

## **BILL ANALYSIS**

Senate Research Center  
80R10403 YDB-D

H.B. 246  
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Health & Human Services  
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Engrossed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Today, women account for more than one quarter of all new HIV/AIDS diagnoses. Women of color are especially affected by HIV infection and AIDS. In 2004, HIV infection was the leading cause of death for African American women aged 25 to 34 years; the third leading cause of death for African American women aged 35 to 44 years; the fourth leading cause of death for African American women aged 45 to 54 years; and the fourth leading cause of death for Hispanic women aged 35 to 44 years. Heterosexual African American and Hispanic women with no other risk factors frequently contract HIV from their male partners.

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.

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 Subsection (b-1), as follows:

(b) Requires TDH to annually compile and analyze the information collected under Section 81.043(c), prepare a report on the analysis, and make the report available to the public.

(b-1) Prohibits TDH from including any identifying information in the analysis or report prepared under Subsection (b).

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.