

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

May 26, 2005

TO: Honorable David Dewhurst, Lieutenant Governor, Senate

FROM: John S. O'Brien, Deputy Director, Legislative Budget Board

IN RE: SB45 by Nelson (Relating to the establishment of an advisory committee on health care information technology.), **As Passed 2nd House**

No significant fiscal implication to the State is anticipated.

The bill would add section 104.0156, Health Care Information Technology Advisory Committee to the Health and Safety Code. The bill would require the statewide health coordinating council to form an advisory committee on health care information technology. The committee would include representatives of interested groups, including the academic community, health plans, pharmacies, and associations of physicians, hospitals, and nurses. The committee would include at least one member with at least 10 years of experience in the health care information technology industry.

The committee would develop a long-range plan for health care information technology, including the use of electronic medical records, computerized clinical support systems, computerized physician order entry, regional data sharing interchanges for health care information, and other methods of incorporating information technology. In addition, the committee would study the effect of health care information technology on price disparities in insurance coverage for Texas residents.

The bill states that Chapter 2110, State Agency Advisory Committees, of the Government Code would not apply to the size, composition, or duration of this new committee. The bill would also allow for reimbursement of travel expenses of committee members, if authorized by the General Appropriations Act.

The bill would also modify Sections 104.022 (e) and (f) of the Health and Safety Code, to include information technology as an element of the state health plan.

The bill would take effect September 1, 2005.

The Department of State Health Services (DSHS) estimates the need for one additional full-time-equivalent to oversee the work plan and coordinate the committee's duties. However, the cost is not assumed to be significant in the context of DSHS's budget.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 Department of State Health Services

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