BILL ANALYSIS

Senate Research Center 80R14756 MSE-D

H.B. 2132 By: Straus (Van de Putte) Health & Human Services 5/14/2007 Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

According to the Centers for Disease Control and Prevention, diabetes has become more than twice as common as it was just 20 years ago, and the Texas Diabetes Council reports that in 2005, 1.3 million adults in Texas had diabetes. Currently there is no electronic diabetes mellitus registry in Texas. A centralized database resource will allow researchers across the state to begin looking for ways to curtail this disease and to determine the root causes of diabetes.

H.B. 2132 establishes an electronic diabetes mellitus registry pilot program that tracks the prevalence of diabetes, the level of control individual patients are exerting over their diabetes, and the trends of new diagnoses of diabetes.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 2 of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. DIABETES MELLITUS REGISTRY PILOT PROGRAM. (a) Defines "department."

- (b) Requires the Department of State Health Services (DSHS) in coordination with a public health district (district) to develop and implement a pilot program to create and maintain a diabetes mellitus registry.
- (c) Requires DSHS to select to participate in the pilot program a district that serves a county with a population of less than two million and that contains a municipality with a population of over one million. Requires DSHS and the district to create an electronic registry to track the glycosylated hemoglobin level of each person who has a laboratory test to determine that level performed at a clinical laboratory in the district.
- (d) Requires a clinical laboratory located in the participating district to submit to the district and DSHS the results of each glycosylated hemoglobin test that the laboratory performs.
- (e) Requires DSHS and the participating district to compile certain results and promote discussion and public information programs regarding diabetes mellitus.
- (f) Provides that the participating district is solely responsible for the costs of establishing and administering the pilot program.

SECTION 2. RULES. Requires the executive commissioner of the Health and Human Services Commission to adopt rules to implement Section 1 of this Act, including rules to govern the format and method of collecting glycosylated hemoglobin data.

SECTION 3. CONFIDENTIALITY. (a) Provides that reports, records, and information obtained under this Act are confidential, privileged, not subject to disclosure under Chapter 552 (Public Information), Government Code, and not subject to subpoena, and are prohibited from otherwise being released or made public except as provided by this Act. Provides that the reports, records, and information obtained under this Act are for the confidential use of DSHS

and the district participating in the pilot program and the persons or public or private entities that DSHS and the district determine are necessary to carry out the intent of this Act.

- (b) Authorizes medical or epidemiological information to be released under certain conditions.
- (c) Prohibits an employee of this state or a district from testifying in a civil, criminal, special, or other proceeding as to the existence or contents of records, reports, or information concerning an individual whose medical records have been used in submitting data required under this Act unless the individual consents in advance.
- (d) Provides that data furnished to a diabetes mellitus registry or a diabetes researcher under Subsection (b) of this section is for the confidential use of the diabetes mellitus registry or the diabetes researcher, as applicable, and is subject to Subsection (a) of this section.
- SECTION 4. REPORT. Requires that DSHS, not later than December 1, 2009, to submit a report to certain elected officials and appropriate standing committees of the legislature regarding the diabetes mellitus pilot program that includes an evaluation of the effectiveness of the program and a recommendation to continue, expand, or eliminate the pilot program.
- SECTION 5. EXPIRATION. Provides that this Act expires September 1, 2010.
- SECTION 6. EFFECTIVE DATE. Effective date: upon passage or September 1, 2007.