

FEB 9 1994

*Substituted for
SF 2115
3-14-94 (p.642)*

HOUSE FILE 2145
BY COMMITTEE ON HUMAN RESOURCES

HOUSE FILE

(SUCCESSOR TO HSB 512)

Passed House ^(p.300) Date 2-17-94 Passed Senate ^(p.1011) Date 4/5/94
Vote: Ayes 91 Nays 4 Vote: Ayes 48 Nays 0
Approved April 13, 1994

A BILL FOR

1 An Act relating to public health issues regarding persons with
2 brain injury, substance abuse treatment programs, the health
3 data commission, vital records services, and immunizations.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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HF 2145

HOUSE FILE 2145

H-5045

1 Amend House File 2145 as follows:
2 1. Page 2, line 2, by striking the words
3 "included with the diagnosis" and inserting the
4 following: "and their diagnoses".

By MEYER of Sac

H-5045 FILED FEBRUARY 14, 1994

(p.299) adopted 2-17-94

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1 Section 1. Section 125.13, subsection 2, Code 1993, is
2 amended by adding the following new paragraph:

3 NEW PARAGRAPH. i. A substance abuse treatment program not
4 funded by the department which is accredited or licensed by
5 the joint commission on the accreditation of health care
6 organizations, the commission on the accreditation of
7 rehabilitation facilities, the American osteopathic
8 association, or another recognized organization approved by
9 the commission. All survey reports from the accrediting or
10 licensing body must be sent to the department.

11 Sec. 2. Section 125.59, subsection 1, paragraph b, Code
12 1993, is amended to read as follows:

13 b. The county shall submit an accounting of the
14 expenditures and shall submit an annual financial report, a
15 description of the program, and the results obtained before
16 June-10 within sixty days after the end of the same fiscal
17 year in which the money is granted.

18 Sec. 3. Section 135.22, Code 1993, is amended to read as
19 follows:

20 135.22 CENTRAL REGISTRY FOR BRAIN INJURIES.

21 1. As used in this section, ~~section-135-22A, and-section~~
22 ~~225E-23,~~ "brain injury" means clinically evident brain damage
23 or spinal cord injury resulting ~~directly-or-indirectly~~ from
24 ~~trauma, infection, or~~ anoxia, ~~or-vascular-lesions-not~~
25 ~~primarily-related-to-degenerative-or-aging-processes,~~ which
26 temporarily or permanently impairs a person's physical or
27 cognitive functions.

28 2. The director shall establish and maintain a central
29 registry of persons with brain injuries in order to facilitate
30 prevention strategies and the provision of appropriate
31 rehabilitative services to the persons by the department and
32 other state agencies. ~~For-a-patient-who-is-not-admitted-to-a~~
33 ~~hospital-but-is-treated-in-a-physician's-office, physicians~~
34 ~~shall-report-a-brain-injury-to-the-director-within-seven-days~~
35 ~~after-identification-of-the-person-sustaining-a-brain-injury.~~

1 Hospitals shall report patients who are admitted with a brain
2 injury included with the diagnosis to the director no later
3 than forty-five days after the close of a quarter in which the
4 patient was discharged. The report shall contain the name,
5 age and residence of the person, the date, type, and cause of
6 the brain injury, and additional information as the director
7 requires, except that where available, ~~physicians-and~~
8 hospitals shall report the Glasgow coma scale. The director
9 shall consult with health care providers concerning the
10 availability of additional relevant information. The
11 department shall maintain the confidentiality of all
12 information which would identify any person named in a report.
13 However, the identifying information may be released for bona
14 fide research purposes if the confidentiality of the
15 identifying information is maintained by the researchers, or
16 the identifying information may be released by the person with
17 the brain injury or by the person's guardian or, if the person
18 is a minor, by the person's parent or guardian.

19 Sec. 4. Section 135.22A, subsection 1, paragraph b, Code
20 1993, is amended to read as follows:

21 b. "Head injury" means "brain injury" as defined in
22 ~~section 135.22~~ 225C.23.

23 Sec. 5. Section 139.9, subsection 2, Code 1993, is amended
24 to read as follows:

25 2. ~~No~~ A person shall not be enrolled in any licensed child
26 care center, elementary or secondary school in Iowa without
27 evidence of adequate immunization against diphtheria,
28 pertussis, tetanus, poliomyelitis, rubeola, and rubella~~7~~.
29 ~~except-as-provided-in~~ Evidence of adequate immunization
30 against haemophilus influenza b shall be required prior to
31 enrollment in any licensed child care center. Immunizations
32 shall be provided according to recommendations provided by the
33 Iowa department of health subject to the provisions of
34 subsections 3 and 4.

