

Texas HIV Medication Advisory Committee

Bylaws

1. Name and Legal Authority

The Texas HIV Medication Advisory Committee ("Committee") is established in accordance with Texas Health and Safety Code Chapter 85, Subchapter K and Title 25, Texas Administrative Code, § 98.121; and governed by Texas Government Code Chapter 2110 (State Agency Advisory Committees), to the extent Chapter 2110 is consistent with Texas Health and Safety Code Chapter 85, Subchapter K. In accordance with 25 TAC § 98.121, by August 1, 2030, the HHS Executive Commissioner will initiate and complete a review of the Committee to determine whether the Committee should be continued, consolidated with another committee, or abolished. If the Committee is not continued or consolidated, the Committee shall be abolished on that date.

2. Purpose and Role

The purpose and tasks of the Committee are to advise the HHS Executive Commissioner and the Texas Department of State Health Services (DSHS) on matters as described below:

- A. Review the aims and goals of the Texas HIV Medication program;
- B. Evaluate ongoing program efforts;
- C. Recommend both short-range and long-range goals and objectives for medication needs;
- D. Recommend medications for addition to or deletion from the program's formulary; and
- E. Carry out any other tasks given to the Committee by the HHS Executive Commissioner.

The Committee submits an annual written report to the HHS Executive Commissioner as required by the Texas Health and Safety Code, Section 1, Chapter 85, Subchapter K, § 85.282 should be signed by

the Chair and appropriate DSHS staff and filed no later than March 31 of each year. The report must include:

- A. The meeting dates of the Committee and any subcommittees;
- B. Attendance records for each Committee member for both Committee and subcommittee meetings;
- C. A brief description of any action taken by the Committee;
- D. A description of how the Committee has accomplished any specific tasks officially given to the Committee;
- E. The status of any rules recommended by the Committee;
- F. The anticipated activities of the Committee for the following year; and
- G. The costs for the Committee's existence, including the cost of DSHS staff used to support the Committee's activities and the source of funds used to support the Committee's activities.

3. Definitions

- Conflict of interest: A situation in which a member has a personal or private interest where they could benefit from actions or decisions made in their official capacity.
- High Level of Integrity: For purposes of these bylaws, this means that the member is honest and behaves in a morally upright way, at a level above a normal or average level, such that the public's trust in the member is warranted. A high level of integrity includes disclosing conflicts of interest as required by HHS policy and these bylaws.
- Personal or private interest: An interest that does not include the member's engagement in a profession, trade, or occupation when the member's interest is the same as all others similarly engaged in the profession, trade, or occupation, or if the member merely provides a personal experience, with no personal or private financial interest, in giving feedback on the subject matter.
- DSHS: Texas Department of State Health Services
- HHS: Texas Health and Human Services system
- HHSC: Texas Health and Human Services Commission
- HIV: Human Immunodeficiency Virus

- THMP: Texas HIV Medication Program

4. Committee Composition

The Committee is composed of eleven voting members appointed by the HHS Executive Commissioner as described in Texas Health and Safety Code § 85.272, Subchapter K.

This membership includes:

- A. Four consumer members (people living with HIV);
- B. Four physicians, one of whom is a Pediatrician, who are actively engaged in the treatment of people infected with HIV;
- C. One social worker who works with people who are infected with HIV;
- D. One public health administrator; and
- E. One pharmacist who participates in the program.

Under Circular C-022: HHSC Policy for Advisory Committees and to the greatest extent possible, the HHS Executive Commissioner appoints members who reflect the diversity of Texas.

5. Member Terms

Except as necessary to stagger terms, all members will serve a term of six years, except when appointed to complete the remaining unexpired term of an outgoing member. Regardless of the term limit, a member serves until the HHS Executive Commissioner appoints their replacement. This ensures sufficient, appropriate representation. People may apply to serve one additional term. They may serve these terms consecutively. Terms are staggered to ensure continuity of Committee work so that the terms of an equivalent number of members will expire on December 31 of each even-numbered year.

6. Resignations and Vacancies

If any member of the Committee wishes to resign, the member will contact, in writing, the current Chair and DSHS staff.

In the event of a vacancy for any reason, DSHS staff will work with the HHS Executive Commissioner to solicit applications as appropriate to fill the vacancy with a representative of the same membership category to serve the unexpired portion of the term of the vacant position. The HHS Executive Commissioner may reconsider the membership of people who submitted applications within the previous year through HHSC but were not selected.

