By: Zerwas, Guillen, Shaheen H.B. No. 2641

A BILL TO BE ENTITLED

1	AN ACT
2	relating to the exchange of health information in this state;
3	creating a criminal offense.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 531.0162, Government Code, is amended by
6	adding Subsections (e), (f), (g), and (h) to read as follows:
7	(e) The executive commissioner shall ensure that:
8	(1) all information systems available for use by the
9	commission or a health and human services agency in sending
10	protected health information to a health care provider or receiving
11	protected health information from a health care provider, and for
12	which planning or procurement begins on or after September 1, 2015,
13	are capable of sending or receiving that information in accordance
14	with the applicable data exchange standards developed by the
15	appropriate standards development organization accredited by the
16	American National Standards Institute;
17	(2) if national data exchange standards do not exist
18	for a system described by Subdivision (1), the commission makes
19	every effort to ensure the system is interoperable with the
20	national standards for electronic health record systems; and
21	(3) the commission and each health and human services
22	agency establish an interoperability standards plan for all
23	information systems that exchange protected health information
24	with health care providers.

- (f) Not later than December 1 of each even-numbered year, 1 the executive commissioner shall report to the governor and the 2 Legislative Budget Board on the commission's and the health and 3 human services agencies' measurable progress in ensuring that the 4 5 information systems described in Subsection (e) are interoperable with one another and meet the appropriate standards specified by 6 7 that subsection. The report must include an assessment of the 8 progress made in achieving commission goals related to the exchange of health information, including facilitating care coordination 9 10 among the agencies, ensuring quality improvement, and realizing cost savings. 11
- (g) The executive commissioner by rule may develop and the commission may implement a system to reimburse providers of health care services under the state Medicaid program for review and transmission of electronic health information if feasible and cost-effective.
- 17 (h) In this section, "health care provider" and "provider of 18 health care services" includes a physician.
- SECTION 2. Section 81.044(a), Health and Safety Code, as amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 21 2015, is amended to read as follows:
- 22 (a) The executive commissioner shall prescribe the form and
 23 method of reporting under this chapter, which may be in writing, by
 24 telephone, by electronic data transmission, through a health
 25 information exchange as defined by Section 182.151 if requested and
 26 authorized by the person required to report, or by other means.
- 27 SECTION 3. Section 82.008(a), Health and Safety Code, as

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- 1 amended by S.B. 219, Acts of the 84th Legislature, Regular Session,
- 2 2015, is amended to read as follows:
- 3 To ensure an accurate and continuing source of data concerning cancer, each health care facility, clinical laboratory, 4 5 and health care practitioner shall furnish to the department, on request, data the executive commissioner considers necessary and 6 appropriate that is derived from each medical record pertaining to 7 8 a case of cancer that is in the custody or under the control of the health care facility, clinical laboratory, or health care 9 10 practitioner. The department may not request data that is more than three years old unless the department is investigating a possible 11 12 cancer cluster. At the request and with the authorization of the applicable health care facility, clinical laboratory, or health 13 14 care practitioner, data may be furnished to the department through 15 a health information exchange as defined by Section 182.151.
- SECTION 4. Section 161.007(d), Health and Safety Code, is amended to read as follows:
- A health care provider who administers an immunization 18 19 to an individual younger than 18 years of age shall provide data elements regarding an immunization to the department. A health 20 care provider who administers an immunization to an individual 18 21 22 years of age or older may submit data elements regarding an 23 immunization to the department. At the request and with the authorization of the health care provider, the data elements may be 24 submitted through a health information exchange as defined by 25 26 Section 182.151. The data elements shall be submitted in a format prescribed by the department. The department shall verify consent 27

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- 1 before including the information in the immunization registry. The
- 2 department may not retain individually identifiable information
- 3 about an individual for whom consent cannot be verified.
- 4 SECTION 5. Section 161.00705(a), Health and Safety Code, is
- 5 amended to read as follows:

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- 6 (a) The department shall maintain a registry of persons who
 - receive an immunization, antiviral, and other medication
- 8 administered to prepare for a potential disaster, public health
- 9 emergency, terrorist attack, hostile military or paramilitary
- 10 action, or extraordinary law enforcement emergency or in response
- 11 to a declared disaster, public health emergency, terrorist attack,
- 12 hostile military or paramilitary action, or extraordinary law
- 13 enforcement emergency. A health care provider who administers an
- 14 immunization, antiviral, or other medication shall provide the data
- 15 elements to the department. At the request and with the
- 16 <u>authorization of the health care provider, the data elements may be</u>
- 17 provided through a health information exchange as defined by
- 18 Section 182.151.
- 19 SECTION 6. Section 161.00706(b), Health and Safety Code, is
- 20 amended to read as follows:
- 21 (b) A health care provider, on receipt of a request under
- 22 Subsection (a)(1), shall submit the data elements to the department
- 23 in a format prescribed by the department. At the request and with
- 24 the authorization of the health care provider, the data elements
- 25 may be submitted through a health information exchange as defined
- 26 by Section 182.151. The department shall verify the person's
- 27 request before including the information in the immunization

