

# TRANSFERRED RULES

The Government Code, §2002.058, authorizes the Secretary of State to remove or transfer rules within the Texas Administrative Code when the agency that promulgated the rules is abolished. The Secretary of State will publish notice of rule transfer or removal in this section of the *Texas Register*. The effective date of a rule transfer is the date set by the legislature, not the date of publication of notice. Proposed or emergency rules are not subject to administrative transfer.

## Department of State Health Services

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, certain functions previously performed by the Department of State Health Services (DSHS), including client services, certain regulatory functions, and the operation of state hospitals, transferred to the Texas Health and Human Services Commission (HHSC) in accordance with Texas Government Code, §531.0201 and §531.02011. The DSHS rules in Texas Administrative Code, Title 25, Part 1, Chapter 405, Patient Care--Mental Health Services, Subchapter K, Deaths of Individuals Served by Community Mental Health Centers that are related to these transferred functions, are being transferred to HHSC under Texas Administrative Code, Title 26, Part 1, Chapter 301, Local Authority Responsibilities, Subchapter H, Deaths of Individuals Served by Community Mental Health Centers.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 25 TAC Chapter 405, Subchapter K  
TRD-202404392

Figure: 25 TAC Chapter 405, Subchapter K

<b>Current Rules</b>	<b>Move to</b>
<b>Title 25. Health Services</b>	<b>Title 26. Health and Human Services</b>
<b>Part 1. Department of State Health Services</b>	<b>Part 1. Health and Human Services Commission</b>
<b>Chapter 405. Patient Care--Mental Health Services</b>	<b>Chapter 301. Local Authority Responsibilities</b>
<b>Subchapter K. Deaths of Individuals Served by Community Mental Health Centers</b>	<b>Subchapter H. Deaths of Individuals Served by Community Mental Health Centers</b>
§405.261. Purpose.	§301.401. Purpose.
§405.262. Application.	§301.403. Application.
§405.263. Definitions.	§301.405. Definitions.
§405.266. Community Centers: Actions Taken upon the Death of an Individual Served.	§301.407. Community Centers: Actions Taken upon the Death of an Individual Served.
§405.268. Community Centers: General Guidelines upon Death of an Individual Served.	§301.409. Community Centers: General Guidelines upon Death of an Individual Served.
§405.269. Community Centers: Administrative Death Review Determination.	§301.411. Community Centers: Administrative Death Review Determination.
§405.272. Community Centers: Clinical Death Review Determination.	§301.413. Community Centers: Clinical Death Review Determination.
§405.274. Community Centers: Clinical Death Review.	§301.415. Community Centers: Clinical Death Review.
§405.275. Community Centers: Administrative Death Review.	§301.417. Community Centers: Administrative Death Review.
§405.276. Reporting of Systemic Issues Emerging from Death Reviews.	§301.419. Reporting of Systemic Issues Emerging from Death Reviews.

## Health and Human Services Commission

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, certain functions previously performed by the Department of State Health Services (DSHS), including client services, certain regulatory functions, and the operation of state hospitals, transferred to the Texas Health and Human Services Commission (HHSC) in accordance with Texas Government Code, §531.0201 and §531.02011. The DSHS rules in Texas Administrative Code, Title 25, Part 1, Chapter 405, Patient Care--Mental Health Services, Subchapter K, Deaths of Individuals Served by Community Mental Health Centers that are related to these transferred functions, are being transferred to HHSC under Texas Administrative Code, Title 26, Part 1, Chapter 301, Local Authority Responsibilities, Subchapter H, Deaths of Individuals Served by Community Mental Health Centers.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 25 TAC Chapter 405, Subchapter K  
TRD-202404393

## Department of Aging and Disability Services

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, some agencies were abolished and their functions transferred to the Texas Health and Human Services Commission (HHSC). Texas Government Code, §531.0202(b), specified the Department of Aging and Disability Services (DADS) be abolished September 1, 2017, after all its functions were transferred to HHSC in accordance with Texas Government Code, §531.0201 and §531.02011. The former DADS rules in Texas Administrative Code, Title 40, Part 1, Chapter 46, Contracting To Provide Assisted Living And Residential Care Services are being transferred to Texas Administrative Code, Title 26, Part 1, Chapter 276, Contracting To Provide Assisted Living And Residential Care Services.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 40 TAC Chapter 46

