

Electronic Health Records Task Force Act

Summary: The Electronic Health Records Task Force Act creates a task force to study and develop a strategy for the adoption of electronic health records that is consistent with emerging national standards and would promote interoperability of health information systems.

SECTION 1. SHORT TITLE

This Act shall be called the “Electronic Health Records Task Force Act.”

SECTION 2. FINDINGS AND PURPOSE

(A) FINDINGS—

The legislature finds that:

1. Hundreds of thousands of Americans die as a result of preventable medical errors each year.
2. The use of health information technology has grown dramatically, but more progress is needed to promote interoperability and to guarantee privacy of personal medical records.
3. The state must set the standards for privacy, interoperability, efficiency and effectiveness of health information technology and exchange.

(B) PURPOSE—

This law is enacted to promote the health and welfare of state residents by improving the quality of the health care they receive.

SECTION 3. ELECTRONIC HEALTH RECORDS TASK FORCE

(A) ESTABLISHMENT OF TASK FORCE

1. There is established a Task Force to Study Electronic Health Records.
2. The Task Force consists of the following members:
 - a. One member of the Senate, appointed by the Senate President.
 - b. One member of the House, appointed by the Speaker.
 - c. The Dean from the University of [State] School of Medicine or the Dean’s designee.
 - d. The state Director of the Veterans’ Administration Health Care System or the Director’s designee.
 - e. The Attorney General or the Attorney General’s designee.
 - f. One representative from the Department of [Health].
 - g. One representative from a Federally Qualified Health Center.
 - h. Two representatives from the state Hospital Association who represent hospitals in the state.
 - i. One representative from the home health care industry.
 - j. One representative from a medical laboratory.
 - k. Two representatives from nursing homes or long-term care facilities in the state.
 - l. One representative from the information technology field as it relates to health care.
 - m. One representative from the health insurance industry.
 - n. One non-hospital-based licensed physician.
 - o. One non-hospital-based psychiatrist.
 - p. One licensed dentist.
 - q. One licensed nurse.
 - r. One licensed pharmacist.
 - s. Two members of the public representing consumers.
3. The governor shall appoint the members listed in section (2)(f) through (2)(s) with the advice of the Senate President and the House Speaker.
4. The governor shall appoint a Task Force chair.
5. The Department of [Health] shall provide staff for the Task Force.
6. A member of the Task Force may not receive compensation, but is entitled to reimbursement for expenses.

(B) DUTIES OF THE TASK FORCE

1. The Task Force shall study electronic health records and the recent and potential expansion of electronic health record utilization in the state, including:
 - a. electronic transfer;
 - b. electronic prescribing;

- c. computerized physician order entry;
 - d. the cost of implementing each of these;
 - e. the impact of the current and potential expansion on school health records;
 - f. the impact of the current and potential expansion on patient safety; and
 - g. the impact of any potential expansion on patient privacy.
2. The Task Force shall develop a strategy for the adoption of electronic health records that would be consistent with emerging national standards and promote interoperability of health information systems. The strategy should:
- a. Be informed by research into and identification of the best practices in electronic health records systems and health information technologies, including system design, implementation, operation and evaluation;
 - b. Be designed to encourage greater adoption of electronic health record and health information technologies among the state's healthcare providers to reduce medical errors and enable patients to make better decisions about their own health care by promoting secure access to medical records online;
 - c. Seek to promote standards and systems that are compatible with current adopters of electronic health record systems; and
 - d. Ensure that the privacy and security of health information is protected, as required by state and federal law.
3. Not later than January 1, 2009, the Task Force shall submit a report to the governor, legislature and the public that includes findings and conclusions, and recommendations for legislative and administrative actions.

SECTION 4. EFFECTIVE DATE

This Act shall take effect on July 1, 2009.