35 Sec. 6. Section 145.1A, Code Supplement 1993, is amended

1 to read as follows:

2 145.1A REPEAL.

3 This chapter is repealed effective July 1, 1994 1996.

4 Sec. 7. Section 225C.23, Code 1993, is amended to read as
5 follows:

6 225C.23 BRAIN INJURY RECOGNIZED AS DISABILITY.

7 The department of human services, the Iowa department of
8 public health, the department of education and its divisions
9 of special education and vocational rehabilitation, the
10 department of human rights and its division for persons with
11 disabilities, the department for the blind, and all other
12 state agencies which serve persons with brain injuries, shall
13 recognize brain injury as a distinct disability and shall
14 identify those persons with brain injuries among the persons
15 served by the state agency. For the purposes of this section
16 and section 135.22A, "brain injury" means clinically evident
17 brain damage or spinal cord injury resulting directly or
18 indirectly from trauma, infection, anoxia, or vascular lesions
19 not primarily related to degenerative or aging processes,
20 which temporarily or permanently impairs a person's physical
21 or cognitive functions.

22 Sec. 8. 1993 Iowa Acts, chapter 55, section 1, subsection
23 2, is amended to read as follows:

24 2. The department shall adopt rules providing for an
25 increase in the fees charged by the state registrar and the
26 clerks of the district court for vital records services
27 pursuant to section 144.46. ~~The fee increase implemented~~
28 ~~pursuant to this section shall not apply to the fees charged~~
29 ~~by the clerks of the district court for vital records~~
30 ~~services.~~ The increased fee shall apply for the period
31 beginning July 1, 1993, and ending June 30, 1997. The fee
32 increase shall be in an amount necessary to implement the
33 vital records modernization project in accordance with the
34 provisions of subsection 1. The Notwithstanding section
35 144.46, the revenue derived from the amount of the fee

1 increase is appropriated to the Iowa department of public
2 health for the duration of the project and shall be used for
3 the costs of the project. Notwithstanding section 8.33,
4 moneys appropriated to the department pursuant to this section
5 which remain unexpended at the end of a fiscal year shall not
6 revert to the general fund of the state but shall remain
7 available in the succeeding fiscal year for the purposes for
8 which they were appropriated.

9 EXPLANATION

10 Section 1 exempts substance abuse programs not funded by
11 the department and accredited or licensed by recognized
12 organizations approved by the commission from the licensing
13 requirements of chapter 125.

14 Section 2 changes the reporting deadline for those counties
15 operating substance abuse programs from June 10 to within 60
16 days after the end of the fiscal year in which the money is
17 granted.

18 Section 3 changes the definition of brain injury by
19 limiting brain injury to trauma-related or anoxia-related
20 injuries to comply with the center for disease control's
21 definition and provides that brain injury as part of a
22 diagnosis must be reported. A reporting requirement of
23 physicians is eliminated.

24 Section 4 changes the reference for brain injury to the
25 broader definition found in section 225C.23. The advisory
26 council on head injuries may address brain injuries resulting
27 from infection or vascular lesions as well as those brain
28 injuries which are trauma-related or anoxia-related.

29 Section 5 requires that any child attending a licensed
30 child care center be immunized against haemophilus influenza
31 b.

32 Section 6 changes the date for repealing chapter 145, which
33 established the health data commission, from July 1, 1994, to
34 July 1, 1996.

35 Section 7 defines "brain injury" when recognized as a

1 disability.

2 Section 8 raises the fee for services provided by clerks of
3 the district court to coincide with fees charged by the state
4 registrar. The fees collected shall be used for the vital
5 records modernization project.

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HOUSE FILE 2145
FISCAL NOTE

A fiscal note for House File 2145 is hereby submitted pursuant to Joint Rule 17. Data used in developing this fiscal note is available from the Legislative Fiscal Bureau to members of the Legislature upon request.

House File 2145 contains miscellaneous provisions relating to the Department of Public Health (DPH). The provisions include the following.

