HB 2020 Crownover

SUBJECT: Allowing a state agency to develop a wellness incentive program

COMMITTEE: Public Health — favorable, without amendment

VOTE: 9 ayes — Kolkhorst, Naishtat, Coleman, Cortez, S. Davis, Guerra,

S. King, J.D. Sheffield, Zedler

2 nays — Collier, Laubenberg

0 absent

WITNESSES: For — Lindsay Vogtsberger, Cerner Corporation; (Registered, but did not

testify: Melody Chatelle, United Ways of Texas)

Against - None

On — (*Registered, but did not testify:* Troy Alexander, Texas Medical Association; Brett Spencer, Department of State Health Services)

DIGEST: HB 2020 would allow a state agency to:

• develop a wellness program designed to increase productivity and capacity and reduce health insurance costs; or

- provide financial incentives for participation in a wellness program;
- offer on-site clinic or pharmacy services'
- and adopt additional wellness policies, as determined by the agency.

The 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:

HB 2020 would be a purely permissive bill that would allow state agencies to improve employee wellness and curb increasing health care costs by choosing to implement a wellness program with financial incentives. Other employers have shown that wellness incentive programs reduce health care costs, improve employee wellness, and increase employee

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productivity. As health care costs continue to rise, the state cannot afford not to implement a similar program.

The bill would act on an interim analysis from the Employees Retirement System of Texas recommending that state agencies implement a wellness program with financial incentives. Financial incentives under the bill could include a point-based rewards system for regular check-ups that would lower an employee's health insurance premium. The bill would not be specific to any one vendor, but would allow a state agency to choose a vendor through the regular competitive bidding process.

By offering clinics and pharmacies on-site, state agencies could improve employee productivity and health by reducing the time an employee had to take off from work to access medical care. On-site clinics would help encourage a culture of health in the workplace and make it easier for employees to access preventive care.

OPPONENTS SAY:

Private practices, pharmacies, and urgent-care clinics already exist close to all state agencies. Allowing a state agency to offer an on-site clinic would not necessarily improve patient access to care and could discourage patients from seeing the primary care provider who knew their medical history best.

The bill also could negatively affect the quality of patient care by not requiring clinics to adhere to Texas Medical Practice Act standards, such as physician-led care.