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January 2, 2019

## NOTICE OF PROPOSED RULEMAKING

Revisions to Notification of Disease Regulations, Chapter 511-2-1

The Department of Public Health proposes the attached amendments to Rule 511-2-1-.01, "Definitions"; Rule 511-2-1-.03, "Confidentiality"; Rule 511-2-1-.05, "Pilot Study for the Reporting of Pediatric Asthma Deaths"; and further proposes the promulgation of new Rule 511-2-1-.06, "Reports to the Department of Community Health," pursuant to its authority under Georgia Code Sections 31-2A-6, 31-5-5, 31-12-2, and 31-17-2.

The purpose of the proposed rulemaking is to define additional terms related to notification of disease; to clarify the records that must be kept confidential; to allow for the public disclosure of Interim and Final Reports of outbreak or cluster investigations; to extend and make permanent the mandate for reporting pediatric asthma death data; and to clarify the process for reporting data regarding certain diseases or conditions to the Department of Community Health.

Interested persons may submit comments on these proposed revisions in writing addressed to:

Kristin L. Miller General Counsel Georgia Department of Public Health 2 Peachtree Street, NW, 15<sup>th</sup> Floor Atlanta, GA 30303

Comment may also be presented in person at a public meeting scheduled for 10:00 a.m. on January 30, 2018, in room 9-260, "Adina's Room," at 2 Peachtree Street, NW, Atlanta, Georgia 30303.

Kristin L. Miller

General Counsel

Georgia Department of Public Health

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## RULES OF THE DEPARTMENT OF PUBLIC HEALTH

# **CHAPTER 511-2-1 Notification of Disease**

511-2-101	Definitions.
511-2-103	Confidentiality.
511-2-105	Pilot Study for the Reporting of Pediatric Asthma Deaths.
511-2-106	Reports to the Department of Community Health.

#### 511-2-1-.01 **Definitions.**

- (a2) "Clinical materials" means a patient specimen taken for the purpose of identifying a suspected agent of disease, a clinical isolate derived from such a specimen, nucleic acid, or other laboratory material taken or created for the purpose of identifying a suspected agent of disease.
- (b) "Cluster" means an unusual aggregation of cases, real or perceived, of a disease or condition that are grouped together in time or space. A cluster will be redefined as an outbreak if a geographic or temporal excess in the expected number of cases and a causal link between the disease or condition and an exposure can be established.
- (c3) "Department" means the Georgia Department of Public Health.
- (d) "Exposure" means proximity to or contact with a source of a disease agent in such a manner that effective transmission of the agent or harmful effects of the agent may occur.
- (e1) "Notifiable disease" means an illness, condition, or disability listed on the Department's current official roster of notifiable diseases and conditions, as it may be revised from time to time.
- (f) "Outbreak" means an exposure that results in a higher number of cases of a disease or condition than would be expected within a defined community, geographical area, or time period. If the disease or condition is rare or has serious public health implications, a single case may be considered an outbreak.
- (g5) "Person" means any individual, firm, partnership, association, corporation, the State or any municipality or other subdivision thereof, or any other entity whether organized for profit or not.
- (h4) "Reporter" means a licensed physician, clinical laboratory, or the chief administrative officer or a designee thereof of a hospital, nursing home, clinic, health maintenance organization, university health service, primary health care center, or institution such as a school, day care center, mental health hospital, or detention facility.

Authority: O.C.G.A. §§ 31-2A-6, 31-12-2, 31-17-2.

### 511-2-1-.03 Confidentiality.

- (a) The following records shall be deemed confidential and shall not be subject to public inspection: Aall reports submitted to a county health department or to the Department pursuant to this Chapter; all, information requested or collected as part of an outbreak or cluster epidemiological investigation, subject to the exceptions described in subparagraph (b) of this Rule; all identifiable Georgia Discharge Data System data; and all information identified as "non-public" and received from the U. S. Food and Drug Administration, shall be deemed confidential and shall not be subject to public inspection.
- When an outbreak or cluster investigation is concluded, the Department's Final Report may be made public, provided that it contains no personally identifiable data. When an outbreak or cluster investigation is expected to last more than ninety days, the Department may prepare one or more Interim Reports. Such Interim Reports may be made public, provided that they contain no personally identifiable data.

Authority: O.C.G.A. §§ 31-2A-6, 31-5-5, 31-12-2, 31-17-2.

## 511-2-1-.05 Pilot Study for the Reporting of Pediatric Asthma Deaths.

- (a+) It shall be the duty of every physician, coroner, and medical examiner that attends or examines the remains of a patient under the age of 18 years old in circumstances indicating that asthma was or may have been the cause of or a contributing factor to death to report that death to the Department. It is the intent of this Rule that only one report shall be made for a particular patient, and there shall be no duty to report if a complete and accurate report has already been made by another physician, coroner, or medical examiner who has examined the patient.
- (b2) Reports shall be made to the Department within ten days of death or examination, through an online portal set up for that purpose.
- (3) This Rule shall be effective for deaths occurring on or after the effective date of this Rule, and shall remain in effect until 31 December 2018 unless extended.

Authority: O.C.G.A. §§ 31-2A-6, 31-12-2.

## 511-2-1-.06 Reports to the Department of Community Health.

- When the Department receives a report of a notifiable disease or an outbreak or cluster of disease identified in a health care facility licensed or permitted by the Department of Community Health ("DCH"), it shall be the duty of the Department to notify DCH if the disease is clinically severe or is typically associated with high morbidity or mortality.
- (b) The Department shall further notify DCH if a health care facility licensed or permitted by DCH fails or refuses to comply with the Department's public health recommendations.

Authority: O.C.G.A. §§ 31-2A-4, 31-2A-6, 31-8-82.