HB 1394 S. King (CSHB 1394 by Naishtat)

SUBJECT: Requiring Sunset review of the Texas Health Care Information Collection

COMMITTEE: Public Health — committee substitute recommended

VOTE: 11 ayes — Kolkhorst, Naishtat, Coleman, Collier, Cortez, S. Davis,

Guerra, S. King, Laubenberg, J.D. Sheffield, Zedler

0 nays

WITNESSES: For — Tony German, Texas Ambulatory Surgery Center Society;

(Registered, but did not testify: Patricia Kolodzey, Texas Medical

Association)

Against — (Registered, but did not testify: Cathy Dewitt, Texas

Association of Business)

On — Nagla Elerian, DSHS; Ken Levine, Sunset Commission; (*Registered, but did not testify*: Cathy Dewitt, Texas Association of Business; Ben Raimer, Texas Institute for Health Care Quality and

Efficiency)

BACKGROUND: Health and Safety Code, ch. 108, creates the Texas Health Care

Information Council, which operates within the Department of State Health Services (DSHS) and is now known as the Texas Health Care Information Collection (THCIC). This program is required to collect information from hospitals and surgery centers on health care charges, utilization, provider quality, and outcomes to promote cost-effective, high-

quality health care.

DIGEST: CSHB 1394 would require the Sunset Advisory Commission to examine

the Texas Health Care Information Collection (THCIC) as part of the DSHS Sunset review. The Sunset Advisory Commission would determine whether DSHS, with regard to its administration of the THCIC was

whether DSHS, with regard to its administration of the THCIC, was:

• achieving its legislative intent to help consumers make informed health care decisions;

maintaining appropriate privacy and security standards for patient information; and

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• collecting only the patient information necessary for performing its duties.

The Sunset Advisory Commission would need to include its findings in the DSHS Sunset review report. These directives would expire on September 1, 2015 and the THCIC would be abolished on the same date, unless continued in existence after Sunset review.

This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2013.

## SUPPORTERS SAY:

CSHB 1394 would allow the Legislature to thoroughly review and evaluate a particular program within DSHS. The review and evaluation could address whether the THCIC was evading its legislative intent by collecting data that companies and researchers find useful but that average consumers find confusing and unhelpful, as well as whether the program was collecting and selling personal information without informing patients. By directing the Sunset Advisory Commission specifically to examine the THCIC, the bill would give lawmakers a clearer picture of the program's goals and methods. The Legislature would then have the opportunity to refocus the program on consumers, implement informed consent requirements, or abolish the program.

This bill could also help certain health care providers that find THCIC's data collection requirements costly and time-consuming. It is difficult for smaller providers to fund the substantial software and staffing costs needed to collect and manage the information. If after Sunset review the Legislature decided the program was not necessary or desirable, these providers would be relieved of a significant burden.

## OPPONENTS SAY:

CSHB 1394 could hinder an important data collection service. Many hospitals, universities, and businesses value THCIC's information and often purchase their reports. The bill could impede commerce and research if, after Sunset review, the Legislature changed or eliminated this program.

The bill would take the unusual step of directing the Sunset Advisory Commission to examine a small, specific portion of an agency, and it is possible that this could be achieved without legislation. In addition, DSHS will undergo Sunset review during the next interim, which also would provide an opportunity to change or eliminate the THCIC program.

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NOTES: The committee substitute differs from the bill as filed by

- requiring the Sunset commission to determine whether THCIC was collecting only necessary patient information, rather than requiring it to determine whether the identifiable patient information THCIC was maintaining was necessary to achieve its purposes; and
- requiring the Sunset commission to include their findings within the DSHS Sunset report, rather than requiring the commission to submit a report to the Legislature by December 31, 2014.