

By: Duncan

S.B. No. 1667

A BILL TO BE ENTITLED

AN ACT

relating to a chronic neurological disease registry; authorizing a fee.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subtitle D, Title 2, Health and Safety Code, is amended by adding Chapter 82A to read as follows:

CHAPTER 82A. CHRONIC NEUROLOGICAL DISEASE REGISTRY

Sec. 82A.001. DEFINITIONS. In this chapter:

(1) "Chronic neurological disease" means multiple sclerosis and Parkinson's disease.

(2) "Department" means the Department of State Health Services.

(3) "Executive commissioner" means the executive commissioner of the Health and Human Services Commission.

Sec. 82A.002. APPLICABILITY OF CHAPTER. This chapter applies to records of cases of chronic neurological diseases diagnosed on or after September 1, 2013, and to records of all ongoing chronic neurological disease cases diagnosed on or after January 1, 1984.

Sec. 82A.003. REGISTRY REQUIRED. The department shall maintain a chronic neurological disease registry for the state.

Sec. 82A.004. CONTENT OF REGISTRY. (a) The chronic neurological disease registry is a central data bank of accurate, precise, and current information that medical authorities agree

1 serves as an invaluable tool in research toward cures and
2 treatments for chronic neurological diseases.

3 (b) The chronic neurological disease registry must include:

4 (1) a record of the cases of chronic neurological
5 diseases that occur in the state; and

6 (2) information concerning chronic neurological
7 disease cases as the department considers necessary and appropriate
8 for the recognition, cure, or control of chronic neurological
9 diseases.

10 Sec. 82A.005. DEPARTMENT POWERS; RULES. (a) To implement
11 this chapter, the department may:

12 (1) execute necessary contracts;

13 (2) receive the data from medical records of cases of
14 chronic neurological diseases that are in the custody or under the
15 control of neurologists to record and analyze the data directly
16 related to those diseases;

17 (3) compile and publish statistical and other studies
18 derived from patient data obtained under this chapter to provide,
19 in an accessible form, information that is useful to physicians,
20 other medical personnel, and the public;

21 (4) comply with requirements as necessary to obtain
22 federal funds in the maximum amounts and most advantageous
23 proportions possible;

24 (5) receive and use gifts made for the purpose of this
25 chapter; and

26 (6) limit chronic neurological disease reporting
27 activities under this chapter to specified geographic areas of the

1 state to ensure optimal use of funds available for obtaining the
2 data.

3 (b) The executive commissioner shall adopt rules as
4 necessary to implement this chapter.

5 Sec. 82A.006. REPORTS. (a) The department shall publish an
6 annual report to the legislature of the information obtained under
7 this chapter.

8 (b) The department, in cooperation with other chronic
9 neurological disease reporting organizations and research
10 institutions, may publish reports the department determines are
11 necessary or desirable to carry out the purposes of this chapter.

12 Sec. 82A.007. DATA FROM MEDICAL RECORDS. (a) To ensure an
13 accurate and continuing source of data concerning chronic
14 neurological diseases, each neurologist whose majority of patients
15 are being treated for a chronic neurological disease shall furnish
16 to the department or its representative, on request, data the
17 department considers necessary and appropriate that is derived from
18 each medical record pertaining to a case of a chronic neurological
19 disease. The department may not request data that is more than three
20 years old unless the department is investigating a possible chronic
21 neurological disease cluster.

22 (b) A neurologist shall furnish the data requested under
23 Subsection (a) in a reasonable format prescribed by the department
24 and within six months of the patient's admission, diagnosis, or
25 treatment for a chronic neurological disease, unless a different
26 period is prescribed by the United States Department of Health and
27 Human Services.

1 (c) The data required to be furnished under this section
2 must include patient identification and diagnosis.

3 (d) The department may access medical records that would:

4 (1) identify cases of chronic neurological diseases;
5 or

6 (2) establish characteristics or treatment of chronic
7 neurological diseases.

8 (e) The executive commissioner by rule shall adopt
9 procedures that ensure adequate notice is given to the neurologist
10 before the department accesses data under Subsection (d).

11 (f) A neurologist that knowingly or in bad faith fails to
12 furnish data as required by this chapter shall reimburse the
13 department or its authorized representative for the costs of
14 accessing and reporting the data. The costs reimbursed under this
15 subsection must be reasonable, must be based on actual costs
16 incurred by the department or by its authorized representative in
17 the collection of data under Subsection (d), and may include salary
18 and travel expenses. The department may assess a late fee on an
19 account that is 60 days or more overdue. The late fee may not exceed
20 one and one-half percent of the total amount due on the late account
21 for each month or portion of a month the account is not paid in full.
22 A neurologist may request that the department conduct a hearing to
23 determine whether reimbursement to the department under this
24 subsection is appropriate.

25 Sec. 82A.008. CONFIDENTIALITY. (a) Reports, records, and
26 information obtained under this chapter are confidential and are
27 not subject to disclosure under Chapter 552, Government Code, are

1 not subject to subpoena, and may not otherwise be released or made
2 public except as provided by this section. The reports, records,
3 and information obtained under this chapter are for the
4 confidential use of the department and the persons or public or
5 private entities that the department determines are necessary to
6 carry out the intent of this chapter.

7 (b) Medical or epidemiological information may be released:

8 (1) for statistical purposes in a manner that prevents
9 identification of individuals or health care practitioners;

10 (2) with the consent of each person identified in the
11 information; or

12 (3) to promote research of chronic neurological
13 diseases, including release of information to other repositories
14 and appropriate state and federal agencies, under rules adopted by
15 the executive commissioner to ensure confidentiality as required by
16 state and federal laws.

17 (c) A state employee may not testify in a civil, criminal,
18 special, or other proceeding as to the existence or contents of
19 records, reports, or information concerning an individual whose
20 medical records have been used in submitting data required under
21 this chapter unless the individual consents in advance.

22 (d) Data furnished to a chronic neurological disease
23 registry or chronic neurological disease researcher under
24 Subsection (b) is for the confidential use of the chronic
25 neurological disease researcher and is subject to Subsection (a).

26 Sec. 82A.009. IMMUNITY FROM LIABILITY. The following
27 persons subject to this chapter that act in compliance with this

1 chapter are not civilly or criminally liable for furnishing the
2 information required under this chapter:

3 (1) a neurologist or an employee of a neurologist; and

4 (2) an employee of the department.

5 Sec. 82A.010. EXAMINATION AND SUPERVISION NOT REQUIRED.

6 This chapter does not require an individual to submit to any medical
7 examination or supervision or to examination or supervision by the
8 department or its representatives.

9 SECTION 2. This Act takes effect September 1, 2013.