

111TH CONGRESS
2^D SESSION

H. R. 6109

To amend the Public Health Service Act to require the Secretary of Health and Human Services to ensure that each HHS health service program or HHS health survey provides, to the extent the Secretary determines appropriate and practicable, for the voluntary collection of data on the sexual orientation and gender identity of individuals who apply for or receive health services through such program, or who respond to such survey.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 14, 2010

Ms. BALDWIN (for herself, Mr. WAXMAN, Mr. PALLONE, and Mrs. CHRISTENSEN) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to require the Secretary of Health and Human Services to ensure that each HHS health service program or HHS health survey provides, to the extent the Secretary determines appropriate and practicable, for the voluntary collection of data on the sexual orientation and gender identity of individuals who apply for or receive health services through such program, or who respond to such survey.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Health Data Collection
3 Improvement Act of 2010”.

4 **SEC. 2. DATA COLLECTION ON SEXUAL ORIENTATION AND**
5 **GENDER IDENTITY.**

6 Title XXXI of the Public Health Service Act (42
7 U.S.C. 300kk et seq.) is amended by inserting after sec-
8 tion 3101 the following new section:

9 **“SEC. 3102. DATA COLLECTION ON SEXUAL ORIENTATION**
10 **AND GENDER IDENTITY.**

11 “(a) IN GENERAL.—The Secretary shall ensure that,
12 beginning not later than 1 year after the dissemination
13 of standards under subsection (c)(3), each HHS health
14 service program and HHS health survey provides, to the
15 extent the Secretary determines appropriate and prac-
16 ticable, for the collection of data on the sexual orientation
17 and gender identity of individuals who apply for or receive
18 health services through such program, or who respond to
19 such survey.

20 “(b) PROVISION AND USE OF INFORMATION.—

21 “(1) VOLUNTARY BASIS.—Provision of informa-
22 tion by an individual in response to a collection pur-
23 suant to subsection (a) shall be only on a voluntary
24 basis.

25 “(2) LIMITATION.—An agency or person that
26 collects data from an individual pursuant to sub-

1 section (a) shall not use such data, or the decision
2 of the individual not to provide such data, in any
3 manner that adversely affects the individual.

4 “(c) DATA STANDARDS.—

5 “(1) DEVELOPMENT.—The Secretary, in con-
6 sultation with the Office for Civil Rights of the De-
7 partment of Health and Human Services and rel-
8 evant data collection agencies, shall develop stand-
9 ards for the measurement of, and collection of infor-
10 mation about, sexual orientation and gender iden-
11 tity. In developing the standards, the Secretary shall
12 take into account recommendations made by the In-
13 stitute of Medicine Committee on Lesbian, Gay, Bi-
14 sexual, and Transgender Health Issues and Re-
15 search Gaps and Opportunities.

16 “(2) INCLUSION OF CERTAIN STANDARDS.—
17 The standards developed under paragraph (1) shall
18 include standards—

19 “(A) for categorization of sexual orienta-
20 tion and gender identity, including questions to
21 facilitate categorization;

22 “(B) for appropriate methods to collect in-
23 formation to maximize voluntary participation,
24 preserve privacy and confidentiality, and avoid

1 unintended negative consequences to an indi-
2 vidual or program; and

3 “(C) that address the feasibility of data
4 collection in different contexts and the appro-
5 priateness and analytical validity of collection
6 within specific programs or types of programs.

7 “(3) DISSEMINATION.—Not later than 1 year
8 after the date of enactment of this section, the Sec-
9 retary shall disseminate the standards developed
10 under paragraph (1) to the offices and agencies of
11 the Department of Health and Human Services,
12 other Federal departments and agencies that admin-
13 ister health service programs, and other interested
14 parties.

15 “(4) REVISION.—The Secretary shall revise the
16 standards developed under paragraph (1), and dis-
17 seminate the revised standards, as the Secretary de-
18 termines appropriate.

19 “(d) ANALYSIS.—

20 “(1) DEPARTMENTAL ANALYSIS.—For each
21 HHS health service program and HHS health sur-
22 vey, the Secretary shall—

23 “(A) analyze data collected under sub-
24 section (a) to detect and monitor health dispari-

1 ties based on sexual orientation and gender
2 identity at the Federal and State levels; and

3 “(B) report to the Congress and the public
4 the results of such analyses.

5 “(2) INTEGRATION OF DATA ANALYSES.—The
6 Secretary shall integrate data analyses conducted
7 under paragraph (1) with other activities of the De-
8 partment of Health and Human Services that iden-
9 tify and analyze health disparities by race, ethnicity,
10 sex, disability, primary language, or other popu-
11 lation.

12 “(3) AVAILABILITY OF DATA.—The Secretary
13 shall, as appropriate, enter into data use agreements
14 between the Department of Health and Human
15 Services (or offices and agencies thereof) and other
16 governmental agencies and nongovernmental entities,
17 pursuant to which the Secretary shall make available
18 to such agencies and entities aggregated data (ex-
19 cluding any personally identifiable information about
20 an individual) collected under subsection (a).

21 “(e) PRIVACY AND OTHER SAFEGUARDS.—The pro-
22 tections and safeguards described in section 3101(e)(1)
23 shall apply to data collected pursuant to subsection (a)
24 of this section to the same extent and in the same manner

1 as such protections and safeguards apply to data collected
2 pursuant to section 3101(a).

3 “(f) DEFINITIONS.—In this section:

4 “(1) The term ‘HHS health service program’
5 means a program conducted or supported by the De-
6 partment of Health and Human Services through
7 which direct preventive health or medical treatment
8 services are delivered to individuals, either in a clin-
9 ical or community setting.

10 “(2) The term ‘HHS health survey’ means data
11 collection efforts conducted or supported by the De-
12 partment of Health and Human Services to obtain
13 information directly from individual respondents for
14 the purpose of aggregating statistical information.”.

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