**BILL ANALYSIS**

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| Senate Research Center | S.B. 2104 |
|  | By: Uresti |
|  | Business & Commerce |
|  | 4/27/2017 |
|  | As Filed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

The Texas Health Care Information Collection (THCIC) was created in 1995 by the 74th Texas Legislature. THCIC's charge is to collect data and report on health care activity in hospitals and ambulatory surgery centers (ASCs) in Texas. According to the Texas Department of State Health Services (DSHS), “the goal [THCIC] is to provide information that will enable consumers to have an impact on the cost and quality of health care in Texas.” 

With regard to hospitals and ASCs, THCIC collects the billed charges for every health care service performed in Texas hospitals and ASCs. Despite the stated goal of THCIC by DSHS, the information collected is rarely used by consumers because the information is not presented in a user-friendly format.

S.B. 2104 asks DSHS to determine how the THCIC data may be published in a manner that would allow consumers, providers, and payors to access a database to determine billed charges for each health care service provided by hospitals and ASCs in order to make informed decisions about their health care.

As proposed, S.B. 2104 amends current law relating to a study on the feasibility of using the statewide system of health care data collection to create a public database of charges billed by health care providers.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Chapter 108, Health and Safety Code, by adding Section 108.0137, as follows:

Sec. 108.0137. STUDY REGARDING FEASIBILITY OF PUBLIC DATABASE OF CHARGES. (a) Defines “nonprofit health corporation.”

(b) Requires the Department of State Health Services (DSHS) to conduct a study to determine the feasibility of creating a public database of charges billed by providers.

(c) Provides that the database described by Subsection (b) would allow patients, health maintenance organizations, and nonprofit health corporations to determine charges billed according to each zip code in the state.

(d) Requires DSHS, in conducting the required study, to consult with the Department of Information Resources.

(e) Requires DSHS, not later than December 1, 2018, to report the results of the required study to the governor, the lieutenant governor, the speaker of the house of representatives, and the appropriate standing committees of the senate and the house of representatives.

(f) Provides that this section expires January 1, 2019.

SECTION 2. Effective date: September 1, 2017.