- 1 registry.
- 2 SECTION 7. Section 161.0073(c), Health and Safety Code, is
- 3 amended to read as follows:
- 4 (c) A person required to report information to the
- 5 department for registry purposes or authorized to receive
- 6 information from the registry may not disclose the individually
- 7 identifiable information of an individual to any other person
- 8 without the written or electronic consent of the individual or the
- 9 individual's legally authorized representative, except as provided
- 10 by Sections 161.007, 161.00705, 161.00706, and 161.008, of this
- 11 code, Chapter 159, Occupations Code, or Section 602.053, Insurance
- 12 Code.
- 13 SECTION 8. Section 161.008, Health and Safety Code, is
- 14 amended by adding Subsection (i) to read as follows:
- 15 (i) At the request and with the authorization of the
- 16 applicable health care provider, immunization history or data may
- 17 be submitted to or obtained by the department through a health
- 18 information exchange as defined by Section 182.151.
- 19 SECTION 9. Chapter 182, Health and Safety Code, is amended
- 20 by adding Subchapter D to read as follows:
- 21 SUBCHAPTER D. HEALTH INFORMATION EXCHANGES
- Sec. 182.151. DEFINITION. In this subchapter, "health
- 23 <u>information exchange" means an organization that:</u>
- 24 (1) assists in the transmission or receipt of
- 25 <u>health-related information among organizations transmitting or</u>
- 26 receiving the information according to nationally recognized
- 27 standards and under an express written agreement with the

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   organizations;
 2
              (2) as a primary business function, compiles or
   organizes health-related information designed to be securely
 3
   transmitted by the organization among physicians, other health care
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   providers, or entities within a region, state, community, or
5
   hospital system; or
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7
              (3) assists in the transmission or receipt of
   electronic health-related information among physicians, other
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   health care providers, or entities within:
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                   (A) a hospital system;
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                    (B) a physician organization;
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                    (C) a health care collaborative, as defined by
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   Section 848.001, Insurance Code;
                   (D) an accountable care organization
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   participating in the Pioneer Model under the initiative by the
   Innovation Center of the Centers for Medicare and Medicaid
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   Services; or
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                    (E) an accountable care organization
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   participating in the Medicare Shared Savings Program under 42
   U.S.C. Section 1395jjj.
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         Sec. 182.152. AUTHORITY OF HEALTH INFORMATION EXCHANGE.
   (a) Notwithstanding Sections 81.046, 82.009, 161.0073, and
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   161.008, a health information exchange may access and transmit
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   health-related information under Sections 81.044(a), 82.008(a),
   161.007(<u>d</u>), 161.00705(<u>a</u>), 161.00706(<u>b</u>), and 161.008(<u>i</u>) if the
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26
   access or transmittal is:
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(1) made for the purpose of assisting in the reporting

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- 1 of health-related information to the appropriate agency;
- 2 (2) requested and authorized by the appropriate health
- 3 care provider, practitioner, physician, facility, clinical
- 4 laboratory, or other person who is required to report
- 5 health-related information;
- 6 (3) made in accordance with the applicable consent
- 7 requirements for the immunization registry under Subchapter A,
- 8 Chapter 161, if the information being accessed or transmitted
- 9 relates to the immunization registry; and
- 10 (4) made in accordance with the requirements of this
- 11 <u>subchapter and all other state and federal law.</u>
- 12 (b) A health information exchange may only use and disclose
- 13 the information that it accesses or transmits under Subsection (a)
- 14 in compliance with this subchapter and all applicable state and
- 15 federal law, and may not exchange, sell, trade, or otherwise make
- 16 any prohibited use or disclosure of the information.
- 17 Sec. 182.153. COMPLIANCE WITH LAW; SECURITY. A health
- 18 information exchange that collects, transmits, disseminates,
- 19 accesses, or reports health-related information under this
- 20 subchapter shall comply with all applicable state and federal law,
- 21 including secure electronic data submission requirements.
- Sec. 182.154. CRIMINAL PENALTY. (a) A person who collects,
- 23 transmits, disseminates, accesses, or reports information under
- 24 this subchapter on behalf of or as a health information exchange
- 25 commits an offense if the person, with the intent to violate this
- 26 subchapter, allows health-related information in the possession of
- 27 a health information exchange to be used or disclosed in a manner

- 1 that violates this subchapter.
- 2 (b) An offense under this section is a Class A misdemeanor.
- 3 Sec. 182.155. IMMUNITIES AND DEFENSES CONTINUED.
- 4 Collecting, transmitting, disseminating, accessing or reporting
- 5 <u>information through a health information exchange does not alone</u>
- 6 deprive a physician or health care provider of an otherwise
- 7 <u>applicable immunity or defense.</u>
- 8 SECTION 10. Section 531.02176, Government Code, is
- 9 repealed.
- 10 SECTION 11. This Act takes effect September 1, 2015.