

SUBJECT: Modifying consent requirements for immunization registry, creating portal

COMMITTEE: Public Health — favorable, without amendment

VOTE: 10 ayes — Klick, Guerra, Allison, Coleman, Collier, Jetton, Oliverson,  
Price, Smith, Zwiener

0 nays

1 absent — Campos

WITNESSES: For — Nora Belcher, Texas e-Health Alliance; Joseph Schneider, Texas Medical Association; (*Registered, but did not testify*: Marisa Finley, Baylor Scott and White Health; Christine Yanas, Methodist Healthcare Ministries of South Texas, Inc.; Tom Banning, Texas Academy of Family Physicians; Craig Holzheuser, Texas Association of City and County Health Officials; Shelby Tracy, Texas Association of Community Health Centers; David Reynolds, Texas Chapter of the American College of Physicians; Meredith Armstrong, Texas Healthcare and Bioscience Institute; Steve Wohleb, Texas Hospital Association; Troy Alexander and Dan Finch, Texas Medical Association; Don McBeath, Texas Organization of Rural and Community Hospitals; Clayton Travis, Texas Pediatric Society; Allison Winnike, The Immunization Partnership; Roxanna Llinas; Adam Navara; Melody Tan)

Against — None

On — (*Registered, but did not testify*: Kevin Allen and Grace Kubin, Department of State Health Services; Thomas Parkinson)

BACKGROUND: Health and Safety Code sec. 167.007 requires the Department of State Health Services to establish and maintain an immunization registry for the primary purpose of establishing and maintaining a single repository of accurate, complete, and current immunization records to be used in aiding, coordinating, and promoting efficient and cost-effective communicable disease prevention and control efforts.

Some have raised concerns that the existing consent procedures for participation in the state immunization registry can be burdensome for health care providers and patients and that these problems could be addressed by standardizing these procedures and creating a portal for individuals to request exclusion of records from the registry.

DIGEST:

HB 4272 would modify the retention period for information in the immunization registry after certain events, modify procedures for the verification of consent for inclusion of records in the registry, require the creation of a process to provide a first responder's immunization records to an immediate family member, and create an online consent portal.

**Immunization record retention period.** Information collected pertaining to immunizations in preparation for certain emergencies would have to remain in the registry for seven years following the end of a disaster, public health emergency, terrorist attack, hostile military or paramilitary action, or extraordinary law enforcement emergency. The bill would remove the requirement for the executive commissioner of the Health and Human Services Commission (HHSC) to determine the time period for which this information remained in the immunization registry.

**Consent verification.** The bill would require the executive commissioner of HHSC to determine the process by which consent for an individual's information to be included in the immunization registry was verified.

The executive commissioner by rule also would have to develop guidelines and procedures for obtaining the required consent from an individual or the individual's legally authorized representative for continued inclusion in the registry of information collected in preparation for certain disasters beyond the required seven-year period.

For an individual whose immunization history was included in the registry and for whom the required consent had not been obtained, prior to the expiration of the seven-year record retention period, DSHS would have to make a reasonable effort to provide notice to the individual or the

individual's representative. A reasonable effort would include at least two attempts by the department to provide notice by telephone or email, or by regular mail.

A notice would have to inform an individual or the individual's representative that the individual's immunization records would be removed from the immunization registry at the end of the seven-year retention period unless consent for continued inclusion was provided.

DSHS would have to make a reasonable effort to obtain current contact information for written or electronic notices sent by the department that were returned due to incorrect address information.

The fields necessary to populate the immunization registry on an electronic report would have to include a "yes" or "no" field indicating the patient's consent to be listed in the registry had been obtained. The fields and data standards relating to a patient's consent to be included in the registry could not include demographic information relating to the patient.

**Consent portal.** DSHS would have to develop and maintain a secure internet portal through which an individual or the individual's representative could request exclusion of the individual's immunization records from the registry. The department would have to develop the portal as soon as practicable after the effective date of the bill.

**Access to immunization registry records.** The process for providing the employer of a first responder with direct access to the first responder's immunization information in the registry for verification of immunization history would have to require affirmation by the employer that the first responder was a current employee.

DSHS could establish a process to provide an immediate family member of a first responder with access to the individual's own immunization information in the registry, and the executive commissioner of HHSC by rule would have to develop guidelines to determine the process by which the immunization information of a first responder or immediate family

member of a first responder could be accessed.

The bill would take effect September 1, 2021.

**NOTES:**

According to the Legislative Budget Board, the bill would have a negative impact of \$2.9 million to general revenue through fiscal 2023.