

## **BILL ANALYSIS**

C.S.H.B. 1969  
By: Coleman  
Public Health  
Committee Report (Substituted)

### **BACKGROUND AND PURPOSE**

The Centers for Disease Control and Prevention (CDC) reports that influenza and pneumococcal disease are major causes of debilitating illness and premature death in the United States, particularly among persons aged 65 years and older. The CDC recommends that healthcare providers should offer persons over 65 years old the pneumococcal vaccine year-round and should offer the influenza vaccine throughout the influenza season. In addition, the CDC Advisory Committee on Immunization Practices recommends that vaccination coverage can be increased by offering these vaccines to persons during hospitalization or routine healthcare visits, making special visits to physicians offices or clinics unnecessary.

Under current law, nursing homes are required to offer the influenza and pneumococcal vaccines to elderly residents. H.B. 1969 extends this requirement to hospitals, end stage renal disease facilities and physicians' offices in an attempt to increase vaccination coverage to this high risk category.

### **RULEMAKING AUTHORITY**

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission and to the Texas State Board of Medical Examiners in SECTION 1 of this bill.

### **ANALYSIS**

The substitute provides for the immunization of persons over 65 by hospitals, end stage renal disease facilities and physicians' offices. Elderly person, hospital and end stage renal disease facility are defined. The executive commissioner of Health and Human Services Commission (HHSC) is directed to require hospitals to inform each elderly person who is admitted to the hospital for 24 hours or more that the pneumococcal and influenza vaccines are available. If the person requests a vaccine, the hospital is required to make the vaccine available to the person before they are discharged from the hospital.

The executive commissioner of HHSC, by rule is directed to require an end stage renal disease facility to offer each elderly person who receives ongoing care at the facility the opportunity to receive the pneumococcal and influenza vaccines. The bill allows end stage renal disease facilities to determine the feasibility of offering the vaccines and if it is not feasible, the facility is required to provide the patient with information on other ways to obtain the vaccine.

Texas State Board of Medical Examiners (TSBME), by rule shall require a physician responsible for the management of a physician's office that provides ongoing medical care to elderly persons the opportunity to receive the pneumococcal and influenza vaccines. The bill allows the physician to determine the feasibility of offering the vaccines and if it is not feasible, the physician is required to provide the patient with information on other ways to obtain the vaccine.

Rules adopted under this act shall require hospitals, end stage renal disease facilities and physicians' offices to offer the influenza vaccine in October and November, and if the vaccine is available, December, as well as the pneumococcal vaccine year-round. A person administering a vaccine must ask whether the elderly person is currently vaccinated, administer the vaccine under approved protocols, and permanently document the vaccination in the elderly person's medical records.

The department is required to make available to hospitals and end stage renal disease facilities, and TSBME shall make available to physicians' offices educational and informational materials concerning vaccination against the influenza virus and pneumococcal disease. The executive commissioner of HHSC and the TSBME are required to consider the recommendations of the Advisory Committee on Immunization Practices of the CDC in adopting rules under this Act. Rules adopted under this Act may consider the potential for a shortage of vaccine.

#### **EFFECTIVE DATE**

September 1, 2005

#### **COMPARISON OF ORIGINAL TO SUBSTITUTE**

The substitute requires end stage renal disease facilities and physicians responsible for the management of a physician's office that provides ongoing care to elderly persons to offer the influenza and pneumococcal vaccines. The substitute directs TSBME to require physicians responsible for the management of a physicians' office that provides ongoing medical care to elderly persons to offer the vaccines and directs the executive director of HHSC to require end stage renal disease facilities to offer the vaccines. The substitute requires TSBME to make informational and educational materials available to physicians' offices and to also consider the recommendations of the Advisory Committee on Immunization Practices of the CDC. The substitute requires end stage renal disease facilities and physicians' offices to offer the influenza vaccine in October and November, and if the vaccine is available, December, as well as the pneumococcal vaccine year-round. A person administering a vaccine must ask whether the elderly person is currently vaccinated, administer the vaccine under approved protocols, and permanently document the vaccination in the elderly person's medical records.