BILL ANALYSIS

Senate Research Center 89R3443 RAL-F S.B. 922 By: Hancock Health & Human Services 3/14/2025 As Filed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Recently, the federal 21st Century Cures Act (Cures Act) changed the way physicians communicate with their patients when serious or even tragic test results are received. While patients deserve to receive test results as quickly as possible, this new federal overreach often prevents patients from receiving these serious results in a respectful way from their physicians. According to the Office of the National Coordinator for Health Information Technology (ONC), any delay by a health care provider in posting electronic health information (EHI), such as test results, to a patient portal would likely be considered interference under the Cures Act. As a result, EHI is being posted immediately to patient portals as it becomes available, and patients are often receiving test results with serious implications before the physician even becomes aware of, or has an opportunity to review, the results. Patients who learn of cancer or other lifechanging test results through impersonal electronic means, rather than from their physician, often experience heightened stress, anxiety, and uncertainty. In some cases, a patient's concerns may be based on their misunderstanding or misinterpretation of the test results and could have been avoided altogether had the results been shared by the patient's physician instead. Fortunately, states can remedy this unfortunate scenario by adopting law that requires the release of EHI to be handled differently.

S.B. 922 addresses the issue by providing that, for sensitive test results only, the results may not be disclosed to a patient by certain electronic means until at least three days after the sensitive test results are finalized. This bill in no way prevents a physician from sharing test results immediately with the patient over the phone, through video conference, or in person. This brief pause gives physicians and patients an opportunity to have critical, informed discussions at the time that the test results are shared.

As proposed, S.B. 922 amends current law relating to the disclosure of certain medical information by electronic means.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 159.006(d), Occupations Code, as follows:

- (d) Requires a physician to provide the information requested under Section 159.006 (Information Furnished by Physician):
 - (1) creates this subdivision from existing text and makes a nonsubstantive change; and
 - (2) in accordance with Section 159.0062(b), if applicable.

SECTION 2. Amends Chapter 159, Occupations Code, by adding Section 159.0062, as follows:

Sec. 159.0062. SENSITIVE TEST RESULTS DISCLOSED BY ELECTRONIC MEANS. (a) Defines "electronic health record," "electronic means," "patient representative" and "sensitive test result."

- (b) Prohibits sensitive test results from being disclosed to a patient or patient representative by electronic means before the third day after the date the sensitive test results are finalized.
- (c) Provides that a person who administers or controls the electronic health record of a patient is responsible for implementing Subsection (b).
- (d) Provides that a person is not subject to civil, criminal, or administrative liability or professional disciplinary action for failure to comply with Section 159.006(d)(2) or this section.

SECTION 3. Makes application of Section 159.0062, Occupations Code, as added by this Act, prospective.

SECTION 4. Makes application of Section 159.006, Occupations Code, as amended by this Act, prospective.

SECTION 5. Effective date: September 1, 2025.