

# Task Force of Border Health Officials

## Bylaws

### 1. Name and Legal Authority

The Task Force of Border Health Officials (Task Force) is established in accordance with [Texas Health and Safety Code, Chapter 120 \(Task Force of Border Health Officials\)](#).

Texas Government Code, Chapter 2110 (State Agency Advisory Committees) does not apply to the Task Force, as provided by [Texas Health and Safety Code, Section 120.102 \(Application of Other Law\)](#).

Under [Health and Safety Code, Section 120.002 \(Sunset Provision\)](#), this Task Force is abolished on September 1, 2029, unless continued in existence as provided by [Chapter 325, Government Code \(Texas Sunset Act\)](#).

### 2. Purpose and Role

The purpose of the Task Force is to advise the Texas Department of State Health Services (DSHS) Commissioner on topics outlined in [Texas Health and Safety Code, Section 120.051\(a\) \(Task Force Duties\)](#), as described below:

1. Policy priorities addressing major issues affecting the border region residents' health and health conditions;
2. Raising public awareness of the issues described above; and
3. Other health issues impacting the border region as determined by the DSHS Commissioner.

[Texas Health and Safety Code, Section 120.051 \(b\) and \(c\) \(Task Force Duties\)](#), details requirement for a report of recommendations the Task Force must submit to the DSHS Commissioner, as described below:

1. The Task Force studies and makes recommendations relating to the health problems, conditions, challenges, and needs of the population in the border region; and

2. The Task Force submits a report of recommendations to the DSHS Commissioner for short-term and long-term border plans not later than November 1 of each even-numbered year.

### 3. Definitions

1. **Border region:** The area consisting of the counties immediately adjacent to the international boundary between the United States and Mexico. ([Texas Health and Safety Code, Section 120.001 \(1\)](#)).
2. **Commissioner:** The Commissioner of DSHS.
3. **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.
4. **DSHS:** The Texas Department of State Health Services.
5. **HHS:** Texas Health and Human Services.
6. **HHS Executive Commissioner:** The Executive Commissioner of HHS.
7. **HHSC:** The Texas Health and Human Services Commission.
8. **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.
9. **OBPH:** DSHS Office of Border Public Health.
10. **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.
11. **Subject Matter Expert (SME):** An individual who by education, training, or experience is a recognized expert on a particular subject, topic, or system.

#### 4. Task Force Composition

The composition of the Task Force is outlined in [Texas Health and Safety Code, Section 120.053 \(Composition; Terms\)](#), as described below:

1. Health department directors appointed under the Texas Health and Safety Code § 121.033, from each county in the border region and from each municipality in the border region that has a sister city in Mexico;
2. Two ex officio, non-voting members who are members of the Legislature, one appointed by the Lieutenant Governor and one appointed by the Speaker of the House; and
3. Additional members appointed by the DSHS Commissioner.

#### 5. Member Terms

1. **Health department director member:** Serves on the Task Force for the duration that person is the director of a health department in the border region.
2. **Ex officio member:** A member of the Legislature serves a three-year term, as outlined in [Texas Health and Safety Code, Section 120.053\(a\)\(2\) and \(c\)](#).
3. **DSHS Commissioner appointed member:** Serves at the discretion of the DSHS Commissioner.

#### 6. Resignations and Vacancies

1. **Health department director member:** When a health department director position is vacated, their replacement or interim director will be invited to join the Task Force.
2. **Ex officio member:** In the event of a vacancy, DSHS will work to solicit a replacement nomination from the Lieutenant Governor and/or the Speaker of the House of Representatives.

#### 7. Presiding Chair and Vice-Chair

Designation of Chair and Vice-Chair of the Task Force must follow the process outlined in [Texas Health and Safety Code, Section 120.053\(b\) \(Composition; Terms\)](#).

#### 8. Committee Operations and Meetings

The Task Force must meet in accordance with [Texas Health and Safety Code, Section 120.054 \(Meetings\)](#).

The Task Force is subject to [Texas Government Code, Chapter 551 \(Texas Open Meetings Act\)](#).

- a. To the extent not superseded by the Open Meetings Act or any other applicable law or rule, the Task Force shall conduct its meetings using Robert's Rules of Order as a guide.

## **9. Quorum:**

If less than a quorum of the Task Force is present, members may hear public comments so long as the meeting is being conducted in accordance with the [Open Meetings Act](#).

A quorum consists of a majority (more than 50%) of all voting members of the Task Force. Ex officio members are not counted when defining quorum.

## **10. Voting**

1. Voting 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 that could present or reasonably appear to present, a conflict of interest.
2. The Task Force may determine procedural matters by majority vote of the voting members attending the meeting or may use Robert's Rules of Order as a guide to its operations and proceedings.
3. A member may participate and, if the member is a voting member, vote in person or by videoconference call, as deemed necessary by agency staff.
4. A member may not authorize another individual to vote by proxy.
5. For all business except adopting or amending bylaws, a simple majority is needed on a motion duly made and seconded.
6. Each member of the Task Force, other than the two *ex officio* members of the Legislature, shall have one vote.

