## LEGISLATIVE BUDGET BOARD Austin, Texas

## FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION

May 27, 2011

**TO:** Honorable David Dewhurst, Lieutenant Governor, Senate Honorable Joe Straus, Speaker of the House, House of Representatives

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

IN RE: SB156 by Huffman (Relating to health care data collected by the Department of State Health Services and access to certain confidential patient information within the department, including data and confidential patient information concerning bleeding and clotting disorders, and other issues related to bleeding and clotting disorders.), Conference Committee Report

## No significant fiscal implication to the State is anticipated.

The bill would allow the Department of State Health Services (DSHS) to disclose any data collected under the purview of the former Health Care Information Council and not included in public use data to any program within DSHS if it is reviewed and approved by the institutional review board. The bill would allow DSHS to disclose this data to any health and human services agency as defined by Section 531.001(4), Government Code, provided that confidentiality at the receiving agency could be ensured. All data that is confidential remains subject to confidentiality provisions. Provision of data to programs within DSHS is exempted from certain other requirements; disclosure of physician identifying data is prohibited.

The bill would re-establish the Texas Bleeding Disorders Advisory Council. The Council would be required to submit recommendations on certain issues to the governor and members of the legislature by December 1 of each even-numbered year and would require the commissioner of DSHS to report on implementation of the Council's recommendations. Both reports would be required to be made public. The commissioner, on behalf of the Council, would be authorized to accept gifts, grants, and donations, but the Council would be prohibited from accepting any funds appropriated by the legislature for the 2012-13 biennium; this provision would expire on September 1, 2013. The council would be abolished on September 1, 2015.

The bill would go into effect immediately if it received two-thirds vote in each house, otherwise it would take effect September 1, 2011.

According to DSHS, any cost to implement the provisions of the bill would be minimal and can be absorbed within existing resources.

## **Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 537 State Health Services, Department of, 529 Health and Human Services Commission

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