- Section 1: Exempts certain substance abuse programs from the licensing requirements of Chapter 125.
- Section 2: Changes the reporting deadline for county substance abuse programs.
- Section 3: Changes the definition of a brain injury and eliminates a physician reporting requirement.
- Section 4: Changes the reference for brain injury to the definition found in section 225C.23.
- Section 5: Requires that any child attending a licensed child care center be immunized against haemophilus influenza b.
- Section 6: Changes the date for repealing chapter 145, which established the health data commission, from July 1, 1994, to July 1, 1996.
- Section 7: Recognizes and defines "brain injury" as a distinct disability.
- Section 8: Raises the fee for services collected by clerks of district courts to coincide with fees charged by the State registrar.

Assumptions

Section 3

1. Based on the current number of hospitalized vs. non-hospitalized patients, narrowing the requirement of reportable injuries to hospitalized patients will reduce the number of reports by 2/3.
2. Fewer reports will be less labor-intensive for mandatory reporters.

Section 5

1. Based on actual vaccine usage for 1993, 72,000 doses of haemophilus influenza b vaccine will be needed.
2. The amount of funds that will be needed to meet obligations are relative to rule change.
3. Federal/general fund estimates are based on historical spending for haemophilus b vaccine and the amount allocated from general funds and by

the CDC.

Section 6

1. The Health Data Commission budget level will remain constant for FY 1995 and FY 1996.
2. The Health Data Commission will be operational through FY 1996 and then be replaced by the Community Health Management Information System (CHMIS).
3. CHMIS will not request State appropriations.
4. The DPH will not be the lead agency for CHMIS.

Section 8

1. The increase will go to the fund to implement the Vital Records modernization project.
2. 300,000 certified copies will be issued. This estimate is based on dollars deposited by the Judicial branch during 1991 (\$1,800,000) divided by the \$6 per copy fee.
3. Clerks of Courts will now charge a \$10 fee for certified copies.
4. The increased fee will be effective until June 30, 1997.

Fiscal Impact: The fiscal impact of Section 6 is \$290,250 in FY 1995 and \$290,250 in FY 1996. Section 8 would not have any potential fiscal impact on the General Fund until FY 1997. Sections 1, 2, 4 and 7 would have no fiscal impact. The net effect of Sections 3 and 5 is also zero. The following is a breakdown of related revenues and expenditures by Section.

Section 3

	Fiscal Year 1995			Fiscal Year 1996		
	Current Law	Proposed Law	Increase (Decrease)	Current Law	Proposed Law	Increase (Decrease)
<u>REVENUE</u>						
Federal Funds	\$ 50,000	\$ 30,000	\$ (20,000)	\$ 50,000	\$ 30,000	\$ (20,000)
<u>EXPENDITURES</u>						
Salaries	\$ 50,000	\$ 30,000	\$ (20,000)	\$ 50,000	\$ 30,000	\$ (20,000)
NET EFFECT	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

Section 5

	Fiscal Year 1995			Fiscal Year 1996		
	Current Law	Proposed Law	Increase (Decrease)	Current Law	Proposed Law	Increase (Decrease)
<u>REVENUE</u>						
General Fund	\$ 50,000	\$ 60,000	\$ 10,000	\$ 60,000	\$ 60,000	\$ 0
Federal Funds	\$ 303,500	\$ 328,500	\$ 25,000	\$ 303,500	\$ 335,000	\$ 31,500
Total	\$ 363,500	\$ 388,500	\$ 25,000	\$ 363,500	\$ 395,000	\$ 31,500
<u>EXPENDITURES</u>						
Vaccine/Print	\$ 363,500	\$ 388,500	\$ 25,000	\$ 363,500	\$ 395,000	\$ 31,500

-3-

NET EFFECT \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0

Section 6

	Fiscal Year 1995			Fiscal Year 1996		
	Current Law	Proposed Law	Increase (Decrease)	Current Law	Proposed Law	Increase (Decrease)
REVENUE						
General Fund \$	0	\$ 290,250	\$ 290,250	\$ 0	\$ 290,250	\$ 290,250
EXPENDITURES						
Support \$	0	\$ 250	\$ 250	\$ 0	\$ 250	\$ 250
Contract \$	0	\$ 290,000	\$ 290,000	\$ 0	\$ 290,000	\$ 290,000
Total \$	0	\$ 290,250	\$ 290,250	\$ 0	\$ 290,250	\$ 290,250
NET EFFECT \$	0	\$ 290,250	\$ 290,250	\$ 0	\$ 290,250	\$ 290,250

Section 8

The provisions of Section 8 would generate an estimated additional \$1,200,000 each year through FY 1997 (an additional \$4.00 each on 300,000 copies). According to the bill, revenues derived from the fee increase are to be deposited in the fund established for the modernization of Vital Records that includes the county Clerks of Court Vital Records process. Moneys deposited in the fund which have not been expended on the modernization project by the end of FY 1997 will revert to the General Fund. (LSB 3285hv, VMT)

