## BILL ANALYSIS

Senate Research Center 85R551 KKR-D

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

Patient reported outcomes measures are vital to improving the quality of healthcare. These measures, which come directly from patients, enable providers to track whether treatments are having the desired effects. The collection of such outcomes data through a registry would enable the tracking of a given patient's health stats over time and facilitate comparative effectiveness research on the impact of different medical interventions across a population. Currently, there is no provision requiring the use of a patient-reported outcomes registry, nor a requirement for the retirement systems to study the potential costs and benefits of such a registry. This non-amendatory bill would require the Teacher Retirement System of Texas and the Employees Retirement System of Texas to conduct a joint study of the potential benefits and costs of establishing a patient-reported outcomes registry for musculoskeletal care provided under the health plans administered by the retirement systems under the Insurance Code.

As proposed, S.B. 55 amends current law relating to a study of the use of a patient-reported outcomes registry in conjunction with health coverage for certain governmental employees.

## **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. STUDY; PATIENT-REPORTED OUTCOMES REGISTRIES FOR CERTAIN CARE. Requires the Teacher Retirement System of Texas (TRS) and the Employees Retirement System of Texas (ERS) to conduct a joint study of the benefits and disadvantages of establishing a patient-reported outcomes registry for musculoskeletal care (registry) provided under the plans of group coverage administered by TRS and ERS under Chapters 1551 (Texas Employees Group Benefits Act), 1575 (Texas Public School Employees Group Benefits Program), and 1579 (Texas School Employees Uniform Group Health Coverage), Insurance Code. Requires the study to identify the musculoskeletal conditions and injuries that result in the highest health care costs in the plans of group coverage, identify the percentage of the total cost for health care under the plans of group coverage that is spent for the conditions and injuries, estimate the cost for TRS and ERS, or for the entities administering the plans of group coverage on the systems' behalf, to establish and administer a registry, evaluate the potential benefits of a registry for the populations served by the plans of group coverage, and identify potential partners, such as medical schools located in this state, that could assist TRS and ERS in establishing and administering a registry.

SECTION 2. REPORT. Requires TRS and ERS to report, not later than December 1, 2018, the results of the study to the speaker of the house of representatives, the lieutenant governor, and the standing committees with jurisdiction over the retirement systems and insurance. Requires that the report specify whether establishing one or more registries would be beneficial and effective, and be accompanied by recommendations for legislation, if appropriate.

SECTION 3. EXPIRATION. Provides that Sections 1 and 2 of this Act and this section expire September 1, 2019.

SECTION 4. Effective date: September 1, 2017.