THE SENATE
THIRTY-THIRD LEGISLATURE, 2026
STATE OF HAWAII

S.B. NO. 3132 S.D. 1

A BILL FOR AN ACT

RELATING TO SYNDROMIC SURVEILLANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that timely reporting of data is critical to the ability of public health officials to detect and respond to health threats and disease trends. Syndromic surveillance is the analysis of health-related data from events that affect health status and outcomes for public health purposes, such as early detection of disease outbreaks. Syndromic surveillance provides automated, near real-time collection and transmission of data, including but not limited to chief complaint, discharge diagnosis, visit dates, patient demographics, patient zip code, and facility location. Syndromic surveillance data is de-identified, meaning that patient names, addresses, and other data elements that could identify an individual are not transmitted.

The value of syndromic surveillance has been demonstrated in the State during responses to wildfires, volcanic eruptions, drinking water contamination, and communicable disease outbreaks. Syndromic surveillance in these events prompted

real-time clinical guidance and targeted health interventions, informed resource allocation decisions, and guided public messaging.

The legislature also finds that the use of syndromic surveillance data, currently collected through the National Syndromic Surveillance Program, can enable the department of health and other state agencies to better monitor, act on, and understand a wide range of public health concerns, including communicable disease, chronic disease, disaster and terrorism response, climate and weather-related illness and injury, gun violence, suicidal ideation, and drug use and overdose.

At present, the department of health can access and analyze data collected by the National Syndromic Surveillance Program. However, data is submitted to that program on a voluntary basis, and the department of health does not have the authority to require participation or determine how data is submitted. Additionally, the State's dependence on the National Syndromic Surveillance Program, which is federally funded and administered, leaves the State vulnerable to changes in federal data collection priorities. Further, the National Syndromic Surveillance Program offers minimal flexibility and does not

always meet the needs of the State to the extent necessary for adequate public health management. The department of health is unable to customize analyses of data from the National Syndromic Surveillance Program to the State's population and public health concerns, including health disparities. Because participation in the National Syndromic Surveillance Program is voluntary, there are geographical "data deserts" in rural areas where the department of health has an incomplete understanding of public health concerns.

The legislature further finds that the department of health's recently updated electronic disease surveillance system can support a local syndromic surveillance system that does not rely on a federal data system and is more customizable, allowing for integration with other department of health systems and more efficient collaboration with other state agencies.

The legislature finds that it is critical that the department of health retain and strengthen its ability to collect and use syndromic surveillance data independent of federal systems to ensure the department can rapidly detect and respond to public health threats.

Accordingly, the purpose of this Act is:

(1) To authorize the department of health to require the reporting of syndromic surveillance data;

(2) Regulate how syndromic surveillance data is collected; and

(3) Allow the department of health to create and operate a local syndromic surveillance system, as needed, independent of federal systems.

SECTION 2. Chapter 321, Hawaii Revised Statutes, is amended by adding a new part to be appropriately designated and to read as follows:

"**PART . SYNDROMIC SURVEILLANCE**

§321- Syndromic surveillance data; defined. For the purposes of this part, "syndromic surveillance data" means de-identified data that signals a sufficient probability of a case, an outbreak of disease, or other event that may warrant a public health response, including but not limited to:

(1) Chief complaint;

(2) Discharge diagnosis;

(3) Visit dates;

(4) Patient demographics;

(5) Patient zip code; and

(6) Facility location.

§321- Syndromic surveillance data collection; authorized. (a) Hospitals with emergency departments that are licensed in the State shall report syndromic surveillance data to the department of health in a manner and format specified by the department of health on its website. Information required to be reported includes data regarding:

(1) Infectious or communicable disease;

(2) Noninfectious causes of acute or chronic illness;

(3) Intentional or accidental use or misuse of chemical, biological, radiological, or nuclear agents;

(4) Adverse environmental events or natural disasters, including but not limited to hurricanes, floods, and fires; or

(5) Any other emerging threat or condition affecting public health.

(b) The department of health may establish by rules adopted pursuant to chapter 91 a state syndromic surveillance data reporting system to collect, maintain, and analyze syndromic surveillance data.

(c) The department of health may adopt rules pursuant to chapter 91 to require additional entities, including but not limited to urgent care facilities, emergency medical service providers, other healthcare facilities, and poison control centers to submit syndromic surveillance data.

§321- Confidentiality. Syndromic surveillance data shall be confidential and may only be shared or redisclosed pursuant to state and federal privacy regulations or for research purposes that have been approved by the department of health's institutional review board; provided that the department of health may publicly release aggregated statistical data that does not allow identification of individuals.

§321- Rules. The director of health may adopt rules pursuant to chapter 91 necessary to carry out the purposes of this part."

SECTION 3. This Act shall take effect upon its approval.

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Report Title:
DOH; Syndromic Surveillance Data

Description:
Requires hospitals with emergency departments that are licensed in the State to submit syndromic surveillance data to the Department of Health. Authorizes the Department of Health to establish by administrative rules a syndromic surveillance system under state jurisdiction that is independent of federal systems. (SD1)

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