HB 471-FN - AS AMENDED BY THE HOUSE

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2017 SESSION

17-0057
01/09

HOUSE BILL ***471-FN***

AN ACT relative to induced termination of pregnancy statistics.

SPONSORS: Rep. Souza, Hills. 43; Rep. Notter, Hills. 21; Rep. Baldasaro, Rock. 5; Rep. Itse, Rock. 10; Rep. Ulery, Hills. 37; Rep. Cordelli, Carr. 4; Rep. Murotake, Hills. 32; Rep. Beaudoin, Straf. 9; Rep. Gould, Hills. 7; Rep. Seidel, Hills. 28; Sen. Gannon, Dist 23; Sen. Giuda, Dist 2

COMMITTEE: Health, Human Services and Elderly Affairs

ANALYSIS

This bill requires the department of health and human services to publish an annual report consisting of an aggregate statistical summary of all induced terminations of pregnancy performed in New Hampshire. This report shall be available to the public. Data submitted by providers shall be for statistical purposes only and not public records.

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Explanation: Matter added to current law appears in ***bold italics.***
Matter removed from current law appears [~~in brackets and struckthrough.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Seventeen

AN ACT relative to induced termination of pregnancy statistics.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 New Section; Annual Report Required. Amend RSA 126-A by inserting after section 4-h the following new section:

126-A:4-i Induced Termination of Pregnancy; Annual Report.

I. In this section:

(a) "Aggregate summary" means compilation of the information received by the department of health and human services on induced terminations of pregnancy.

(b) "Department" means the department of health and human services.

(c) "Division" means the division of vital records administration, department of state.

(d) "Facility" or "medical facility" means any public or private hospital, clinic, center, medical school, medical training institution, health care facility, physician's office, infirmary, dispensary, ambulatory surgical treatment center, or other institution or location wherein medical care is provided to any person.

(e) "Health care provider" means any individual licensed to provide health care under RSA 326-B:18 or RSA 329 and who provides induced terminations of pregnancy.

(f) "Identification number for health care provider or facility" means a confidential identifier for a health care provider or a facility including the location of the health care provider or the facility by city, town, or county.

(g) "Induced termination of pregnancy" means an intervention performed by a licensed clinician, including a physician, nurse, midwife, nurse practitioner, or physician assistant, that is intended to terminate an ongoing pregnancy.

(h) "Patient confidential identification code or number" means a confidential identifier for a patient including primary residence by state and city, town, or county.

(i) "Procedure" means the process by which an induced termination of pregnancy occurs.

II.(a) The division shall collect non-identifying confidential data on induced termination of pregnancy occurring within the state of New Hampshire using the New Hampshire Vital Record Information Network (NHVRIN) electronic system or any modified or replacement electronic system under the jurisdiction of the division. The division shall bear all responsibility for maintaining the confidentiality of these records. This data shall be stored using only the confidential number of the health care provider assigned by the department to the provider prior to the submission of the form. Provider names or other identifying data shall not be stored in the division or department data

systems. This data shall only be released to the department as authorized by this section. Each health care provider or facility shall use an electronic form for such purpose. The electronic form shall be made available by the department to each health care provider or facility. The form shall only require disclosure of information required under this section. The reporting health care provider or facility shall create and use an anonymous patient identification code or number created solely for the purpose of this reporting. The department shall assign a confidential number to each health care provider and facility required to submit the electronic form under this section. The confidential number, or any other personally identifiable information, obtained under this paragraph shall be for statistical purposes only and therefore be exempt from disclosure under RSA 91-A.

(b) The electronic form shall be completed by the health care provider or the facility and securely transmitted to the division on or before the 15th day of each month for the first 6 months of reporting and thereafter on a quarterly basis on the 15th day of the first month of the calendar quarter for all induced terminations of pregnancy occurring within the previous reporting period. The electronic form shall be submitted for each reporting period, even if no procedures were performed during the reporting period, for as long as the facility continues to offer the procedure. One final electronic form shall be submitted for the full reporting period after the procedure is no longer offered.

(c) The department shall have sole responsibility for the analysis of the data and the preparation and distribution of the aggregate summary.

(d) The department shall publish an annual report, commencing with data to be reported as of January 1, 2019, to be posted on the department's website not later than June 30th of the subsequent year, based on an aggregate summary of the information obtained pursuant to this section. No data may be released by the department that would have the capacity to personally identify either the health care provider who performed the induced termination of pregnancy or the patient on whom it was performed.

III. The electronic form provided by the department shall include the following data:

(a) The confidential identification number for the health care provider or facility.

(b) The patient's confidential identification code or number.

(c) The patient's use and, if applicable, type of contraception.

(d) The patient's age.

(e) The estimated gestational age of the fetus as determined by the health care provider using as a reference the 2014 American College of Obstetricians and Gynecologists guidelines or any subsequent editions thereto.