FILED FEBRUARY 17, 1994

BY DENNIS PROUTY, FISCAL DIRECTOR

*Substituted for
SF 2115
314-94
(P. 642)*

HOUSE FILE 2145
BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO HSB 512)

(As Amended and Passed by the House February 17, 1994)

Passed House, ^(P.300) Date 2-17-94 Passed Senate, ^(P.1011) Date 4/5/94
Vote: Ayes 91 Nays 4 Vote: Ayes 48 Nays 0
Approved April 13, 1994

A BILL FOR

1 An Act relating to public health issues regarding persons with
2 brain injury, substance abuse treatment programs, the health
3 data commission, vital records services, and immunizations.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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House Amendments _____

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1 Section 1. Section 125.13, subsection 2, Code 1993, is
2 amended by adding the following new paragraph:

3 NEW PARAGRAPH. i. A substance abuse treatment program not
4 funded by the department which is accredited or licensed by
5 the joint commission on the accreditation of health care
6 organizations, the commission on the accreditation of
7 rehabilitation facilities, the American osteopathic
8 association, or another recognized organization approved by
9 the commission. All survey reports from the accrediting or
10 licensing body must be sent to the department.

11 Sec. 2. Section 125.59, subsection 1, paragraph b, Code
12 1993, is amended to read as follows:

13 b. The county shall submit an accounting of the
14 expenditures and shall submit an annual financial report, a
15 description of the program, and the results obtained before
16 June-10 within sixty days after the end of the same fiscal
17 year in which the money is granted.

18 Sec. 3. Section 135.22, Code 1993, is amended to read as
19 follows:

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21 1. As used in this section, ~~section-135-22A, and section~~
22 ~~225E-23,~~ "brain injury" means clinically evident brain damage
23 or spinal cord injury resulting ~~directly or indirectly~~ from
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25 ~~primarily related to degenerative or aging processes,~~ which
26 temporarily or permanently impairs a person's physical or
27 cognitive functions.

28 2. The director shall establish and maintain a central
29 registry of persons with brain injuries in order to facilitate
30 prevention strategies and the provision of appropriate
31 rehabilitative services to the persons by the department and
32 other state agencies. ~~For a patient who is not admitted to a~~
33 ~~hospital but is treated in a physician's office, physicians~~
34 ~~shall report a brain injury to the director within seven days~~
35 ~~after identification of the person sustaining a brain injury.~~

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2 injury and their diagnoses to the director no later than
3 forty-five days after the close of a quarter in which the
4 patient was discharged. The report shall contain the name,
5 age and residence of the person, the date, type, and cause of
6 the brain injury, and additional information as the director
7 requires, except that where available, ~~physicians-and~~
8 hospitals shall report the Glasgow coma scale. The director
9 shall consult with health care providers concerning the
10 availability of additional relevant information. The
11 department shall maintain the confidentiality of all
12 information which would identify any person named in a report.
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14 fide research purposes if the confidentiality of the
15 identifying information is maintained by the researchers, or
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17 the brain injury or by the person's guardian or, if the person
18 is a minor, by the person's parent or guardian.

19 Sec. 4. Section 135.22A, subsection 1, paragraph b, Code
20 1993, is amended to read as follows:

21 b. "Head injury" means "brain injury" as defined in
22 section ~~135-22~~ 225C.23.

23 Sec. 5. Section 139.9, subsection 2, Code 1993, is amended
24 to read as follows:

25 2. No A person shall not be enrolled in any licensed child
26 care center, elementary or secondary school in Iowa without
27 evidence of adequate immunization against diphtheria,
28 pertussis, tetanus, poliomyelitis, rubeola, and rubella;
29 ~~except-as-provided-in~~ Evidence of adequate immunization
30 against haemophilus influenza b shall be required prior to
31 enrollment in any licensed child care center. Immunizations
32 shall be provided according to recommendations provided by the
33 Iowa department of health subject to the provisions of
34 subsections 3 and 4.

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1 to read as follows:

2 145.1A REPEAL.