7. Presiding Chair and Vice-Chair

The Committee will elect a Chair and a Vice-Chair to serve in the Chair's temporary absence from among the Committee members. **Election of a qualified consumer member to Chair or Vice-Chair is strongly encouraged.** The terms run from March 1 of each odd-numbered year to February 27 of the following odd-numbered year. Both officers will serve until the Committee elects their successor. In the event that the Chair is unable to complete his or her term, the Vice-Chair will complete the unexpired portion of the term. In the event that the Vice-Chair becomes the Chair, or the Vice-Chair is unable to complete their term for any reason, the Committee will elect a new Vice-Chair.

The role of the Chair and Vice-Chair is to:

- A. Report to DSHS and the HHS Executive Commissioner;
- B. Participate in agenda planning and preparation for Committee meetings;
- C. Provide leadership in conducting Committee meetings;
- D. Promote, maintain, and encourage a participatory environment;
- E. Call meetings as needed to accomplish the work of the Committee and in accordance with Texas Health and Safety Code Chapter 85, Subchapter K;
- F. Ensure the Committee adheres to its charge;

- G. Call for the establishment of subcommittees (if appropriate and with approval of agency staff);
 - H. Ensure annual reports are made to the HHS Executive Commissioner; and
 - I. Confer with Texas HIV Medication Program staff to acquire the support needed for Committee operations.
- The Chair may serve as an ex officio member of any subcommittee.

8. Committee Operations and Meetings

A. Meetings

1. The Committee meets during regular business hours as necessary to conduct Committee business. A meeting may be called by agreement between DSHS staff and the Chair or by three or more Committee members.
2. The Committee is subject to Texas Government Code Chapter 551 (the Texas Open Meetings Act) as if it were a governmental body.

B. Quorum

1. Six members constitutes a quorum for the purpose of transacting official business. If less than a quorum of the Committee is present, members may not vote on action items, but may take testimony and public comments so long as the Committee conducts the meeting in accordance with the Texas Open Meetings Act.

C. Voting

1. Members have the right to vote on any subject that is listed on the agenda. However, members must abstain from deliberating or voting on issues that would provide monetary or other gain to the member, or the member's family, or that could present, or reasonably appear to present, a conflict of interest.
2. The Committee may determine procedural matters by majority vote of the members attending the meeting.

3. A member may not authorize another person to represent the member by proxy.
4. A member may participate and vote by telephone or videoconference call as deemed necessary by agency staff.
5. For all business except adopting or amending bylaws, the Committee must have a simple majority on a motion duly made and seconded. A simple majority is defined as more than half of the votes cast by people entitled to vote who are in attendance with a quorum, excluding abstentions.
6. The Committee will make decisions without discrimination based on a person's race, creed, gender, religion, national origin, age, physical condition, or economic status.

D. Procedural Matters

1. The Committee shall use Robert's Rules of Order as the basis of parliamentary decisions except as provided by other law or rule.

E. Adoption and Revision to Bylaws

1. The Committee shall adopt and amend bylaws pursuant to a two-thirds vote (of members attending the meeting) on a motion duly made and seconded.
2. Committee members or HHS staff may propose changes to these bylaws. Committee members should submit all proposed changes from Committee members, along with the rationale for the changes, in writing to DSHS staff at least 30 days before the next Committee meeting. Upon receipt of proposed changes, the Committee Liaison will include an item for bylaws discussion on the agenda to post on the Secretary of State's Open Meetings website. The Committee Liaison must distribute proposed changes to the members before the meeting for their consideration.
3. The Committee will review the bylaws by December 31 of every even-numbered year. During a meeting, the Committee will consider all proposed amendments that occur as a result of the biennial review. Passed amendments will become effective based on a two-thirds vote of members attending the meeting, pending review and approval by DSHS and HHSC staff.

4. All proposed changes are subject to review and approval by DSHS and HHSC staff.
5. The bylaws become effective on the date the Committee adopts them. The Committee will make note of the date of the adoption or amendment of the bylaws in its minutes. Members will sign the Statement by Members when they adopt or amend bylaws (see **Appendix 1. Statement by Members**).

9. Responsibilities of Members

A. Attendance

DSHS and HHSC expects members to attend all meetings in person or by video conference call as scheduled, including meetings of their assigned subcommittees. A member unable to attend a meeting should notify the Chair and appropriate DSHS staff in advance. The Committee Liaison will notify other appropriate program staff. Members may not send a substitute to attend a meeting in their place.

