

**From:** [Sunset Advisory Commission](#)  
**To:** [Janet Wood](#)  
**Subject:** FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)  
**Date:** Monday, June 30, 2014 8:32:39 AM

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-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]  
Sent: Sunday, June 29, 2014 7:24 PM  
To: Sunset Advisory Commission  
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Sunday, June 29, 2014 - 19:23

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: Mari

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Title: Associate Professor

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City: Irving

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or  
Opposed:  
June 29, 2014

The Honorable Jane Nelson  
The Honorable Walter "Four" Price  
Chair/Vice Chair, Sunset Commission  
Sunset Advisory Commission  
Austin, Texas

Subject: Sunset Advisory Commission Issue 7 "State Has a Continuing Need for Texas Health Information  
Collection (THCIC) Program"

I support adoption of the staff recommendation of the Sunset Advisory Commission (SAC) Issue 7, "State Has a Continuing Need for Texas Health Information Collection (THCIC) Program." As a faculty member of one of the Texas state university colleges of nursing, I use the THCIC data in several ways that contribute to health status improvement for all the citizens of Texas. The THCIC program is the only comprehensive source of de-identified patient-level data on inpatient and outpatient services at Texas hospitals and ambulatory care centers. The program provides detailed and reliable data to educators and researchers while carefully protecting patient privacy.

However, most importantly, the THCIC data supports my effort at writing grant proposals. Specifically, it provides a strong and credible foundation for one of the most important parts of any grant proposal: the problem statement.

As a faculty member, I write 2 to 3 grant proposals per year for health improvement projects where the problem statement is supported by very specific THCIC de-identified data. This potentially represents \$200,000 in grant

funds from the local and federal sources. Multiply this by at least one faculty in each of the approximately 100 Texas colleges of nursing, THCIC helps support grant proposals potentially yielding \$20,000,000 for the state of Texas.

THCIC data supports this grant proposal writing efforts because the data is used to define the status of health care for Texas citizens, trends in chronic disease patterns, the cost of care delivery, and top patient safety/quality issues in these proposals. The THCIC program provides evidence of all disease states, for specific ages, races and regions, thereby significantly increasing the likelihood of obtaining grant funding to bring health care dollars to the state of Texas for grants to fund health services program and health services research. As such, the THCIC data are critically important to funding of local and federal grants focused on disease management and patient safety/quality issues.

Without the THCIC program data, grant-writers will have less than optimal access to the characteristics of their local and state patient populations.

Because of this lack of specific Texas data, grant funding dollars will be decreased for all of the Texas universities, depriving Texans from optimal health care and patient safety/quality status. Subsequently, I support the findings of the SAC report on Issue 7 and urge acceptance of the “Key Recommendations,” (p. 7).

Respectfully submitted,

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Any Alternative or New Recommendations on This Agency: I support the 2014 recommendations of this Agency on Issue 7, "State Has a Continuing Need for Texas Health Information Collection (THCIC) Program"

My Comment Will Be Made Public: I agree