## **11. Adoption and Revision to Bylaws**

1. The Task Force will adopt and amend bylaws pursuant to a two-thirds vote (of voting members attending the meeting) on a motion duly made and seconded.
2. Task Force members or DSHS may propose changes to these bylaws. All proposed changes from Task Force members, along with the rationale for the changes, should be submitted in writing to DSHS at least 30 days before the next Task Force meeting. DSHS staff will ensure an item for bylaws discussion is included on the agenda to be posted on the [Secretary of State's Open Meetings website](#). Proposed changes to the bylaws must be distributed to the members before the meeting for their consideration.
3. The Task Force will review the bylaws by December 31 of every even-numbered year.
4. All proposed changes are subject to review and approval by DSHS staff.
5. The bylaws will become effective as of the date they are adopted by the Task Force. The Task Force 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 bylaws are adopted or amended (see attached Statement).

## **12. Responsibilities of Members**

1. **Attendance:** Members are encouraged to attend all meetings in person or by videoconference call. A voting member unable to attend a meeting should notify DSHS staff in advance. DSHS staff will notify the Chair and appropriate program staff. Members, other than *ex officio* or state agency representative members, may not send a substitute to attend a meeting in their place.
2. **Member expectations:** Except for *ex officio* members, members are expected to:
  - a. Attend Task Force meetings in person or by videoconference call;
  - b. Review agendas and other information sent by DSHS staff prior to each meeting;
  - c. Participate in discussions at meetings;
  - d. Attend in an orientation session for the Task Force;
  - e. Complete the [Texas Open Meetings Act](#) and [Public Information Act](#) trainings, within 90 days of appointment and submit the

Certificates of Completion to DSHS staff. A member who has taken the trainings within the last five years may submit a copy of the Certificates of Completion to DSHS staff instead of retaking the trainings;

- f. Sign and submit to DSHS staff the [Statement by Members](#) document (attached) within 30 days after appointment. This document includes a Conflict of Interest Statement and a Nondisclosure Agreement to which Task Force members must agree;
  - g. Notify the Task Force Chair and DSHS staff if a change of status alters the category of membership that the member was filling or if any circumstance occurs that prevents the member from being able to discharge his or her duties;
  - h. Maintain a high level of integrity that warrants public trust, including complying with all applicable ethics guidance provided by [HHS Ethics Office](#) and all aspects of the [Texas Open Meetings Act](#) and [Public Information Act](#); and
  - i. Hold and maintain in strictest confidence all confidential information and all agency-generated information, including information in draft form, until such time as the information or document is released and made public, the DSHS Commissioner has approved the release in writing, or the HHS Ethics Policy permits release. This requirement survives the member's tenure on the Task Force. 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.
- 3. Restrictions:** A Task Force member may not:
- 1. Claim or appear to represent DSHS, HHSC, or the Task Force in any legislative or advocacy activity without written approval from the Task Force Chair and the HHS Ethics Office in coordination with DSHS staff. A member is not prohibited from discussing a report that has been formally adopted by this Task Force, so long as he or she does not purport to represent DSHS. A member is not prohibited from representing him- or herself or another entity in the legislative or advocacy process. This does not apply to an *ex officio*

members' actions in his or her capacity as a member of the Legislature.

2. Accept payment for any services offered to the member because of his or her position on the Task Force.
3. Disclose confidential information or draft information (from any source including grants, requests for proposals, and contracts) acquired through his or her participation on the Task Force until such time as that information or document is released and made public, the DSHS Commissioner has approved the release in writing, or the HHS Ethics Office permits release. Members cannot disclose confidential information using any form of communication including written, digital, verbal, and social media. This also applies to members' interpreters, attendants, or other support persons, if any.

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

### **13. Subcommittees**

1. Unless otherwise noted in statute, the Chair, with the approval of DSHS staff, may establish subcommittees that meet at other times for purposes of studying and making recommendations on issues the Task Force determines appropriate to the charge.
2. A subcommittee may be created for a limited time and will cease to exist when the assigned tasks are completed or upon determination of the Chair or the DSHS Commissioner, or it may be a standing subcommittee. The Chair and DSHS staff will evaluate the need for all existing subcommittees annually.
3. Subcommittee Operations and Meetings
  1. Unless otherwise noted in statute, members of subcommittees are required to be members of the Task Force.
  2. Except as set out in part 4 below, subcommittee(s) shall follow the general rules of the Task Force as applicable.
  3. Subcommittee(s) must keep minutes of the meetings and report back to the full body.
  4. The presence of a quorum of the full Task Force at a subcommittee meeting:
    - a. Constitutes a full Task Force meeting that requires posting appropriate notice of the meeting as a full Task Force meeting in accordance with the [Texas Open Meetings Act](#); and

- b. Requires the subcommittee meeting to be held in compliance with the [Texas Open Meetings Act](#), including posting appropriate notice of the subcommittee meeting.