3 This chapter is repealed effective July 1, ~~1994~~ 1996.

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7 The department of human services, the Iowa department of
8 public health, the department of education and its divisions
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10 department of human rights and its division for persons with
11 disabilities, the department for the blind, and all other
12 state agencies which serve persons with brain injuries, shall
13 recognize brain injury as a distinct disability and shall
14 identify those persons with brain injuries among the persons
15 served by the state agency. For the purposes of this section
16 and section 135.22A, "brain injury" means clinically evident
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22 Sec. 8. 1993 Iowa Acts, chapter 55, section 1, subsection
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HSB 512

HUMAN RESOURCES

SENATE/HOUSE FILE 2145
BY (PROPOSED DEPARTMENT OF
PUBLIC HEALTH BILL)

Passed Senate, Date _____ Passed House, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act relating to public health issues regarding brain injured
2 individuals, substance abuse treatment programs, the health
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4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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1 disability.

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3 the district court to coincide with fees charged by the state
4 registrar. The fees collected shall be used for the vital
5 records modernization project.

6 BACKGROUND STATEMENT

7 SUBMITTED BY THE AGENCY

8 Section 1 exempts substance abuse treatment programs which
9 do not receive funding from the department from the licensing
10 requirements under this chapter provided that they have
11 received accreditation from a commission-recognized
12 organization. This change is identical to a provision enacted
13 for hospitals in 1989 (89 Acts, ch 243).

14 Section 2 amends the date of submission of the annual
15 financial report and program description from June 10 to
16 within 60 days of the end of the fiscal year in which the
17 funding was provided. This will allow complete reporting of
18 financial and program activities for the entire fiscal year
19 and will eliminate reimbursement problems and reporting
20 confusion for the counties and the department.

21 Sections 3 and 7 change the definition and reporting
22 requirements for brain injuries to coincide with current
23 center for disease control recommendations. These changes
24 would eliminate the requirement for reporting from physician
25 offices and emergency rooms. Reporting would only occur from
26 hospitals following a hospitalization of a brain injured
27 patient. The definition for recognizing brain injury as a
28 disability will not change.

29 Section 4 changes the reference for brain injury definition
30 from 135.22 to 225C.23 which is the more inclusive definition
31 encompassing trauma-related or anoxia-related injuries as well
32 as those brain injuries resulting from infection and vascular
33 lesions. The advisory council does not wish to be limited in
34 its advocacy activities.

35 Section 5 adds haemophilus influenza b (HIB) vaccine to the

1 immunizations required for enrollment in licensed day care
2 centers. About one in every 200 American children develops
3 invasive haemophilus b disease before the age of five. Center
4 for disease control statistics indicate the peak incidence
5 occurs between the ages of six months and one year. More than
6 800 of these cases are fatal. Children at significant risk
7 are children in group activities (e.g., day care centers and
8 nursery schools), African-American and inner-city children.
9 Iowa is only one of 12 states which currently does not require
10 the HIB vaccine. The HIB vaccine is already required in the
11 federally funded head start programs. The department has
12 adequate center for disease control grant funds available to
13 cover the HIB vaccines.

14 Section 6 would extend the 1993 health and human rights
15 appropriation bill (93 Acts, ch 170) sunset language of the
16 health data commission scheduled for July 1, 1994. Given the
17 projected delay in the full implementation of the community
18 health management information system, it will be necessary to
19 extend the sunset on the health data commission two years to
20 ensure continuity of access and analysis of health data.

21 Section 8 adjusts the fee assessed for vital records
22 services provided by the clerks of the district court to be
23 commensurate with the fees established by the Iowa department
24 of public health under this chapter. The increase in fees
25 will be used for the purpose of financing the vital records
26 modernization project.

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HOUSE FILE 2145

AN ACT

RELATING TO PUBLIC HEALTH ISSUES REGARDING PERSONS WITH BRAIN INJURY, SUBSTANCE ABUSE TREATMENT PROGRAMS, THE HEALTH DATA COMMISSION, VITAL RECORDS SERVICES, AND IMMUNIZATIONS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. Section 125.13, subsection 2, Code 1993, is amended by adding the following new paragraph:

NEW PARAGRAPH. i. A substance abuse treatment program not funded by the department which is accredited or licensed by the joint commission on the accreditation of health care organizations, the commission on the accreditation of rehabilitation facilities, the American osteopathic association, or another recognized organization approved by the commission. All survey reports from the accrediting or licensing body must be sent to the department.

Sec. 2. Section 125.59, subsection 1, paragraph b, Code 1993, is amended to read as follows:

b. The county shall submit an accounting of the expenditures and shall submit an annual financial report, a description of the program, and the results obtained before ~~June 30~~ within sixty days after the end of the same fiscal year in which the money is granted.

