Senate Study Bill 3186

Bill Text

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         Section 1. Section 144.29A, subsection 1, Code 1999, is
  1 2 amended to read as follows:

    A health care provider who

 initially identifies and
  diagnoses a spontaneous termination of pregnancy or who
  1 5 induces a termination of pregnancy shall file with the
  1 6 department a report for each termination within thirty days of
  1 7 the occurrence. The health care provider shall make a good
  1 8 faith effort to obtain all of the following information that
  1 9 is available with respect to each termination:
  1 10 a. The confidential health care provider code as assigned
  1 11 by the department.
  1 12 b. The
 report tracking

    confidential patient identification

 1 13 number.
 1 14 c. The name of the facility at which the termination of
 1 15 prequancy took place.
 1 16 d. The name of the city or location at which the
 1 17 termination of pregnancy took place.
  1 18
       e. The name of the attending physician.
          f. The name of the person completing the report.
  1 19
  1 20
<u>g.</u> The
 maternal health services region of the Iowa
 1 21
 department of public health, as designated as of July 1, 1997,
  1 22
in which the patient resides
- city, county, state, and zip code
  1 23 of the patient's residence.
  1 24
- h. The race of the patient.
 1 25 <u>i. Whether the patient is of Hispanic or non-Hispanic</u>
  1 26 <u>origin.</u>
         j. The ancestry of the patient.
 1 27
  1 28
- \underline{k}. The age of the patient.
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- 1. The marital status of the patient.
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- \underline{m}. The educational level of the patient.
 h.
- n. The number of previous pregnancies, live births,
 1 32 both living and deceased, and spontaneous or induced
  1 33 terminations of pregnancies.
  1 34
- o. The month and year in which the termination
 1 35 occurred.
 2 1
         p. The type of termination procedure used.
  2 2
number of weeks since
- month, day, and year on
  2 3 which the patient's last menstrual period began and a clinical
  2 4 estimate of gestation.
         Sec. 2. Section 144.29A, subsection 2, is amended to read
  2 6 as follows:
          2. It is the intent of the general assembly that the
  2 8 information shall be collected, reproduced, released, and
  2 9 disclosed in a manner specified by rule of the department,
  2 10 adopted pursuant to chapter 17A, which ensures the anonymity
  2 11 of the patient who experiences a termination of pregnancy, the
  2 12 health care provider who
 identifies and diagnoses or

    induces a

  2 13 termination of pregnancy, and the hospital, clinic, or other
  2 14 health facility in which a termination of pregnancy is
  2 15
 identified and diagnosed or
- induced. The department may share
  2 16 information with federal public health officials for the
  2 17 purposes of securing federal funding or conducting public
  2 18 health research. However, in sharing the information, the
  2 19 department shall not relinquish control of the information,
  2 20 and any agreement entered into by the department with federal
  2 21 public health officials to share information shall prohibit
  2 22 the use, reproduction, release, or disclosure of the
  2 23 information by federal public health officials in a manner
  2 24 which violates this section. The department shall publish
  2 25
- a demographic summary of the information obtained
  2 26 pursuant to this section, except that the department shall not
  2 27 reproduce, release, or disclose any information obtained
  2 28 pursuant to this section which reveals the identity of any
  2 29 patient, health care provider, hospital, clinic, or other
  2 30 health facility, and shall ensure anonymity in the following
  2 31 ways:
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2 32
          a. The department may use information concerning the
  2 33
 report tracking
- confidential patient identification number or
  2 34 concerning the identity of a reporting health care provider,
  2 35 hospital, clinic, or other health facility only for purposes
    1 of information collection. The department shall
 not
- only
  3 2 reproduce, release, or disclose this information
 for any
  3 3
          other than for use in annually publishing
  3 4 demographic summary form under this section.
         b. The department shall enter the information, from any
  3 6 report of termination submitted, within thirty days of receipt
  3 7 of the report
   and

    The department shall

 immediately
- destroy
  3 8 the report following entry of the information and within a
  3 9 time period specified by rules adopted by the department
  3 10 pursuant to chapter 17A. However, entry of the information
  3 11 from a report shall not include any health care provider,
  3 12 hospital, clinic, or other health facility identification
  3 13 information including, but not limited to, the confidential
  3 14 health care provider code, as assigned by the department.
  3 15
          c. To protect confidentiality, the department shall limit
  3 16 release of information to release in an aggregate form which
  3 17 prevents identification of any individual patient, health care
  3 18 provider, hospital, clinic, or other health facility. For the
  3 19 purposes of this paragraph, "aggregate form" means a
  3 20 compilation of the information received by the department on
  3 21 termination of pregnancies for each information item listed,
  3 22 with the exceptions of the
 <del>report tracking</del>

    confidential

  3 23 patient identification number, the health care provider code,
  3 24 and any set of information for which the amount is so small
  3 25 that the confidentiality of any person to whom the information
  3 26 relates may be compromised. The department shall establish a
  3 27 methodology to provide a statistically verifiable basis for
  3 28 any determination of the correct amount at which information
  3 29 may be released so that the confidentiality of any person is
  3 30 not compromised.
          Sec. 3. Section 144.29A, subsection 5, Code 1999, is
  3 32 amended to read as follows:
  3 33
         5. A health care provider shall assign a
  report tracking
  3 34 confidential patient identification number which enables the
  3 35 health care provider to access the patient's medical
    1 information without identifying the patient.
          Sec. 4. Section 144.29A, subsection 9, Code 1999, is
    3 amended by striking the subsection.
                                 EXPLANATION
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This bill amends Code section 144.29A to provide for the 4 6 collection of additional information through the termination 4 7 of pregnancy reporting process. Additional information to be 4 8 collected under the bill includes: the name of the facility 4 9 at which the termination of pregnancy took place; the name of 4 10 the city or location at which the termination of pregnancy 4 11 took place; the name of the attending physician; the name of 4 12 the person completing the report; the confidential 4 13 identification number of the patient; the city, county, state, 4 14 and zip code of the area in which the patient resides; whether 4 15 the patient is of Hispanic or non-Hispanic origin; the 4 16 ancestry of the patient; if previous live births have 4 17 occurred, whether the children are living or deceased at the 4 18 time of the reporting; the type of termination procedure used, 4 19 if the termination is induced; and the month, day, and year on 4 20 which the patient's last menstrual period began. The bill 4 21 also makes conforming changes relating to the use of a 4 22 confidential patient identification number, and makes changes 4 23 relating to the dissemination of information. The bill also 4 24 deletes the subsection which defines "spontaneous termination 4 25 of pregnancy" as the bill eliminates collection of information 4 26 relating to spontaneous terminations with the exception of 4 27 prior spontaneous terminations. 4 28 LSB 6653XC 78

4 29 pf/as/5.1