BILL ANALYSIS

Senate Research Center 79R11426 MSE-F H.B. 1677 By: Dukes (Zaffirini) Health & Human Services 4/30/2005 Engrossed

AUTHOR'S/SPONSOR'S STATEMENT OF INTENT

Infection with Respiratory Syncytial Virus (RSV) is one of the most common causes of bronchiolitis and pneumonia in young children. While infection with this organism generally manifests in older children and adults as a mild upper respiratory tract infection, it can cause severe and even fatal disease in immunocompromised individuals, those with underlying cardiopulmonary disorders, preterm infants, and other vulnerable groups. RSV results in the hospitalization of more than 100,000 infants and children each year at an estimated cost exceeding \$500 million. Scientific progress with regard to this infection has resulted in the availability of improved recognition, prevention, and treatment strategies for this infection and improved outcomes in vulnerable populations.

It is recommended that high risk individuals receive prophylactic therapy that prevents the development of severe disease after infection with RSV. However, currently there is no requirement for state health agencies to collect information regarding RSV infection rates.

H.B. 1677 requires the Department of State Health Services to create a sentinel surveillance system to collect information, already available through most children's hospitals, on the incidence of RSV infection at key locations throughout the state. The availability of that information will enhance provider education and enable the state public health system to plan an appropriate response.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Sections 96.005 and 96.006, Health and Safety Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subtitle D, Title 2, Health and Safety Code, by adding Chapter 96, as follows:

CHAPTER 96. RESPIRATORY SYNCYTIAL VIRUS

Sec. 96.001. DEFINITIONS. Defines "department," "executive commissioner," "health facility," "local health unit," and "RSV."

Sec. 96.002. CONFIDENTIALITY. (a) Provides that except as specifically authorized by this chapter, reports, records, and information furnished to a Department of State Health Services (department) employee or to an authorized agent of the department that relate to cases or suspected cases of a health condition are confidential and may be used only for the purposes of this chapter.

(b) Provides that reports, records, and information relating to cases or suspected cases of health conditions are not public information under Chapter 552 (Public Information), Government Code, and prohibits them from being released or made public on subpoena or otherwise except as provided by this chapter.

(c) Sets forth the purposes for which, the agencies to which, and the persons to whom the department is authorized to release medical, epidemiological, or toxicological information.

Sec. 96.003. LIMITATION OF LIABILITY. Provides that a health professional, a health facility, or an administrator, officer, or employee of a health facility subject to this chapter is not civilly or criminally liable for divulging information required to be released under this chapter, except in a case of gross negligence or wilful misconduct.

Sec. 96.004. COOPERATION OF GOVERNMENTAL ENTITIES. Requires another state board, commission, agency, or governmental entity capable of assisting the department in carrying out the intent of this chapter to cooperate with the department and furnish expertise, services, and facilities to the sentinel surveillance program.

Sec. 96.005. SENTINEL SURVEILLANCE PROGRAM. (a) Requires the executive commissioner of the Health and Human Services Commission (executive commissioner) to establish in the department a program to identify by sentinel surveillance respiratory syncytial virus (RSV) infection in children and maintain a central database of laboratory-confirmed cases of RSV that can be used to investigate the incidence, prevalence, and trends of RSV.

(b) Sets forth the factors the executive commissioner is required to consider in establishing the sentinel surveillance program for RSV.

(c) Requires the executive commissioner to adopt rules to govern the operation of the program and carry out the intent of this chapter, including rules that specify a system for selecting the demographic areas in which the department collects information.

Sec. 96.006. DATA COLLECTION. (a) Authorizes the executive commissioner, to ensure an accurate source of data, to require a health facility or health professional to make available for review by the department or by an authorized agent medical records or other information that is in the facility's or professional's custody or control and that relates to an occurrence of RSV.

(b) Requires the executive commissioner by rule to prescribe the manner in which data are reported to the department.

Sec. 96.007. DATABASE. (a) Authorizes information collected and analyzed by the department or an authorized agent under this chapter to be placed in a central database to facilitate information sharing and provider education.

(b) Authorizes the department to use the database to design and evaluate measures to prevent the occurrence of RSV and other health conditions and provide information and education to providers on the incidence of RSV infection.

SECTION 2. Requires the executive commissioner, not later than November 1, 2005, to adopt rules as required by Section 96.005, Health and Safety Code, as added by this Act.

SECTION 3. Effective date: September 1, 2005.