
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anthony Portantino, Chair
2021 - 2022 Regular Session

SB 744 (Glazer) - Communicable diseases: respiratory disease information

Version: April 29, 2021

Urgency: No

Hearing Date: May 10, 2021

Policy Vote: HEALTH 9 - 0, JUD. 11 - 0

Mandate: Yes

Consultant: Karen French

Bill Summary: Requires any electronic tool used by local health officers for the purpose of reporting cases of communicable respiratory disease to the California Department of Public Health (CDPH) to include data related to housing, occupation and workplace, and recent travel of the patient. Requires CDPH to collect and make specified information publicly available in cases of communicable respiratory disease.

Fiscal Impact:

- CDPH reports a need for additional staff and resources to implement this bill at a total estimated cost of \$2,003,000 General Fund. For details see Staff Comments below.

Background: Author's statement. According to the author, more than a year after the start of the COVID-19 Pandemic, we still don't know how and where the virus is most likely to spread and which measures are most effective in stopping it. This is because we lack the data necessary to support sound scientific research. Without that science, policymakers and the public are flying blind, and our essential workers and vulnerable populations are put at even more risk. Much of the data we need is already collected by the state. We should make that information available to researchers and the public after removing identifying information to protect the privacy of individuals. We also need more data. The state asks basic questions about the housing, and work status of people who test positive. But without more detail, that data is of little help. We need to ask smart questions to get answers that can drive smart policy.

Proposed Law:

- 1) Requires any electronic tool used by LHOs for the purpose of reporting cases of communicable disease to CDPH to include: a) The type of housing where the patient resides; b) The number of people in the household where the patient resides; c) The occupation and workplace of the patient; and, d) The cities that the patient has traveled to in the previous 14 days.
- 2) Requires health care providers who know of, or are in attendance on, a case or suspected case of any of reportable communicable respiratory diseases or conditions to report the information in 1) above to the LHO for the jurisdiction where the patient resides.
- 3) Requires CDPH to collect and make publicly available, in machine-readable form, information collected in cases of communicable respiratory disease.

- 4) Requires CDPH, during a declared public health emergency, to make publicly available, in the same form, a weekly summary of the information, by county, in cases of communicable respiratory disease.
- 5) Requires CDPH to remove from the reports all of the information listed in the Safe Harbor provisions of the federal Health Insurance Portability and Accountability Act (HIPAA).
- 6) Requires CDPH to create a program to provide expedited release, during a declared public health emergency, of health care data, including from Confidential Morbidity Reports and contact tracing reports, to researchers at a bona fide research institution of higher education. The department shall make the data available promptly, and on an ongoing basis, to qualified researchers who sign a memorandum of understanding with the department agreeing to use the data only for public health research purposes, to not disclose it to any other party, and to keep all personal information confidential.

Related Legislation: Prior legislation. SB 932 (Weiner, Chapter 183, Statutes of 2020) requires any electronic tool used by LHOs for the purpose of reporting cases of communicable disease to CDPH to include the capacity to collect and report data relating to the sexual orientation and gender identity of individuals who are diagnosed with a reportable disease, and requires health care providers who are in attendance on a case of a reportable disease to report the patient's sexual orientation and gender identity, if known.

AB 262 (Gloria and Gonzalez, Chapter 798, Statutes of 2019) requires LHOs, during an outbreak of a communicable disease, or upon the imminent and proximate threat of a communicable disease outbreak or epidemic that threatens the public's health, to notify and update governmental entities within the LHO's jurisdiction, as specified, and make relevant information available to governmental entities, as specified.

Staff Comments: CDPH cost estimate

As tens of thousands of cases of respiratory disease are reportable in California each year, adding reporting requirements for these infections would require additional local health department staff to follow up on missing data and conduct patient interviews to complete the added fields.

Additional CDPH staff would be needed to perform the following activities (during public health emergency and non-emergency times): data entry, medical record requests, following up with local health departments on missing data, various levels of data analysis, data cleaning, data evaluation for compliance with privacy standards, report production and review, clinical support, coordination with influenza and COVID-19 surveillance efforts, and supervision of these various activities.

The CDPH CalREDIE program would need additional resources to add the new fields to the CalREDIE system. Additional activities would include project management, coordination, adding to the application, adding to the data distribution portal, testing, and documentation at an estimated cost of approximately \$10,000.

Staff Classification	Quantity	Salary (mid-level)	Total Cost
Associate Governmental Program Analyst	2	\$71,520	\$220,000
Research Scientist I	2	\$84,000	\$259,000
Research Scientist II	2	\$92,000	\$284,000
Research Scientist III	2	\$101,000	\$310,000
Public Health Medical Officer III	1	\$156,000	\$240,000
Research Scientist Supervisor I	1	\$113,000	\$174,000
Research Scientist Supervisor II	1	\$144,000	\$222,000
		Total Personnel	\$1,707,000
CaIREDIE modifications			\$10,000
Standard Operating Costs			\$286,000
		Total Costs	\$2,003,000

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