TRD-202404390

Figure: 40 TAC Chapter 46

<b>Current Rules</b>	<b>Move to</b>
<b>Title 40. Social Services And Assistance</b>	<b>Title 26. Health and Human Services</b>
<b>Part 1. Department Of Aging And Disability Services</b>	<b>Part 1. Health and Human Services Commission</b>
<b>Chapter 46. Contracting To Provide Assisted Living And Residential Care Services</b>	<b>Chapter 276. Contracting To Provide Assisted Living And Residential Care Services</b>
<b>Subchapter A. Introduction</b>	<b>Subchapter A. Introduction</b>
§46.1. Purpose.	§276.1. Purpose.
§46.3. Definitions.	§276.3. Definitions.
<b>Subchapter B. Provider Contracts</b>	<b>Subchapter B. Provider Contracts</b>
§46.11. Contracting Requirements.	§276.11. Contracting Requirements.
§46.13. Housing Options.	§276.13. Housing Options.
§46.15. Additional Services and Fees.	§276.15. Additional Services and Fees.
§46.19. Recordkeeping.	§276.19. Recordkeeping.
§46.21. Reimbursement.	§276.21. Reimbursement.
§46.23. Financial Errors.	§276.23. Financial Errors.
<b>Subchapter C. Provider Requirements</b>	<b>Subchapter C. Provider Requirements</b>
§46.31. Staff Requirements.	§276.31. Staff Requirements.
§46.33. Staff Training.	§276.33. Staff Training.
§46.35. Interdisciplinary Team.	§276.35. Interdisciplinary Team.
§46.37. Copayment and Room and Board.	§276.37. Copayment and Room and Board.
§46.39. Service Initiation.	§276.39. Service Initiation.
§46.41. Required Services.	§276.41. Required Services.
§46.43. Service Plan Changes.	§276.43. Service Plan Changes.
§46.45. Required Notifications.	§276.45. Required Notifications.
§46.47. Suspension of Services.	§276.47. Suspension of Services.
§46.49. Institutional Leave.	§276.49. Institutional Leave.
§46.51. Personal Leave.	§276.51. Personal Leave.
§46.53. Client Terminations.	§276.53. Client Terminations.
<b>Subchapter D. Trust Funds</b>	<b>Subchapter D. Trust Funds</b>
§46.61. Trust Fund Management.	§276.61. Trust Fund Management.
§46.63. Trust Fund Bank Account.	§276.63. Trust Fund Bank Account.
§46.65. Trust Fund Transactions.	§276.65. Trust Fund Transactions.
§46.67. Trust Fund Documentation.	§276.67. Trust Fund Documentation.
§46.69. Trust Fund Refunds.	§276.69. Trust Fund Refunds.
§46.71. Trust Fund Procedures for Client Discharge.	§276.71. Trust Fund Procedures for Client Discharge.

## Health and Human Services Commission

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, some agencies were abolished and their functions transferred to the Texas Health and Human Services Commission (HHSC). Texas Government Code, §531.0202(b), specified the Department of Aging and Disability Services (DADS) be abolished September 1, 2017, after all its functions were transferred to HHSC in accordance with Texas Government Code, §531.0201 and §531.02011. The former DADS rules in Texas Administrative Code, Title 40, Part 1, Chapter 46, Contracting To Provide Assisted Living And Residential Care Services are being transferred to Texas Administrative Code, Title 26, Part 1, Chapter 276, Contracting To Provide Assisted Living And Residential Care Services.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 40 TAC Chapter 46

TRD-202404391

## Department of Aging and Disability Services

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, some agencies were abolished and their functions transferred to the Texas Health and Human Services Commission (HHSC). Texas Government Code, §531.0202(b), specified the Department of Aging and Disability Services (DADS) be abolished September 1, 2017, after all its functions were transferred to HHSC in accordance with Texas Government Code, §531.0201 and §531.02011. The former DADS rules in Texas Administrative Code, Title 40, Part 1, Chapter 58, Contracting to Provide Special Services to Persons with Disabilities are being transferred to Texas Administrative Code, Title 26, Part 1, Chapter 282, Contracting to Provide Special Services to Persons with Disabilities.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 40 TAC Chapter 58