(f) The county or municipality if the population of the municipality exceeds 20,000 based on the United States Census Bureau of the address of the patient. If the patient is a resident of another state, then indicated as out-of-state.

(g) Date of termination by month and year.

(h) Method of termination as follows:

(1) Curettage;

(2) Intrauterine instillation;

(3) Medical (nonsurgical); or

(4) Other as specified by the health care provider.

IV. The department's annual report shall provide aggregate data using the following fields:

(a) The county or municipality if the population of the municipality exceeds 20,000 based on the United States Census Bureau of the address of the patient. If the patient is a resident of another state, then indicated as out-of-state.

(b) The patient's use and, if applicable, type of contraception.

(c) Patient age listed in ranges as determined by the department using Centers for Disease Control and Prevention (CDC) guidelines.

(d) Gestational age of the fetus listed in ranges as determined by the department using CDC guidelines.

(e) Method of termination as follows:

(1) Curettage;

(2) Intrauterine instillation;

(3) Medical (nonsurgical); or

(4) Other as specified by the health care provider.

V.(a) Notwithstanding RSA 126:28 and except as otherwise provided in this section, information obtained by the department under this section shall be used only for statistical purposes and such information shall not be released in any manner other than that outlined in this section for preparation of the reports. Such release shall not occur in any manner which would lead to or permit the identification of the person on whom the procedure was performed. Any releases of the information obtained shall not disclose or permit the identification of any person filing a report, the facility at which the procedure was performed, or the identity of any health care provider as defined in subparagraph (e) who submits a report to the division under this section. The information obtained by the department under subparagraph III(a), regarding the confidential identification number for the health care provider or facility, and subparagraph III(b), regarding the patient's confidential identification code or number, shall only be used for internal auditing and quality assurance purposes by the department.

(b) Excluding any aggregate summary as defined in subparagraph I(a), the department and division shall purge all data collected and obtained under this section after 3 years. The facility or health care provider shall permanently delete or destroy all reporting data, including the patient confidential identification code or number, utilized under this section after 3 years. The medical record shall be maintained in accordance with standard facility procedures.

VI. If any provision of this section, or the application thereof to any person or circumstance, is held invalid, such determination shall not affect the provisions or applications of this section

which can be given effect without the invalid provision or application, and to that end the provisions of this section are severable.

2 Effective Date. This act shall take effect 30 days after its passage.

LBAO
17-0057
1/6/17

HB 471-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to induced termination of pregnancy statistics.

FISCAL IMPACT: [X] State [ ] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2018**	**FY 2019**	**FY 2020**	**FY 2021**
Appropriation	$0	$0	$0	$0
Revenue	$0	$0	$0	$0
Expenditures	Indeterminable Increase	Indeterminable Increase	Indeterminable Increase	Indeterminable Increase
Funding Source:	[X] General	[ ] Education	[ ] Highway	[ ] Other

METHODOLOGY:

This bill requires the Department of State, Division of Vital Records to collect non-identifying data on induced terminations of pregnancy occurring within New Hampshire using the New Hampshire Information Vital Record Information Network, or other system under the jurisdiction of the Division of Vital Records. This bill also requires the Department of Health and Human Services to provide electronic forms to health providers and facilities in order for them to complete applicable information on or before the 15th of each month. Records will remain confidential and be maintained by the Division of Vital Records. Confidential data would be released to the Department of Health and Human Services for statistical purposes only, and the Department would be required to publish publicly available annual reports with an aggregate summary of data.

The Department of Health and Human Services states data analysis and reporting would be provided through a contract with the University of New Hampshire for Maternal and Child Health Epidemiology Services and anticipates an additional 0.1 FTE or four hours per week would be required to comply with legislative requirements. The current contract expires June 30, 2018, and is funded with 52 percent general funds and 48 percent federal funds. Based on costs in the current contract and anticipated additional work, the Department estimates the following expenditures:

Type of Expenditure	FY 2018*	FY 2019	FY 2020	FY 2021
Salary and Benefits	$7,138	$14,705	$15,146	$15,600
Travel	$281	$563	$563	$563
Supplies and Services	$42	$42	$42	$42

Facilities and Administrative	$3,869	$3,985	$4,104	$4,227
Training	$10,000	-	-	-
Total	**$21,330**	**$19,295**	**$19,855**	**$20,432**
*FY 2018 represents six months of expenditures based on effective date of proposed legislation.				

The Department of State estimates an additional one-time expenditure in FY 2018 of $141,000 (for a total of $162,330 in that fiscal year) to set up and deploy a new module within the New Hampshire Information Vital Record Information Network. This expenditure includes vendor, staff, and graphic services costs.

AGENCIES CONTACTED:

Department of Health and Human Services and Department of State