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A BILL FOR AN ACT

RELATING TO HEALTH INFORMATION EXCHANGE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. In recent years, the establishment and
 development of health information exchanges within the United
 States has become increasingly significant, reflecting the
 changing role that technology plays in the way we operate
 government and business. As witnessed during the 2008
 presidential campaign, technology is beginning to take a more
 prominent role and is expected to remain that way.

8 Public health experts, federal and state governments, even 9 the newly inaugurated President Obama and his administration 10 recognize the potential economic and health benefits of health 11 information exchanges and similar ehealth initiatives and are 12 searching for ways to further their growth. President Obama has 13 publicly pledged to aggressively pursue the use of health 14 information technology as he sees it as a key component of his 15 economic stimulus plan and has previously pledged 16 \$10,000,000,000 toward the development and implementation of 17 health information technology.

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Health information technology is poised to become a 1 2 powerful vehicle for improving patient health and quality of 3 care, safety, and efficiency through the secure exchange of patient data among all stakeholders. To date, approximately 4 twenty-six states have implemented health information exchange 5 programs aimed at improving overall quality of care, reducing or 6 7 averting medical errors, and saving billions of dollars within 8 the health care system.

As a way to encourage states to adopt health information 9 10 exchanges, the Centers for Medicare and Medicaid Services and 11 the United States Department of Health and Human Services, 12 Office of the Inspector General, have provided new exceptions to 13 the Stark Law -- an "anti-kickback" statute relating to health 14 information technology and a physician referring a patient to a 15 medical facility in which the physician has a financial 16 interest. Even the National Conference of State Legislatures 17 has reported that "states are moving at an unprecedented rate to 18 get their health care systems wired and connected".

19 Creating an office of state coordinator of health 20 information exchange within the department of health is the 21 first of many steps that need to be taken in order to help 22 Hawaii realize its potential savings in health care, while



increasing quality of care and access, increasing medical
 services to underserved and rural areas of the State, and even
 accessing new sources of federal funding.

4 The purpose of this Act is to establish an office of state 5 coordinator of health information exchange within the department of health to coordinate local efforts, identify funding sources, 6 integrate state health programs, and eventually participate in 7 the national health information technology network. This is one 8 9 of eight proposals being introduced in the legislature this year 10 designed to address the increasingly problematic medical 11 environment in Hawaii. Collectively, these eight legislative 12 proposals are known as "The Hawaii Doctor Recruitment and 13 Retention Action Plan of 2009".

SECTION 2. Chapter 321, Hawaii Revised Statutes, is amended by adding a new part to be appropriately designated and to read as follows:

17 "PART . HEALTH INFORMATION EXCHANGE
18 §321-A Definitions. Whenever used in this part, unless
19 the context otherwise requires:

20 "Council" shall mean the ehealth council as established by21 section 321-D.

22 "Department" means the department of health.



1 "Director" means the director of health. 2 "Health care facility" has the meaning as defined in 3 section 323D-2. 4 "Health care provider": 5 (1) Means a physician or surgeon or osteopathic physician or surgeon licensed under chapter 453, a dentist 6 7 licensed under chapter 448, a podiatrist licensed under chapter 463E, a health care facility as defined 8 under section 323D-2, and any of their employees. 9 10 (2) Shall not mean any nursing institution or nursing 11 service conducted by and for those who rely upon 12 treatment by spiritual means through prayer alone, or 13 employees of these institutions or services. "Fund" means the health information exchange special fund 14 15 as established under this part. 16 "Network" means the health information exchange network as 17 established under this part. "Office" means the office of state coordinator of health 18 19 information exchange as established under this part. 20 "Rural or underserved areas" means any community or island having a population under five hundred thousand and that lacks 21 22 adequate access to basic health care.