TRD-202404388

## Health and Human Services Commission

### Rule Transfer

During the 84th Legislative Session, the Texas Legislature passed Senate Bill 200, addressing the reorganization of health and human services delivery in Texas. As a result, some agencies were abolished and their functions transferred to the Texas Health and Human Services Commission (HHSC). Texas Government Code, §531.0202(b), specified the Department of Aging and Disability Services (DADS) be abolished September 1, 2017, after all its functions were transferred to HHSC in accordance with Texas Government Code, §531.0201 and §531.02011. The former DADS rules in Texas Administrative Code, Title 40, Part 1, Chapter 58, Contracting to Provide Special Services to Persons with Disabilities are being transferred to Texas Administrative Code, Title 26, Part 1, Chapter 282, Contracting to Provide Special Services to Persons with Disabilities.

The rules will be transferred in the Texas Administrative Code effective October 18, 2024.

The following table outlines the rule transfer:

Figure: 40 TAC Chapter 58

TRD-202404389

Figure: 40 TAC Chapter 58

<b>Current Rules</b> <b>Title 40. Social Services and Assistance</b> <b>Part 1. Department of Aging and Disability Services</b> <b>Chapter 58. Contracting to Provide Special Services to Persons with Disabilities</b>	<b>Move to</b> <b>Title 26. Health and Human Services</b> <b>Part 1. Health and Human Services Commission</b> <b>Chapter 282. Contracting to Provide Special Services to Persons with Disabilities</b>
<b>Subchapter A. Introduction</b>	<b>Subchapter A. Introduction</b>
§58.1. What is the purpose of this chapter?	§282.1. What is the purpose of this chapter?
§58.3. What do certain words and terms in this chapter mean?	§282.3. What do certain words and terms in this chapter mean?
<b>Subchapter B. Provider Agency Contracts</b>	<b>Subchapter B. Provider Agency Contracts</b>
§58.11. What general contract requirements must the provider agency follow?	§282.11. What general contract requirements must the provider agency follow?
§58.13. What are the settings in which the provider agency may deliver services?	§282.13. What are the settings in which the provider agency may deliver services?
§58.15. How is written information sent to DHS?	§282.15. How is written information sent to DHS?
<b>Subchapter C. Plan of Operation</b>	<b>Subchapter C. Plan of Operation</b>
§58.21. Must the provider agency develop a plan of operation?	§282.21. Must the provider agency develop a plan of operation?
§58.23. What must the provider agency's plan of operation include?	§282.23. What must the provider agency's plan of operation include?
§58.25. Who approves the provider agency's plan of operation?	§282.25. Who approves the provider agency's plan of operation?
§58.27. How must the provider agency request approval of the plan of operation?	§282.27. How must the provider agency request approval of the plan of operation?
§58.29. When must the provider agency request approval of the plan of operation?	§282.29. When must the provider agency request approval of the plan of operation?
§58.31. When must the provider agency notify the contract manager of a change made to the plan of operation?	§282.31. When must the provider agency notify the contract manager of a change made to the plan of operation?
§58.33. How must the provider agency notify the contract manager of a change to the plan of operation?	§282.33. How must the provider agency notify the contract manager of a change to the plan of operation?
§58.35. How will the provider agency know that a change to the plan of operation has been approved?	§282.35. How will the provider agency know that a change to the plan of operation has been approved?
§58.37. When must the provider agency implement a change to the plan of operation?	§282.37. When must the provider agency implement a change to the plan of operation?
<b>Subchapter D. Staff Development</b>	<b>Subchapter D. Staff Development</b>
§58.41. What are the provider agency's responsibilities for staff development?	§282.41. What are the provider agency's responsibilities for staff development?