Sec. 3. Section 135.22, Code 1993, is amended to read as follows:

135.22 CENTRAL REGISTRY FOR BRAIN INJURIES.

1. As used in this section, ~~section 135-22A, and section 225B-23;~~ "brain injury" means clinically evident brain damage or spinal cord injury resulting ~~directly or indirectly~~ from ~~trauma; infection; or anoxia, or vascular lesions not primarily related to degenerative or aging processes;~~ which temporarily or permanently impairs a person's physical or cognitive functions.

2. The director shall establish and maintain a central registry of persons with brain injuries in order to facilitate prevention strategies and the provision of appropriate rehabilitative services to the persons by the department and other state agencies. ~~For a patient who is not admitted to a hospital but is treated in a physician's office, physicians shall report a brain injury to the director within seven days after identification of the person sustaining a brain injury.~~ Hospitals shall report patients who are admitted with a brain injury and their diagnoses to the director no later than forty-five days after the close of a quarter in which the patient was discharged. The report shall contain the name, age and residence of the person, the date, type, and cause of the brain injury, and additional information as the director requires, except that where available, ~~physicians and~~ hospitals shall report the Glasgow coma scale. The director shall consult with health care providers concerning the availability of additional relevant information. The department shall maintain the confidentiality of all information which would identify any person named in a report. However, the identifying information may be released for bona fide research purposes if the confidentiality of the identifying information is maintained by the researchers, or the identifying information may be released by the person with the brain injury or by the person's guardian or, if the person is a minor, by the person's parent or guardian.

Sec. 4. Section 135.22A, subsection 1, paragraph b, Code 1993, is amended to read as follows:

b. "Head injury" means "brain injury" as defined in section ~~135-22~~ 225C.23.

Sec. 5. Section 139.9, subsection 2, Code 1993, is amended to read as follows:

2. No A person shall not be enrolled in any licensed child care center, elementary or secondary school in Iowa without evidence of adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, rubella, and rubellay, ~~except as provided in~~ Evidence of adequate immunization

against haemophilus influenza b shall be required prior to enrollment in any licensed child care center. Immunizations shall be provided according to recommendations provided by the Iowa department of health subject to the provisions of subsections 3 and 4.

Sec. 6. Section 145.1A, Code Supplement 1993, is amended to read as follows:

145.1A REPEAL.

This chapter is repealed effective July 1, 1994 ~~1996~~.

Sec. 7. Section 225C.23, Code 1993, is amended to read as follows:

225C.23 BRAIN-INJURY RECOGNIZED AS DISABILITY.

The department of human services, the Iowa department of public health, the department of education and its divisions of special education and vocational rehabilitation, the department of human rights and its division for persons with disabilities, the department for the blind, and all other state agencies which serve persons with brain injuries, shall recognize brain injury as a distinct disability and shall identify those persons with brain injuries among the persons served by the state agency. For the purposes of this section and section 135.22A, "brain injury" means clinically evident brain damage or spinal cord injury resulting directly or indirectly from trauma, infection, anoxia, or vascular lesions not primarily related to degenerative or aging processes, which temporarily or permanently impairs a person's physical or cognitive functions.

Sec. 8. 1993 Iowa Acts, chapter 55, section 1, subsection 2, is amended to read as follows:

2. The department shall adopt rules providing for an increase in the fees charged by the state registrar and the clerks of the district court for vital records services pursuant to section 144.46. ~~The fee increase implemented pursuant to this section shall not apply to the fees charged by the clerks of the district court for vital records services.~~ The increased fee shall apply for the period beginning July 1, 1993, and ending June 30, 1997. The fee

increase shall be in an amount necessary to implement the vital records modernization project in accordance with the provisions of subsection 1. ~~The Notwithstanding section 144.46, the revenue derived from the amount of the fee increase is appropriated to the Iowa department of public health for the duration of the project and shall be used for the costs of the project. Notwithstanding section 8.33, moneys appropriated to the department pursuant to this section which remain unexpended at the end of a fiscal year shall not revert to the general fund of the state but shall remain available in the succeeding fiscal year for the purposes for which they were appropriated.~~

HAROLD VAN MAANEN
Speaker of the House

LEONARD L. BOSWELL
President of the Senate

I hereby certify that this bill originated in the House and is known as House File 2145, Seventy-fifth General Assembly.

ELIZABETH ISAACSON
Chief Clerk of the House

Approved April 13, 1994

TERRY E. BRANSTAD
Governor