If any member: 1) cannot discharge the member's duties for a substantial part of the term for which the member is appointed because of illness or disability; 2) is absent from more than half of the Committee and subcommittee meetings during a calendar year, or 3) is absent from at least three consecutive Committee meetings with or without notice to DSHS staff, the HHS Executive Commissioner may remove the member from the Committee.

B. Member Expectations:

1. Attend meetings in person or by videoconference call as scheduled;
2. Participate in assigned subcommittees;
3. Review agendas and other information agency staff send before each meeting;
4. Participate in discussions at meetings;
5. Submit travel expenses (if applicable and if reimbursement is desired) within 14 days of the meeting;

6. Abstain from deliberating or voting on issues that would provide monetary or other gain to the member, or the member's family, or that could present, or reasonably appear to present, a conflict of interest;
7. Attend and participate in an orientation session for the Committee;
8. Complete the Texas Open Meetings Act Training and Public Information Act Training within 90 days of appointment and submit the Certificates of Completion to DSHS staff. A member who successfully completed the trainings within the last five years may submit their Certificate of Completion to DSHS staff in lieu of retaking the trainings;
9. Sign the Statement by Members document (attached) and submit it to DSHS staff within 30 days after appointment. This document includes a Conflict of Interest and a Nondisclosure Agreement to which Committee members must agree;
10. Committee members shall notify the Committee chair and DSHS staff if a change of their status alters the category of membership that the member is filling or if any circumstance occurs that prevents the member from discharging their duties;
11. Maintain a high level of integrity that warrants public trust, including complying with all applicable ethics guidance provided by the HHS Ethics Office and all aspects of the Texas Open Meetings Act and Public Information Act; and
12. Hold and maintain in strictest confidence all confidential information and all agency-generated information, including information in draft form, until the agency releases and makes public the information or document, the HHS Executive Commissioner approves the release in writing, or the HHS Ethics Policy permits release. This requirement survives the member's tenure on the Committee. In addition, the member must confirm that they will require the member's interpreters, attendants, or other support persons if any, to comply with this requirement. For purposes of these bylaws and the Nondisclosure Agreement, the term "confidential information" includes all information protected by the Health Insurance Portability and Accountability Act (HIPAA), information that has commercial value or use, such

as trade secrets, and information communicated in confidence by the HHS System.

Failure to comply with member expectations numbers 6-12 above is grounds for dismissal and may result in removal from the Committee.

C. Committee members may not:

1. Claim or appear to represent HHSC or the Committee in any legislative or advocacy activity without written approval from the Committee Chair and the HHS Ethics Office in coordination with the HHSC Government and Stakeholder Relations Office and DSHS staff. A member is not prohibited from discussing a report that has been formally adopted by this Committee, so long as he or she does not purport to represent HHSC or DSHS. A member is not prohibited from representing him- or herself or another entity in the legislative or advocacy process.
2. Accept payment for any services offered to the member because of their position on the Committee.
3. Disclose confidential information or draft information (from any source including grants, requests for proposals, and contracts) acquired through their participation on the Committee until DSHS or HHSC releases and makes public that information or document, the HHS Executive Commissioner approves the release in writing, or the HHS Ethics Office permits release. This includes all forms of communication, including written, digital, verbal, and social media.
4. Fail to require the member's interpreters, attendants or other support persons, if any, to keep confidential information or draft information (from any source including grants, requests for proposals, and contracts) acquired through the member's participation on the Committee until such time as that information or document is released and made public, the HHS Executive Commissioner has approved the release in writing, or the HHS Ethics Policy permits release. This includes all forms of communication including written, verbal, and social media.

A violation of any of these items is grounds for dismissal and may result in removal from the Committee.

10. Removal from the Committee

The HHS Executive Commissioner may remove a member from the Committee for the following reasons:

- A. A member votes or deliberates on an issue that would provide monetary or other gain or that presents a conflict of interest to the member, the member's family, or an entity with which the member is closely affiliated.
- B. A member refuses to sign or violates the Statement by Members, which includes the Conflict of Interest statement and Nondisclosure Agreement, or another Nondisclosure Agreement.
- C. A member does not maintain a high level of integrity that warrants public trust, including complying with all applicable ethics guidance provided by the HHS Ethics Office and all aspects of the Texas Open Meetings Act and Public Information Act.
- D. A member changes status that alters the category of membership that the member filled.
- E. A member claims or appears to represent DSHS or the Committee in a legislative or advocacy activity without approval from the Committee Chair and the HHS Ethics Office in coordination with the HHSC Government and Stakeholder Relations Office and DSHS staff. (A member is not prohibited from discussing a report that has been formally adopted by this Council, so long as he or she does not purport to represent HHSC. A member is not prohibited from representing him- or herself or another non-state agency entity in the legislative or advocacy process.)
- F. A member receives payment for any services requested because they hold a position on the Committee.
- G. A member discloses confidential, including draft, information acquired through their participation on the Committee not in accordance with the bylaws.
- H. A member fails to require his or her interpreter, attendant or other support person, if any, to keep confidential any information or draft information acquired through the member's participation on the Committee as required by the Bylaws.
- I. A member: 1) is unable to discharge their duties for a substantial part of the term for which they are appointed because of illness or

disability; 2) is absent from more than half of the Committee and subcommittee meetings during a calendar year, or 3) is absent from at least three consecutive Committee meetings with or without notice to DSHS staff.

Decisions to remove a member of the Committee due to such violations require input from the HHS Office of General Counsel.

11. Subcommittees

Unless otherwise noted in statute, the Chair, with the approval of agency staff, may establish subcommittees that meet at other times for purposes of studying and making recommendations on issues the Committee determines appropriate to the purpose and tasks of the Committee. The Committee may create a subcommittee for a limited period of time that will cease to exist when the subcommittee completes the assigned tasks or upon determination of the HHS Executive Commissioner or the subcommittee may be a standing subcommittee. The Chair and agency staff will evaluate the need for all existing subcommittees annually.

Subcommittee Operations and Meetings

- A. The Chair may appoint a person who is not a Committee member to serve on a subcommittee.
- B. A subcommittee will meet at the call of the subcommittee's chair or when directed by the Committee.
- C. Except as set out in #E below subcommittee(s) will follow the general rules of the Committee as applicable.
- D. Subcommittee(s) must keep minutes of the meetings and report back to the full body.
- E. The presence of a quorum of the full Committee at a subcommittee meeting:
 1. Constitutes a full Committee meeting that requires posting appropriate notice of the meeting as a full Committee meeting in accordance with the Texas Open Meetings Act; and

2. Requires the subcommittee meeting to be held in compliance with the Texas Open Meetings Act, including posting appropriate notice of the subcommittee meeting.

12. Subject Matter Experts

DSHS recognizes the value of subject matter experts (SMEs) to provide information to the Committee as it develops recommendations and initiatives relative to its purpose and tasks. The primary role of a SME is to provide objective, independent information and analysis for consideration by the Committee. SME participation is subject to the request of voting Committee members and falls within the following guidelines:

- A. Committee members, the Chair, and DSHS staff may invite a SME to provide information on specific subjects and topics;
- B. Staff, the Committee Chair, or Vice-Chair may recognize an invited SME to provide information or analysis during allotted time periods at a specified Committee or subcommittee meeting;
- C. SMEs will participate in questions and answers at the direction of the staff, Committee Chair, or Vice-Chair;
- D. All SMEs will participate and serve at the pleasure of the Committee;
- E. SMEs do not hold any official capacity on the Committee or subcommittees and do not have rights of deliberation or the right to vote on any Committee activities or decisions;
- F. SMEs should disclose any conflicts of interest they may have prior to providing information to the Committee;
- G. None of the information or guidance contained in this section shall prevent any person from participating in or providing comments to the Committee as allowed under the Texas Open Meetings Act.

13. Responsibilities of HHS Support Staff

The Texas HIV Medication Program staff will be present at and will provide reasonable administrative and technical support and coordination for all Committee and subcommittee activities. DSHS will coordinate as needed to provide reasonable accommodations and

supports needed by a Committee member requiring accommodations to enable them to fully participate in Committee and subcommittee meetings and activities.

Staff is expected to perform the following tasks:

- A. Develop effective working relationships with Committee members;
- B. Solicit nominations for membership in accordance with the appropriate HHS procedures;
- C. Sign the annual report, along with the presiding officer;
- D. Serve as liaison between members and operating agencies' staff; and
- E. Plan, coordinate, and organize Committee and subcommittee meetings and activities, including:
 - 1. Schedule meeting dates and ensure meeting sites are set up;
 - 2. Notify members at least five working days before upcoming meeting dates, times, and locations;
 - 3. Develop agenda and support materials for each meeting;
 - 4. Ensure that each agenda includes "Public comment" as an agenda item.
 - 5. Submit the approved agenda to post on the Secretary of State's Open Meetings website, the HHS website, and the DSHS website in a timely manner;
 - 6. Serve as point of contact for the public including ensuring that contact information, agendas, and meeting support materials are easily accessible on the HHS and DSHS websites;
 - 7. Prepare and distribute information and materials for member review;
 - 8. Prepare and maintain committee records and documentation in accordance with the DSHS records retention policy; and
 - 9. Assist eligible members with travel arrangements and reimbursement.
- F. Coordinate as needed to provide any reasonable accommodations and supports required for a Committee member

- who has a disability to enable the member to fully participate in Committee meetings and activities; and
- G. Perform other duties within staff discretion provided the necessary resources are available.

