By: Dukes H.B. No. 1677 Substitute the following for H.B. No. 1677: C.S.H.B. No. 1677 By: Truitt A BILL TO BE ENTITLED 1 AN ACT 2 relating to establishing a sentinel surveillance program for 3 respiratory syncytial virus. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 SECTION 1. Subtitle D, Title 2, Health and Safety Code, is 5 6 amended by adding Chapter 96 to read as follows: CHAPTER 96. RESPIRATORY SYNCYTIAL VIRUS 7 Sec. 96.001. DEFINITIONS. In this chapter: 8 (1) "Department" means the Department of State Health 9 10 Services. 11 (2) "Executive commissioner" means the executive 12 commissioner of the Health and Human Services Commission. 13 (3) "Health facility" includes: 14 (A) a general or special hospital licensed by the department under Chapter 241; 15 16 (B) a physician-owned or physician-operated 17 clinic; 18 (C) a publicly or privately funded medical 19 school; (D) a state hospital or state school maintained 20 21 and managed by the Department of State Health Services or the 22 Department of Aging and Disability Services; (E) a public health clinic conducted by a local 23 24 health unit, health department, or public health district organized

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C.S.H.B. No. 1677 1 and recognized under Chapter 121; and 2 (F) another facility specified by a rule adopted 3 by the executive commissioner. 4 (4) "Local health unit" has the meaning assigned by 5 Section 121.004. 6 (5) "RSV" means respiratory syncytial virus. Sec. 96.002. CONFIDENTIALITY. (a) Except as specifically 7 authorized by this chapter, reports, records, and information 8 9 furnished to a department employee or to an authorized agent of the department that relate to cases or suspected cases of a health 10 condition are confidential and may be used only for the purposes of 11 12 this chapter. (b) Reports, records, and information relating to cases or 13 14 suspected cases of health conditions are not public information 15 under Chapter 552, Government Code, and may not be released or made public on subpoena or otherwise except as provided by this chapter. 16 17 (c) The department may release medical, epidemiological, or toxicological information: 18 (1) for statistical purposes, if released in a manner 19 that prevents the identification of any person; 20 21 (2) to medical personnel, appropriate state agencies, 22 health authorities, regional directors, and public officers of counties and municipalities as necessary to comply with this 23 24 chapter and rules relating to the identification, monitoring, and 25 referral of children with RSV; or (3) to appropriate federal agencies, such as the 26 27 Centers for Disease Control and Prevention of the United States

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1	Public Health Service.
2	Sec. 96.003. LIMITATION OF LIABILITY. A health
3	professional, a health facility, or an administrator, officer, or
4	employee of a health facility subject to this chapter is not civilly
5	or criminally liable for divulging information required to be
6	released under this chapter, except in a case of gross negligence or
7	wilful misconduct.
8	Sec. 96.004. COOPERATION OF GOVERNMENTAL ENTITIES. Another
9	state board, commission, agency, or governmental entity capable of
10	assisting the department in carrying out the intent of this chapter
11	shall cooperate with the department and furnish expertise,
12	services, and facilities to the sentinel surveillance program.
13	Sec. 96.005. SENTINEL SURVEILLANCE PROGRAM. (a) The
14	executive commissioner shall establish in the department a program
15	to:
16	(1) identify by sentinel surveillance RSV infection in
17	children; and
18	(2) maintain a central database of
19	laboratory-confirmed cases of RSV that can be used to investigate
20	the incidence, prevalence, and trends of RSV.
21	(b) In establishing the sentinel surveillance program for
22	RSV, the executive commissioner shall consider:
23	(1) the number and geographic distribution of children
24	in the state;
25	(2) the location of health facilities that collect RSV
26	information locally; and
27	(3) the use of existing data collected by health

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1 facilities.

2 (c) The executive commissioner shall adopt rules to govern 3 the operation of the program and carry out the intent of this 4 chapter, including rules that specify a system for selecting the 5 demographic areas in which the department collects information.

6 <u>Sec. 96.006. DATA COLLECTION. (a) To ensure an accurate</u> 7 <u>source of data, the executive commissioner may require a health</u> 8 <u>facility or health professional to make available for review by the</u> 9 <u>department or by an authorized agent medical records or other</u> 10 <u>information that is in the facility's or professional's custody or</u> 11 <u>control and that relates to an occurrence of RSV.</u>

12 (b) The executive commissioner by rule shall prescribe the 13 manner in which data are reported to the department.

14 <u>Sec. 96.007. DATABASE. (a) Information collected and</u> 15 <u>analyzed by the department or an authorized agent under this</u> 16 <u>chapter may be placed in a central database to facilitate</u> 17 <u>information sharing and provider education.</u>

18 (b) The department may use the database to:

19(1) design and evaluate measures to prevent the20occurrence of RSV and other health conditions; and

21 (2) provide information and education to providers on 22 the incidence of RSV infection.

23 SECTION 2. Not later than November 1, 2005, the executive 24 commissioner of the Health and Human Services Commission shall 25 adopt rules as required by Section 96.005, Health and Safety Code, 26 as added by this Act.

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SECTION 3. This Act takes effect September 1, 2005.

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