

BILL ANALYSIS

C.S.H.B. 1921
By: Capelo
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

In 1994, the Texas Department of Health (TDH) established an immunization tracking system to monitor immunization rates for children across Texas. Additionally, this system serves as an information depository for providers who are then able to determine if a child's immunization record is up to date. For children who do not consistently see the same health care provider, the system serves to protect them from "over immunization." However, the current system lacks data from the private sector, and thus does not present an accurate report of the immunization rates in Texas. As proposed, C.S.H.B. 1921 would modify the state's current immunization tracking system, ImmTrac, to increase data collection.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas Board of Health in SECTION 4 (161.008, Health and Safety Code) and SECTION 6 of this bill. The bill modifies existing rulemaking authority granted to the Texas Department of Health in SECTION 6 of this bill.

ANALYSIS

CSHB 1921 keeps the ImmTrac registry as an opt-in registry. The bill specifically states that consent for the registry only needs to be obtained one time, including a signature on the child's birth certificate, and will remain effective until the child reaches the age of 18 or consent to be in the registry is withdrawn. Once TDH receives notice that consent has been withdrawn, TDH is required to remove all information from the registry and may not retain any individually identifiable information concerning a person for whom consent has been withdrawn. Before TDH can include any immunization information that they receive from a payor or health care provider, the bill requires TDH to verify that consent has been given. If TDH receives information for which they can not verify consent, the department may provide notice to the health care provider containing instructions on how consent may be obtained at the next visit.

This bill requires that TDH send out a written notice to the child's parent, managing conservator, or guardian disclosing various information concerning the registry the first time that TDH receives registry data for a child. If TDH receives a request to withdraw consent to be in the registry, TDH is required to remove all immunization records and any other registry-related department records that individually identifies a child no later than the 30th day after the request for removal has been received. The bill requires the department to send to the parent a written confirmation of receipt of the request and of the exclusion of their child's records.

The bill allows that a parent may directly submit immunization information to the department if they have a reasonable concern that their child's health care provider is not submitting the data to be included in the registry. The submission may be by mail or through a facsimile transmission.

CSHB 1921 specifically states that the registry information is confidential and provides for what is and is not appropriate use of the information.

Under this bill the Texas Department of Health is required to report to the Legislative Budget Board, the governor, the lieutenant governor, the speaker of the House, and appropriate committees no later than September 30 of each even-numbered year. The bill specifies various information that must be included in department's report.

Provides for immunity from civil and criminal liability for persons who act in compliance with the sections of this bill. The bill goes on to specify who the department may receive information from, and who the

information may be released to.

The bill provides that if a person negligently releases, discloses, or uses individually identifiable immunization registry information, they would be liable for a Class A misdemeanor.

The Texas Board of Health is required to adopt any rules necessary to implement the required procedures in this bill and any forms necessary no later than September 1, 2004.

The Texas Department of Health may not accept or release any data reported under Sections 161.007 (c) and (d) until they have adopted any necessary rules or forms required by this bill.

EFFECTIVE DATE

Upon passage, or, if the Act does not receive the necessary vote, the Act takes effect September 1, 2003. Sections 161.007 (c) and (d), Health and Safety Code takes effect September 1, 2004.

COMPARISON OF ORIGINAL TO SUBSTITUTE

CSHB 1921 differs from the original bill in that it leaves the ImmTrac system as an opt-in registry. The substitute specifically states that written consent, to be included in the registry, need only be obtained one time and is good until the child reaches the age of 18 unless the consent is withdrawn at a later date.

The substitute uses the word “payor” in place of the long phrase “an insurance company, a health maintenance organization, or another organization that pays or reimburses a claim.”

CSHB 1921 allows for a parent, managing conservator, or guardian of a child to provide the child’s immunization information directly to TDH, if they are concerned that the child’s health care provider is not submitting the information.