

BILL ANALYSIS

Senate Research Center
80R17806 YDB-D

C.S.H.B. 246
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Health & Human Services
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Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

In 2005, almost 6,000 Texans had acquired immune deficiency syndrome (AIDS); the disease is caused by the human immunodeficiency virus (HIV). Currently the Department of State Health Services (DSHS) reports cases on HIV/AIDS to the Centers for Disease Control (CDC) in Atlanta, and the CDC uses HIV surveillance to learn more regarding risk factors for HIV, whether people have adequate information about the disease, whether persons at risk are being tested; whether person with HIV are receiving care, and whether persons with HIV are taking their medicines as directed. This information is then used to direct HIV prevention efforts to where they are needed most. The frequency of reports and the variables that are reported are currently reported by rule, but are not included in statute.

Health departments report data to the Centers for Disease Control (CDC) so that information from around the country can be analyzed to determine who is being affected and the circumstances in which transmission took place. By reporting this data with a greater frequency, the health department and the CDC will have a better understanding of people who are infected or at risk of being infected with HIV. The primary component in the state's and the CDC's fight against HIV/AIDS is prevention programs.

C.S.H.B. 246 requires a health authority to report to the Department of State Health Services (DSHS) all cases of diagnosed HIV/AIDS infections on a weekly basis. The bill requires an infected person's city and county of residence, age, gender, race, ethnicity, and national origin, and the method of transmission to be included in the report. By expanding the reportable data, DSHS will have greater understanding of those who are infected with HIV/AIDS.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 4 of this bill.

SECTION BY SECTION ANALYSIS

[While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services, as the successor agency to TDH.]

SECTION 1. Amends Section 81.043, Health and Safety Code, by amending Subsection (b) and adding Subsections (c) and (d), as follows:

(b) Makes a conforming change.

(c) Requires a health authority each week to report to TDH's central office all cases of acquired immune deficiency syndrome (AIDS) and human immunodeficiency virus infection (HIV) reported to the authority during the previous week.

(d) Requires a health authority to include in a report filed under Subsection (c) certain information required by TDH for purposes of this section or other law.

SECTION 2. Amends Section 81.044, Health and Safety Code, by adding Subsection (d), to require TDH require the reports to contain certain information for a case of HIV or AIDS.

SECTION 3. Amends Section 81.052, Health and Safety Code, by amending Subsection (b) and adding Subsections (b-1), (b-2), and (b-3), as follows:

(b) Requires TDH to quarterly compile information submitted under Section 81.043(c), and make the compiled data available to the public within six months of the last day of each quarter. Requires TDH to annually analyze and determine trends in incidence and prevalence of AIDS and HIV infections while considering certain factors, and to annually prepare a report on that analysis, and make the report available to the public.

(b-1) Prohibits TDH from including any identifying information that would allow identification of an individual in the analysis or report prepared under Subsection (b).

(b-2) Requires TDH, not later than January 1, 2009, to prepare and submit to both houses of the legislature a report that addresses emerging technologies and advancements in AIDS and HIV infection surveillance and epidemiology, including the use of the technologies and advancements to improve the testing for and reporting of AIDS and HIV infections; and that makes recommendations regarding this state's use of the emerging technologies and advancements to enhance surveillance, treatment, and prevention of AIDS and HIV infection.

(b-3) Provides that Subsection (b-2) and this subsection expire September 1, 2009.

SECTION 4. (a) Requires the executive commissioner of the Health and Human Services Commission to adopt the rules and procedures necessary to comply with Chapter 81, Health and Safety Code, as amended by this Act, not later than January 1, 2008.

(b) Provides that a health authority and TDH are not required to comply with the changes in law made to these sections before January 1, 2008, notwithstanding Sections 81.043, 81.044, and 81.052, Health and Safety Code, as amended by this Act.

SECTION 5. Effective date: September 1, 2007.