

BILL ANALYSIS

S.B. 969
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Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

The state's response to the COVID-19 pandemic relied heavily on the collection and dissemination of data by the Department of State Health Services (DSHS). The uniformity, public accessibility, and integrity of that critical data from DSHS was a challenge for the state. S.B. 969 seeks to better ensure the accessibility and integrity of critical data during a public health disaster by requiring DSHS to make available all de-identified data related to the disaster in a timely manner and in an easy-to-read format and to develop a standardized method for reporting data and releasing reports. The bill also gives DSHS the authority to impose a civil penalty on a facility that does not report critical data.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 5 of this bill.

ANALYSIS

S.B. 969 amends the Health and Safety Code to require the Department of State Health Services (DSHS), during a public health disaster, to timely make available to the public on its website in an easy-to-read format all available de-identified public health data regarding the public health disaster. The bill requires DSHS to present data related to individuals as summary statistics consistent with the confidentiality provisions of specified state law relating to communicable diseases, the immunization registry, and immunizations.

S.B. 969 requires DSHS to collaborate with local health authorities, hospitals, laboratories, and other persons who submit information to DSHS during a public health disaster or in response to other outbreaks of communicable disease to plan, design, and implement a standardized and streamlined method for sharing information needed during the disaster or response. The bill authorizes DSHS to require a person submitting information to DSHS under provisions relating to reports and reportable diseases to use the developed method.

S.B. 969 requires a hospital to report to DSHS and to the applicable trauma service area regional advisory council all information required by DSHS related to a reportable disease for which a public health disaster is declared. The bill requires DSHS and each trauma service area regional advisory council to make publicly available in a timely manner that information reported from a hospital and to ensure that the released information does not contain any personally identifiable information. The bill requires DSHS to collaborate and coordinate with local health departments to ensure that all information covering a reporting period is released to the public in a timely

manner. The bill requires DSHS to develop and publish on its website monthly compliance reports for laboratories and hospitals reporting during a public health disaster, as applicable. The bill sets out the contents required to be included in each compliance report for laboratories and for hospitals.

S.B. 969 authorizes DSHS to impose a civil penalty of not more than \$1,000 on a health care facility for each failure to submit a report required under provisions relating to reports and reportable diseases and authorizes the attorney general to bring an action to recover the civil penalty. The bill requires DSHS to implement quality assurance procedures to ensure that data collected and reported for a public health disaster is systematically reviewed for errors and completeness and to implement procedures to timely resolve any deficiencies in data collection and reporting.

S.B. 969 removes reporting in writing or by telephone from the methods the executive commissioner of the Health and Human Services Commission (HHSC) may prescribe for reporting under provisions relating to reports and reportable diseases. This provision applies only to a report submitted on or after January 1, 2023.

S.B. 969 requires DSHS to do the following:

- evaluate the planning and response capabilities of the state health care system, including hospitals, long-term care facilities, and laboratories, to respond to public health threats;
- coordinate this evaluation with HHSC, regional advisory councils, local health departments, and health care system organizations and submit to the legislature an implementation plan based on the findings of this evaluation not later than December 1, 2021;
- evaluate the current scope, size, function, and public health response capabilities of public health regions and regional offices;
- identify current capabilities, assess the need for geographic realignment, and identify ways to improve support to local health departments and areas in which DSHS serves as the primary public health provider;
- coordinate its evaluation of the public health response capabilities with local health departments, areas served by DSHS regional offices, and the Public Health Funding and Policy Committee and provide a report based on its evaluation to the legislature not later than December 1, 2021;
- improve standardized data collection and reporting by DSHS, laboratories, health care facilities, local health departments, and other entities as appropriate during a declared public health disaster;
- identify current processes for and barriers to standardized, regular, and consistent reporting and collaborate on best practices to ensure that data collection and reporting are consistent across state, regional, and local levels; and
- coordinate its analysis with local health departments, laboratories, health care facilities, and the Public Health Funding and Policy Committee and implement best practices and report its findings to the legislature not later than December 1, 2021.

S.B. 969 requires the executive commissioner of HHSC to adopt rules necessary to implement the bill's provisions. Implementation of a provision of this bill by DSHS is mandatory only if a specific appropriation is made for that purpose. The bill requires DSHS to use any available federal money to implement the bill's provisions.

EFFECTIVE DATE

September 1, 2021.