federal law, including guidance issued by the U.S. Department of the Treasury as part of the interim final rules published in 86 Fed. Reg. 26786 (May 17, 2021);
 - the appropriations made by the bill be used before all other methods of finance if more than one method of finance has been appropriated by this and a prior act of the legislature for use during a state fiscal year; and
 - if the purpose of an appropriation, for any reason, is determined by a qualified state or federal authority to have been made for an improper use, the appropriated money not be spent and instead be retained in the treasury and available for later legislative appropriation;
- certain of the appropriations made by the bill, as specified therein, are made in accordance with 42 U.S.C. Section 802(c)(1)(C), which allows money from the federal Coronavirus State Fiscal Recovery Fund to be used to provide government services to the extent of a reduction in the revenue of a state government caused by the COVID-19 public health emergency relative to revenues collected in the most recent full fiscal year of the state government that ended before that emergency; and

- the transfer provisions of Part 14, Article IX, in the General Appropriations Act and the transfer provisions of Section 65, Chapter 995 (H.B. 2), Acts of the 87th Legislature, Regular Session, 2021 (the Supplemental Appropriations Act), apply to the appropriations made by this bill to allow appropriate transfer of appropriations made by this bill as if the appropriations made by the General Appropriations Act, the Supplemental Appropriations Act, and this bill were all a part of the same bill, to the extent permitted by federal law.

Committee Discussion.

Representative Julie Johnson stated her concern for home health funding. The lack of home health funding increases hospital stays. The funding for home health in the bill is not sufficient to address the needs we have. She asked if there are additional funds that could be used for home health. The Author stated we have a lot of priorities but limited dollars.

Representative Rose commented on the reduction from the Senate Bill for nursing home funding. The Author stated that it comes down to priorities. We know from other members as well that nursing homes are a priority.

Representative Dean stated that nursing homes were the hardest hit by COVID. He stated that the committee put several items into Article XI and we should look at those priorities for this effort especially nursing homes.

Representative Wu stated the relief funds are designed to address COVID. He stated that rural hospitals are getting slammed. They have the lowest vaccination rates and have expensive care. For the FQHCs, they are serving the poorest of the poor to keep people out of the ERs. Their portion of the funding though is very low (\$20,000). Sending more money to the rural clinics and hospitals would save money in the long run.

Representative Walle inquired about the \$300 million to HHSC for staffing needs of front-line health care workers including one-time incentive bonuses and amounts for other entities and asked how those work together. HHSC stated that they would seek legislative intent and direction. There would be distinct grant programs for nursing facilities and a separate program for other provider types. They would operate separately but they anticipate all the funding would be spent. HHSC would make grants to providers and not make direct payment to staff. They would conduct a request for application process and are still determining the grant criteria.

Representative Howard inquired about reimbursement from FEMA and the intent for it to go into GR and a delayed appropriation until the 88th legislature. She stated that this seems to ignore the need for COVID relief now. The author stated that we have money to address immediate needs but are putting money aside for potential future surges or need. DSHS stated FEMA reimburses 100% and the bill provides relief through December. The Representative wanted to be sure options are available to address a surge in Travis County (and other areas).

Representative Toth inquired about the amount that was going to infusion centers. DSHS stated there is roughly \$80 million available, The Representative inquired about what DSHS is doing to test the efficacy of infusion treatment. He stated that the infusion centers work. *(This statement conflicts with studies conducted by NIH which found that “The results show that convalescent plasma does not appear to benefit this particular group,”... please see the boxed statement below)*

NIH: Early treatment with convalescent plasma for COVID-19 doesn’t show benefit

At a Glance

- COVID-19 convalescent plasma did not prevent the disease from worsening in high-risk patients who sought emergency room care within the first week of their symptoms.
- The trial adds to others suggesting little benefit from using convalescent plasma to treat COVID-19

COVID-19 convalescent plasma is blood plasma collected from patients who have recovered from the virus. It’s sometimes known as “survivor’s plasma.” Treating COVID-19 patients with convalescent plasma infusions was thought to help fight the virus. In theory, it could speed recovery by transferring antibodies that could block the virus. The approach is called passive immunization.

Studies had suggested that convalescent plasma treatment might lower the risk of death among hospitalized COVID-19 patients if administered early in the disease—before mechanical assistance was needed to help them breathe. Based on such findings, the FDA issued an Emergency Use Authorization, or EUA, in 2020 for treating hospitalized patients with COVID-19 convalescent plasma. The FDA concluded that its known and potential benefits outweighed its risks. However, it strongly encouraged further study to definitely assess whether convalescent plasma was effective. A clinical trial led by Dr. Clifton Callaway at the University of Pittsburgh assessed the efficacy of COVID-19 convalescent plasma treatment for high-risk patients early in the disease. The study was supported by NIH’s National Heart, Lung, and Blood Institute (NHLBI) and National Institute of Neurological Disorders and Stroke (NINDS), along with the Biomedical Advanced Research and Development Authority. Results were published in the *New England Journal of Medicine* on August 18, 2021.

The team enrolled more than 500 adults, 18 years of age or older, who came to emergency departments across the country with mild COVID-19 symptoms within a week of infection. All had risk factors for progressing to more severe disease. These included age and conditions like

obesity, hypertension, diabetes, heart disease, and chronic lung disease. Participants were racially and ethnically diverse, with a median age of 54 years. They were not ill enough to be hospitalized and could be treated as outpatients.

The participants were randomly assigned to receive either COVID-19 convalescent plasma or placebo (a salt solution with multivitamins). The researchers compared events in both groups within 15 days of treatment. These included seeking further emergency or urgent care, hospital admission, or death.

The research team found no significant difference in disease progression between the two groups. Disease progression occurred in 77 (30%) in the COVID-19 plasma group compared to 81 patients (31.9%) in the placebo group. There were no differences in severity of the worst illness, number of hospital-free days, or death. The trial was stopped in February 2021 due to the lack of treatment efficacy.

“The results show that convalescent plasma does not appear to benefit this particular group,” says study co-author Dr. Nahed El Kassar of NHLBI. “But the findings answer an important clinical question and may help bring researchers a step closer to finding more effective treatments against this devastating disease.”

The results from this study are similar to three other randomized trials in COVID-19 convalescent plasma. In contrast, one clinical trial showed that this intervention could benefit older adults in nursing home when administered very early. COVID-19 convalescent plasma may still benefit different populations, and additional studies are ongoing or planned.

Representative Ann Johnson inquired about the cost for vaccination. DSHS stated the cost to the individual is zero. DSHS stated that they do not have the cost to the state of vaccination if the state were paying for it. The representative stated that we do not know what the difference in cost is between vaccination and infusion. DSHS stated that it appears that vaccination is cheaper.

The Bill was reported favorably.

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