§58.43. What must the provider agency's written plan for staff development include?	§282.43. What must the provider agency's written plan for staff development include?
§58.45. What initial training must the provider agency give staff?	§282.45. What initial training must the provider agency give staff?
§58.47. Which training requirements may be waived?	§282.47. Which training requirements may be waived?
§58.49. How must the provider agency request a waiver for the additional 21 hours of training?	§282.49. How must the provider agency request a waiver for the additional 21 hours of training?
§58.51. When must the provider agency request a waiver for the additional 21 hours of training?	§282.51. When must the provider agency request a waiver for the additional 21 hours of training?
§58.53. How will the provider agency know if the waiver request is approved?	§282.53. How will the provider agency know if the waiver request is approved?
§58.55. Can a staff member who requires a waiver provide any services before approval of the waiver?	§282.55. Can a staff member who requires a waiver provide any services before approval of the waiver?
§58.57. What information must the provider agency include in the request for a waiver?	§282.57. What information must the provider agency include in the request for a waiver?
§58.59. What ongoing training must the provider agency give staff?	§282.59. What ongoing training must the provider agency give staff?
§58.61. What must the provider agency include in the ongoing training?	§282.61. What must the provider agency include in the ongoing training?
<b>Subchapter E. Service Delivery</b>	<b>Subchapter E. Service Delivery</b>
§58.71. What services must the provider agency deliver?	§282.71. What services must the provider agency deliver?
§58.73. What is the client's service plan?	§282.73. What is the client's service plan?
§58.75. Who must develop the service plan?	§282.75. Who must develop the service plan?
§58.77. When must the provider agency develop the service plan?	§282.77. When must the provider agency develop the service plan?
§58.79. When must the provider agency initiate services?	§282.79. When must the provider agency initiate services?
<b>Subchapter F. Emergencies</b>	<b>Subchapter F. Emergencies</b>
§58.91. What is considered an emergency?	§282.91. What is considered an emergency?
§58.93. Who must the provider agency notify of emergencies?	§282.93. Who must the provider agency notify of emergencies?
§58.95. When must the provider agency notify the required persons of emergencies?	§282.95. When must the provider agency notify the required persons of emergencies?
§58.97. How must the provider agency notify the required persons of emergencies?	§282.97. How must the provider agency notify the required persons of emergencies?
§58.99. What information must the provider agency give to the required persons in the notice of emergencies?	§282.99. What information must the provider agency give to the required persons in the notice of emergencies?
§58.101. Where must the provider agency maintain documentation of emergencies?	§282.101. Where must the provider agency maintain documentation of emergencies?

§58.103. What documentation of emergencies must the provider agency maintain?	§282.103. What documentation of emergencies must the provider agency maintain?
<b>Subchapter G. Additional Requirements for 24-Hour Shared Attendant Care</b>	<b>Subchapter G. Additional Requirements for 24-Hour Shared Attendant Care</b>
§58.111. What are the additional requirements for provider agencies delivering services in a 24-Hour Shared Attendant Care setting?	§282.111. What are the additional requirements for provider agencies delivering services in a 24-Hour Shared Attendant Care setting?
§58.113. What are the additional initial training requirements for provider agencies delivering services in a 24-Hour Shared Attendant Care setting?	§282.113. What are the additional initial training requirements for provider agencies delivering services in a 24-Hour Shared Attendant Care setting?
§58.115. Which tasks in 24-Hour Shared Attendant Care require physician's orders?	§282.115. Which tasks in 24-Hour Shared Attendant Care require physician's orders?
<b>Subchapter H. Additional Requirements for Services Provided in an Adult Day Care Facility</b>	<b>Subchapter H. Additional Requirements for Services Provided in an Adult Day Care Facility</b>
§58.121. What are the additional requirements for provider agencies delivering services in an adult day care facility setting?	§282.121. What are the additional requirements for provider agencies delivering services in an adult day care facility setting?
§58.123. What are the additional initial training requirements for provider agencies delivering services in an adult day care facility setting?	§282.123. What are the additional initial training requirements for provider agencies delivering services in an adult day care facility setting?
<b>Subchapter I. Claims Payment and Documentation Requirements</b>	<b>Subchapter I. Claims Payment and Documentation Requirements</b>
§58.133. What are the service delivery documentation requirements for the SSPD Program?	§282.133. What are the service delivery documentation requirements for the SSPD Program?
§58.135. How do persons delivering services certify that they delivered the documented services?	§282.135. How do persons delivering services certify that they delivered the documented services?