14. Compensation and Travel Reimbursement

To the extent permitted by the current General Appropriations Act and if funds are available, DSHS may reimburse actual travel expenses to and from meetings for consumer members of the Texas HIV Medication Advisory Committee. Reimbursement will comply with DSHS travel policy. Other members are responsible for their own travel expenses.

Members eligible for travel reimbursement are subject to rates established in the General Appropriations Act. DSHS staff will help members request reimbursement. Committee members must provide the required information as per instructions provided within 14 days of the meeting.

A member who requests travel reimbursement must:

- A. Keep accurate records of allowable travel expenses (per the DSHS travel policy) during travel to attend committee meetings; and
- B. Submit receipts and appropriate documentation to DSHS staff within 14 days of the meeting.

A person who serves on a subcommittee and who is not a Committee member does not qualify to be reimbursed for travel expenses.

Bylaws approved on _____ by a two-thirds vote of members attending the meeting.

Chairperson Printed Name: _____

Chairperson Signature: _____

DSHS Printed Name: _____

DSHS Signature: _____

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Appendix 1. Statement by Members

- The Department of State Health Services and the Texas HIV Medication Advisory Committee (“Committee”) are not bound in any way by any statement or action on the part of any committee member except when a statement or action is in pursuit of specific instructions from DSHS or the Committee.
- The Committee and its members may not participate in legislative or advocacy activities using their title or position on this Committee without approval from the Committee Chair and the HHS Ethics Office in coordination with the HHSC Government and Stakeholder Relations Office. Committee members are not prohibited from representing themselves or other entities in the legislative or advocacy process.
- A Committee member may not accept payment for services that are requested because of the members’ title or position on this Committee.
- A Committee member should not accept or solicit any benefit that might reasonably tend to influence the member in the discharge of the member's official committee duties.
- A Committee member should not knowingly solicit, accept, or agree to accept any benefit for exercising the member's official powers or duties in favor of another person.
- A Committee member shall complete the Texas Open Meetings Act Training and the Public Information Act Training within 90 days of appointment and submit the Certificates of Completion to DSHS staff. A member who took the training within the last five years may submit a copy of their Certificate of Completion to DSHS staff in lieu of retaking the training.
- Nondisclosure agreement. A Committee member may not disclose confidential or agency-generated information, including draft information, acquired through their committee membership, unless release is approved in writing by the HHS Executive Commissioner. This requirement survives the member’s tenure on the Committee. In addition, the member must confirm that he or she will require the member’s interpreters, attendants or other support persons, if any, to comply with this requirement. For purposes of the Nondisclosure Agreement, the term “confidential information” includes all information protected by the Health Insurance Portability and Accountability Act (HIPAA), information that has commercial value or use, such as trade secrets, and information communicated in confidence by the HHS System.

- Conflict of Interest Statement. A Committee member agrees to disclose any personal or private interest that the member or their family have in a measure, proposal, or decision pending before DSHS. (“Personal or private interest” does not include the member’s engagement in a profession, trade, or occupation when the member’s interest is the same as all others similarly engaged in the profession, trade, or occupation, or if the member merely provides a personal experience, with no personal or private financial interest, in giving feedback on the subject matter.) If there is a direct personal or financial interest in a motion under consideration, the member further agrees to disclose that fact in a public meeting and will recuse themselves from any Committee deliberations or decisions on that matter.

I have received a copy of the Texas HIV Medication Advisory Committee Bylaws. I understand that as a member of the Committee, I must adhere to the bylaws.

Advisory Committee Member Signature: _____

Printed Name: _____

Date: _____

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Appendix 2: Revisions Tracking Page

Document Version #	Revision Date	Revisions / Purpose	Author
	6/16/2018	Bylaws created.	MAC, THMP
	TBD 2022	Annual review with revisions.	MAC, THMP, HCCEG, ACCO