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By:  Kolkhorst S.B. No. 969

A BILL TO BE ENTITLED

AN ACT

relating to reporting procedures for and information concerning public health disasters and to certain public health studies; creating the office of the chief state epidemiologist; providing a civil penalty.

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

SECTION 1.  Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Section 81.016 to read as follows:

Sec. 81.016.  AVAILABILITY OF DATA REGARDING PUBLIC HEALTH DISASTER. During a public health disaster, the department shall timely make available to the public on the department's Internet website, in an easy-to-read format, all available de-identified public health data regarding the public health disaster.

SECTION 2.  Section 81.044(a), Health and Safety Code, is amended to read as follows:

(a)  The executive commissioner shall prescribe the form and method of reporting under this chapter, which may be in writing, by telephone, by electronic data transmission, through a health information exchange as defined by Section 182.151 if requested and authorized by the person required to report, or by other means. The executive commissioner by rule shall require a person reporting at least 30 cases of a reportable disease in a month, excluding point-of-care testing, to submit a report required under this subchapter by electronic data transmission in the form prescribed by rule.

SECTION 3.  Subchapter C, Chapter 81, Health and Safety Code, is amended by adding Sections 81.0443, 81.0444, 81.0445, 81.0495, and 81.053 to read as follows:

Sec. 81.0443.  STANDARDIZED INFORMATION SHARING METHOD. The department shall collaborate with local health authorities, hospitals, laboratories, and other persons who submit information to the department 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 department may require a person submitting information to the department under this subchapter to use the method developed under this section.

Sec. 81.0444.  HOSPITAL TO REPORT. A hospital shall report to the department and to the applicable trauma service area regional advisory council all information required by the department related to a reportable disease for which a public health disaster is declared.

Sec. 81.0445.  PROVISION OF INFORMATION TO PUBLIC DURING PUBLIC HEALTH DISASTER. (a)  This section applies only to information related to a reportable disease for which a public health disaster is declared.

(b)  The department and each trauma service area regional advisory council shall make publicly available in accordance with Subsection (c) the information a hospital is required to report to the department and regional advisory council under Section 81.0444. The department and each regional advisory council shall ensure that information released under this subsection does not contain any personally identifiable information.

(c)  The department shall collaborate and coordinate with local health departments to ensure that all information covering the same reporting period is released simultaneously to the public.

(d)  The department shall develop and publish on its Internet website monthly compliance reports for laboratories reporting during a public health disaster. Each compliance report, at a minimum, must include:

(1)  the number of laboratory reports the department receives by electronic data transmission;

(2)  the number of incomplete information fields in the laboratory reports;

(3)  the electronic format each laboratory used in submitting information;

(4)  the number of coding errors in the laboratory reports; and

(5)  the average length of time from the date the specimen is collected to the date the department receives the corresponding laboratory report.

(e)  The department shall develop and publish on its Internet website monthly compliance reports for hospitals reporting during a public health disaster. Each compliance report, at a minimum, must include:

(1)  the number of incomplete information fields in the hospital reports;

(2)  the number of reports a hospital failed to submit in a timely manner; and

(3)  the number of identified inaccuracies in the information submitted.

Sec. 81.0495.  FAILURE TO REPORT; CIVIL PENALTY. (a) The department may impose a civil penalty of not more than $1,000 on a health care facility for each failure to submit a report required under this subchapter.

(b)  The attorney general may bring an action to recover a civil penalty imposed under Subsection (a).

Sec. 81.053.  DATA QUALITY ASSURANCE. The department shall implement quality assurance procedures to ensure that data collected and reported concerning a public health disaster is systematically reviewed for errors and completeness. The department shall implement procedures to timely resolve any deficiencies in data collection and reporting.

SECTION 4.  Subchapter C, Chapter 1001, Health and Safety Code, is amended by adding Section 1001.0511 to read as follows:

Sec. 1001.0511.   OFFICE OF CHIEF STATE EPIDEMIOLOGIST. (a) In this section, "office" means the office of the chief state epidemiologist.

(b)  The commissioner shall:

(1)  establish the office of the chief state epidemiologist within the department to inform public health activities and public health policy in Texas by:

(A)  evaluating epidemiological, medical, and health care data; and

(B)  identifying pertinent research and evidence-based best practices; and

(2)  appoint a board-certified physician licensed to practice medicine in this state as the chief state epidemiologist to administer the office.

(c)  The chief state epidemiologist must have experience in public health and an advanced degree in public health, epidemiology, or a related field.

(d)  The chief state epidemiologist:

(1)  serves as the department expert on epidemiological matters and on communicable and noncommunicable diseases;

(2)  may provide professional and scientific consultation to state facilities, health service regions, local health agencies, and other entities regarding epidemiology and disease control, harmful exposure, and injury prevention;

(3)  shall serve as the department's senior science representative and primary point of contact to the Centers for Disease Control and Prevention and other federal agencies for epidemiological science and disease surveillance; and

(4)  notwithstanding any other law, may access data from across the department to carry out the duties of the office.

(e)  Reports, records, and information provided to the office that relate to an epidemiological or toxicological investigation of human illnesses or conditions and of environmental exposures that are harmful or believed to be harmful to the public health are not public information under Chapter 552, Government Code. They may not be released or made public, on subpoena or otherwise, except for statistical purposes and if released in a manner that prevents the identification of any person.

SECTION 5.  (a) The Department of State Health Services shall 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. The department shall coordinate its evaluation with the Health and Human Services Commission, regional advisory councils, local health departments, and health care system organizations. The department shall submit to the legislature an implementation plan based on the findings of its evaluation not later than December 1, 2021.

(b)  The Department of State Health Services shall evaluate the current scope, size, function, and public health response capabilities of public health regions and regional offices. The department shall identify current capabilities, assess the need for geographic realignment, and identify ways to improve support to local health departments and areas in which the department serves as the primary public health provider. The department shall coordinate its evaluation with local health departments, areas served by department regional offices, and the Public Health Funding and Policy Committee. The department shall provide a report based on its evaluation to the legislature not later than December 1, 2021.

(c)  The Department of State Health Services shall improve standardized data collection and reporting by the department, laboratories, health care facilities, local health entities, and other entities as appropriate during a declared public health disaster. The department shall identify current processes for and barriers to standardized, regular, and consistent reporting and shall collaborate on best practices to ensure that data collection and reporting are consistent across state, regional, and local levels. The department shall coordinate its analysis with local health entities, laboratories, health care facilities, and the Public Health Funding and Policy Committee. The department shall implement best practices and report its findings to the legislature not later than December 1, 2021.

SECTION 6.  As soon as practicable after the effective date of this Act, the executive commissioner of the Health and Human Services Commission shall adopt rules necessary to implement this Act.

SECTION 7.  Section 81.044(a), Health and Safety Code, as amended by this Act, applies only to a report submitted on or after January 1, 2022.

SECTION 8.  This Act takes effect September 1, 2021.