

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE, 80TH LEGISLATIVE REGULAR SESSION

April 30, 2007

TO: Honorable Dianne White Delisi, Chair, House Committee on Public Health

FROM: John S. O'Brien, Director, Legislative Budget Board

IN RE: HB1896 by Howard, Donna (Relating to information submitted to and maintained in the immunization registry.), **Committee Report 1st House, Substituted**

No significant fiscal implication to the State is anticipated.

Under the requirements of the bill, the childhood immunization registry maintained by the Department of State Health Services (DSHS) would no longer be limited to children. The bill requires information in the immunization registry to be retained until a person's death. Health care providers are authorized, but not required, to submit data elements to the immunization registry for persons 18 years of age and older.

The bill requires DSHS to develop a program for informing first responders about the immunization registry and the benefits of being included in the registry. The bill requires DSHS to maintain, within the immunization registry, a registry of persons who receive an immunization, antiviral, or other medication administered to prepare for a potential disaster or public health emergency or in response to a declared disaster or public health emergency; the registry must track adverse reactions to these immunizations, antivirals, and other medications. Adverse or unexpected events related to vaccinations are added to the list of elements contained in an immunization record. The bill adds regional health information exchanges, local immunization registries, patients, and patients' legally authorized representatives to the list of entities from which data constituting an immunization record may be obtained. DSHS is required to consult with public health departments and appropriate health care providers to identify adult immunizations that may be necessary to respond to or prepare for a public health disaster.

Persons who sell, lease, or otherwise provide electronic medical records software packages or systems to persons who administer immunizations or entities that manage records for such persons must provide the ability to electronically interface with the immunization registry and to generate electronic reports containing the fields necessary to populate the immunization registry; the attorney general is authorized to bring action against any entity violating this requirement.

It is assumed that any costs to DSHS associated with modifications to the immunization registry and developing a program for first responders can be absorbed within available resources. There could be some offsetting savings from streamlining of processes, but they would not have a significant fiscal impact. It is assumed that any cost to the Office of the Attorney General from increased complaints, investigations or cases can be absorbed within available resources.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 302 Office of the Attorney General, 537 State Health Services, Department of

LBB Staff: JOB, CL, PP, LR