

ONE HUNDRED SECOND LEGISLATURE - FIRST SESSION - 2011
COMMITTEE STATEMENT
LB591

Hearing Date: Thursday February 24, 2011
Committee On: Health and Human Services
Introducer: Gloor
One Liner: Provide for a syndromic surveillance program and change immunization information exchange provisions

Roll Call Vote - Final Committee Action:
Advanced to General File

Vote Results:

Aye: 7 Senators Bloomfield, Campbell, Cook, Gloor, Howard, Krist, Wallman
Nay:
Absent:
Present Not Voting:

Proponents:

Senator Mike Gloor
Dr. Joann Schaefer

Vicki Vinton

Representing:

District #35
Nebraska Department of Health and Human Services,
Division of Public Health
Nebraska Nurses Association

Opponents:

Representing:

Neutral:

Representing:

Summary of purpose and/or changes:

LB 591 requires the department to develop a syndromic surveillance program. Syndromic surveillance is the analysis of medical data to detect or anticipate disease outbreaks. The bill provides that the syndromic surveillance program shall include the monitoring, detection and investigation of public health threats from:

- Intentional or accidental use or misuse of chemical, biological, radiological, or nuclear agents;
- Clusters or outbreaks of infectious or communicable diseases; and
- Noninfectious causes of illness.

The bill provides that the department will set standards for syndromic surveillance reporting required by hospitals, specifying the data elements required. Other health care facilities, or any person issued a credential by the department, may be required to report under the program as determined by the department. The department shall establish a schedule for implementation of full electronic reporting of all syndromic surveillance data elements. The schedule will take into account the data elements reported, capacity of the facility, funding available, improved efficiencies and benefits, and other relevant factors.

LB 591 also requires the department to establish an immunization information system for the purpose of providing a central data base of immunization information. Immunization information may be exchanged between health care professionals, health care facilities, health care services, schools, postsecondary education institutions, licensed child care facilities, electronic health-record systems, public health departments, health departments of other states, Indian health services and tribes for the purpose of protecting the public health by facilitating immunizations to minimize the risk

of vaccine preventable diseases. The department will promulgate rules and regs regarding procedures and methods for, and limitations on, access to, and security and confidentiality of, the immunization information. Access to immunization information, according to rules and regs developed by the department, shall be for the purposes of directing patent care, public health activities or enrollment in school or child care services.

Kathy Campbell, Chairperson