#### **14. Subject Matter Experts**

DSHS recognizes the value of subject matter experts (SMEs) to provide information to the Task Force and subcommittee(s) as it develops recommendations and initiatives relative to its purpose and task(s). The primary role of a SME is to provide objective, independent information and analysis for consideration by the Task Force. SME participation will be subject to the request of Task Force members and will fall within the following guidelines:

1. The Chair or Vice-Chair, and DSHS may invite a SME to provide information on specific subjects and topics;
2. DSHS, the Chair, or Vice-Chair may recognize an invited SME to provide information or analysis during allotted time periods at a specified Task Force or subcommittee meeting;
3. DSHS, the Chair, or Vice-Chair may request the SME participate in questions and answers;
4. All SMEs will participate and serve at the pleasure of the Task Force;
5. SMEs do not hold any official capacity on the Task Force or subcommittees and do not have rights of deliberation or the right to vote on any Task Force activities or decisions;
6. SMEs should disclose any conflicts of interest they may have prior to providing information to the Task Force; and
7. None of the information or guidance contained in this section shall prevent any individual from participating in or providing comments to the Task Force as allowed under the [Texas Open Meetings Act](#).

#### **15. Responsibilities of Support Staff**

1. DSHS staff will be present at all Task Force and subcommittee activities. DSHS staff will provide reasonable administrative and technical support and coordination. DSHS will coordinate as needed to provide reasonable accommodations and supports needed by a Task Force member requiring accommodations to enable him or her to fully participate in Task Force and subcommittee meetings and activities.
2. Staff is expected to perform the following tasks:

- a. Develop and maintain effective working relationships with Task Force members; and
- b. Serve as liaison between members and DSHS; and
- c. Plan, coordinate, and organize Task Force and subcommittee meetings and activities; and
- d. Perform other duties within staff discretion provided the necessary resources are available.

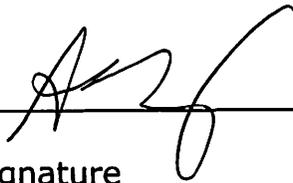
**16. Compensation and Travel Reimbursement**

A member of the Task Force is not entitled to any compensation (stipend) or reimbursement of expenses.

**17. Amendments**

Bylaws approved as amended on April 9, 2025, unanimously by members attending the meeting.

Arturo Rodriguez  
 Chair  
 Printed Name

  
 Signature

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 DSHS  
 Printed Name

\_\_\_\_\_  
 Signature

## Statement by Members

- The Texas Department of State Health Services (DSHS), Texas Health and Human Services Commission (HHSC), and the Task Force of Border Health Officials (Task Force) are not bound in any way by any statement or action on the part of any Task Force member except when a statement or action is in pursuit of specific instructions from DSHS, HHSC, or the Task Force.
- The Task Force and its members may not claim or appear to represent DSHS, HHSC, or the Task Force in any legislative or advocacy activity without approval from the Task Force chair and the HHS Ethics Office in coordination with DSHS Government Affairs. Task Force members are not prohibited from discussing a report that has been formally adopted by this Task Force, so long as members do not purport to represent DSHS. Task Force members are not prohibited from representing themselves or other entities in the legislative or advocacy process.
- A Task Force member may not accept payment for services that are requested because of the members' title or position on this Task Force.
- A Task Force member shall not accept or solicit any benefit that might reasonably tend to influence the member in the discharge of the member's official Task Force duties.
- A Task Force member shall not knowingly solicit, accept, or agree to accept any benefit for having exercised the member's official powers or duties in favor of another person.
- A Task Force 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. A member who has taken the training within the last five years may submit a copy of the Certificate of Completion to the DSHS in lieu of retaking the training.
- Nondisclosure agreement. A Task Force member may not disclose confidential information or agency-generated information, including information in draft form, acquired through his or her Task Force membership, unless DSHS has released and made public the information or document, the DSHS Commissioner has approved the release in writing, or the HHS Ethics Office permits release. This requirement survives the member's tenure on the Task Force. In addition, the Task Force 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 DSHS or the HHS System.
- Conflict of Interest Statement. A Task Force member agrees to disclose any personal or private interest that the member or their immediate family have in a measure, proposal, or decision pending before DSHS. 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 Task Force deliberations or decisions on that matter.

I have been provided a copy of the Task Force of Border Health Officials Bylaws. I understand that as a member of the Task Force I must adhere to the bylaws.

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Task Force Member Signature and Printed Name

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Date

## Revisions Tracking Page

Document Version #	Revision Date	Revisions / Purpose	Author
1	04-13-2018	Bylaws developed	
2	02-09-2022	First revision	
3	12-11-2024	Second revision: added, immediate family, and SME definitions; adjustments to the bylaws revision process.	ACCO/OBPH/Task Force
4	04-09-2025	Excluding ex officio when determining a quorum	OBPH/Task Force