

**LEGISLATIVE EDUCATION STUDY COMMITTEE  
BILL ANALYSIS**

**Bill Number:** SB 58

**51st Legislature, 1st Session, 2013**

**Tracking Number:** .190717.1SA

**Short Title:** Reports to Immunization Registry

**Sponsor(s):** Senator Sue Wilson Beffort

**Analyst:** Mark Murphy

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**Bill Summary:**

SB 58 requires physicians, nurses, pharmacists, and other healthcare providers to report immunizations to the immunization registry unless the patient, or the patient's guardian if the patient is a minor, refuses to allow reporting of this information.

This bill is sponsored by the Department of Health (DOH).

**Fiscal Impact:**

SB 58 does not contain an appropriation.

The Human Services Department (HSD) bill analysis indicates that for immunizations that are not covered through the Vaccines for Children Program (VFCP), it is possible that individuals without insurance may experience some increased cost. This could occur if providers who are not currently reporting the immunization raise their immunization prices in order to cover any additional costs for their efforts. Most likely, the HSD bill analysis states, this potential cost increase would be minimal.

**Substantive Issues:**

According to current state law, physicians, nurses, pharmacists, and other healthcare providers *may* report immunizations to the immunization registry. SB 58 modifies this authorization in current law to a mandate and would *require* physicians, nurses, pharmacists, and other healthcare providers to report immunizations to the immunization registry unless the patient or patient's guardian refuses to allow the report.

An LESC staff review of available information on this topic identifies the following two issues:

- the best interest for the state with regard to public health; and
- access to public health information.

*Best Interest for the State with Regard to Public Health*

The New Mexico Statewide Immunization Information System (NMSIIS) provides a single statewide source of individual immunization records. According to the DOH bill analysis, NMSIIS helps prevent disease outbreaks by:

- tracking and ensuring that residents are up-to-date on immunizations;
- keeping records safe in natural disasters; and
- ensuring children do not miss any shots or get too many shots.

DOH's bill analysis further comments that state public health benefits are compromised when immunizations are not reported to the NMSIIS. Low reporting of vaccinations can have a significant impact on public health. For example, pertussis (whooping cough) is generally spread by adolescents and adults whose immunity has waned due to lack of booster shots. Pertussis booster shots are recommended every 10 years, yet most adults do not receive them as recommended.

Requiring the reporting of all immunizations, DOH states, would make it easier for healthcare providers to:

- know when to give an immunization;
- lead to a decrease in over or under immunizing individuals; and
- reduce vaccine-preventable diseases.

#### *Access to Public Health Information*

The protection and security of public health information also arises in the analysis of this bill. The New Mexico Medical Board's bill analysis states that access to the NMSIIS is limited to:

- primary care physicians;
- nurses;
- pharmacists;
- managed care organizations (only for its enrollees);
- school nurses; and
- other appropriate healthcare providers or public healthcare entities as determined by the Secretary of Health.

The availability of immunization information to school nurses appears likely to aid in the school registration process. The Medical Board's analysis, however, also raises concern about the issue of possible interaction between the *Health Insurance Portability and Accountability Act* (HIPAA) and the access described above.

#### **Background:**

According to the DOH bill analysis, the NMSIIS is a population-based, confidential, computerized information system that collects and consolidates vaccination data from multiple healthcare providers. The NMSIIS collects immunization information for New Mexicans of every age and merges the data into a single record for each patient in its system. NMSIIS enables the DOH to track and evaluate trends in coverage and monitor outbreaks and disease coverage levels. The DOH bill analysis states that NMSIIS has:

- at least two vaccinations recorded for:
  - 93 percent of children 19-35 months of age;
  - 51 percent of adolescents 13-17 years of age; and

- at least one vaccination recorded for:
  - 26 percent of adults over 19 years of age; and
  - 20 percent of adults over 50 years of age.

The DOH bill analysis states that low reporting of adolescent and adult vaccinations can have a significant impact on public health and that requiring entry of immunization records into NMSIIS would support public health efforts:

- to identify communities and populations in need of vaccine; and
- in the event of a disease outbreak.

The HSD bill analysis notes the following regarding vaccinations for children:

- childhood immunizations are generally provided through the Vaccines for Children Program (VFCP), for which the practitioner receives the vaccine from DOH at no cost;
- for uninsured patients paying out of pocket, there is a limit on the amount that a provider can charge the patient when a vaccine came from the VFCP; and
- the VFCP generally requires providers to report vaccinations to the NMSIIS.

For vaccinations not covered under the VFCP, however, the HSD bill analysis states:

- providers may choose not to report the immunizations to the NMSIIS because doing so adds to office workload; and
- there is a continual increase in pharmacies administering vaccines for flu, hepatitis, shingles, and other diseases, and these vaccinations are not generally reported to NMSIIS.

The *Immunization Act* in current New Mexico law requires the DOH to:

“promulgate rules and regulations governing the immunization against diseases deemed to be dangerous to the public health, to be required of children attending public, private, home or parochial schools in the state.”

The *Immunization Act*, however, does not require childhood immunization records to be included in the NMSIIS.

**Committee Referrals:**

SPAC / SFC-SPAC

**Related Bills:**

HB 262 *Health Security Act*

SB 226 *Health Security Act*