
**Technology, Energy &
Communications Committee**

SSB 5064

Brief Description: Studying the use of electronic medical records.

Sponsors: Senate Committee on Health & Long-Term Care (originally sponsored by Senators Thibaudeau, Deccio, Jacobsen, Parlette, Kohl-Welles, Weinstein and Keiser).

Brief Summary of Substitute Bill

- Creates a health information infrastructure advisory board, which will develop and implement a strategy for the use of electronic medical records and health information systems.

Hearing Date: 3/29/05

Staff: Kara Durbin (786-7133).

Background:

In April 2004, the President signed an executive order creating the Office of the National Coordinator for Health Information Technology (Office). The mission of the Office was to implement the President's goal of widespread adoption of interoperable electronic health records within 10 years. The Office was charged with developing a nationwide interoperable health information technology infrastructure that:

- (a) Ensures that appropriate information to guide medical decisions is available at the time and place of care;
- (b) Improves health care quality, reduces medical errors, and advances the delivery of appropriate, evidence-based medical care;
- (c) Reduces health care costs resulting from inefficiency, medical errors, inappropriate care, and incomplete information;
- (d) Promotes a more effective marketplace, greater competition, and increased choice through the wider availability of accurate information on health care costs, quality, and outcomes;
- (e) Improves the coordination of care and information among hospitals, laboratories, physician offices, and other ambulatory care providers through an effective infrastructure for the secure and authorized exchange of health care information; and

(f) Ensures that patients' individually identifiable health information is secure and protected.

There are no state or federal laws that deal specifically with health information technology. However, there are a number of bills under consideration in Congress that address information technology and the delivery of health care services.

The State Health Care Authority (HCA) is the state agency that administers state employee insurance benefits and the Basic Health Plan, which is the state subsidized health insurance program for low income persons. The HCA is also generally responsible for coordinating the study and implementation of state initiatives regarding health care cost containment.

Summary of Bill:

A Washington Health Information Infrastructure Advisory Board is created. The Health Care Authority (HCA) must appoint the chair and the members of the board, which will include representatives of the provider community, including hospitals, information technology experts, health care policy experts, consumers, a representative from the Department of Information Services, and the agency medical directors group.

The HCA and the advisory board will develop and implement a strategy for the adoption and use of electronic medical records and health information systems that are consistent with national standards and promote interoperability of health information systems. The strategy should be informed by best research practices, and it should seek to promote standards and systems that are compatible with current adopters of electronic medical records in Washington. The HCA also will identify obstacles to the implementation of an effective health information infrastructure and provide policy recommendations to remove or minimize those obstacles.

In addition, the HCA, in collaboration with the advisory board, shall ensure that the strategy preserves the privacy and security of health information, as required by state and federal law.

An interim status report containing the advisory board's preliminary findings must be submitted by December 1, 2005, and a final report of findings and recommendations must be submitted by December 1, 2006, which is the date of expiration for the act.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.