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1 §321-B Office of state coordinator of health information 2 exchange; establishment. There is established within the department of health the office of state coordinator of health 3 4 information exchange. The office shall: 5 (1) Coordinate local efforts, identify funding sources and integrate with state health programs, including but 6 7 not limited to medicaid, workers' compensation, temporary assistance to needy families, and the state 8 9 children's health insurance program, and integrate 10 with federal health programs, including but not limited to the national health information technology 11 12 network; Provide governance and guidance for health information 13 (2) 14 exchange; (3) Collaborate with the Hawaii medical board to develop 15 16 criteria for physicians that require the use of 17 information technologies that facilitate improved care 18 and reduced medical errors; 19 (4) Develop risk management policies and procedures and 20 liability limits for physicians and hospitals that contribute data to the health information exchange; 21

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1	(5)	Implement a statewide strategic plan for health	
2		information exchange; and	
3	(6)	Convene annual council meetings comprised of	
4		representatives including but not limited to the	
5		medical, insurance, and legal fields, and county,	
6		state, and federal governments; and	
7	(7)	Administer the statewide health information exchange	
8		system.	
9	The office	e of state coordinator of health information exchange	
10	shall also administer a health information exchange network that		
11	will allow physicians to access medicaid patients' electronic		
12	health rec	cords, including but not limited to pharmacy	
13	informatio	on, laboratory results, and any other information on	
14	record tha	at will improve patient care.	
15	§321-	C Health information exchange network; establishment.	
16	(a) The c	office of state coordinator of health information	
17	exchange s	shall develop and implement a health information	
18	exchange n	network for medicaid recipients and other low-income	
19	uninsured	residents of the State. The health information	
20	exchange n	etwork shall:	
21	(1)	Implement and maintain an electronic system that	

22 allows physicians and other health care providers HB LRB 09-1755.doc

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statewide to access electronic health records and 1 2 other patient information that will improve patient 3 care, including but not limited to pharmacy 4 information, laboratory results, and medical 5 histories; Develop a mechanism to evaluate, promote, and improve (2)6 7 the quality of health and health care delivered to the medicaid and low-income uninsured populations through 8 9 the use of quality performance measures, evidence-10 based standards of care, and other measurements that 11 facilitate quality improvement; and 12 (3) Develop an enhanced medicaid reimbursement methodology 13 to compensate network participants at a level that 14 ensures provider participation and success. The department shall make use of any public or private 15 (b) 16 funding available for the purpose described under subsection 17 (a), including but not limited to the Centers for Medicare and 18 Medicaid Services transformation grant. 19 (c) All network participants in the health information 20 exchange network shall be required to adopt an interoperable

21 electronic system. Reimbursements for expenses incurred in



adopting or acquiring new electronic systems, or both, may be
 allowed to participants serving rural or underserved areas.

3 (d) No later than June 30, 2012, the department of health
4 shall expand the health information exchange network to include
5 all state employees in addition to all medicaid and low-income
6 uninsured residents.

§321-D Council; establishment. (a) The office of state
coordinator of health information exchange shall convene an
annual council to be comprised of at least the following:

10 (1) A representative from the medical industry;

11 (2) A representative from the legal profession;

12 (3) A representative from the insurance industry;

13 (4) A representative from the technology industry;

14 (5) One majority member of the house of representatives;

15 (6) One minority member of the house of representatives;

16 (7) One majority member of the senate;

17 (8) One minority member of senate;

18 (9) The director of health or a designee;

19 (10) The director of human services or a designee;

20 (11) The director of commerce and consumer affairs or a
 21 designee;



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1 (12) The director of business, economic development, and 2 tourism or a designee; and 3 Any other stakeholders who wish to participate. (13) 4 The council chairperson shall be selected by the members of the council and shall serve for a term of one year. Council members 5 shall serve without compensation but shall be reimbursed for 6 7 expenses, including travel expenses, necessary for the 8 performance of their duties. 9 The council shall develop a ten-year strategic plan (b) for the office of state coordinator of health information 10 11 exchange and the health information exchange network that shall 12 include but not be limited to: 13 (1) An education and awareness campaign; (2) Identification of additional structural or financial 14 resources that can be utilized to enhance the health 15 information exchange network; and 16 (3) Establishing specific goals and guidelines to be used 17 18 to measure quality and standards of health and health 19 care. The council shall meet no less than once a year. All 20 (C) 21 council meetings shall be subject to chapters 91 and 92.



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1	§321	-E Health information exchange special fund;						
2	establishment. (a) There is established within the state							
3	treasury, to be administered by the department of health, the							
4	health information exchange special fund into which shall be							
5	deposited:							
6	(1)	Legislative appropriations;						
7	(2)	Federal funds designated for a health information						
8		exchange;						
9	(3)	Grant moneys secured for a health information						
10		exchange; and						
11	(4)	Any other revenues designated for the fund.						
12	(b)	Moneys in the health information exchange special fund						
13	shall be	expended for the following purposes:						
14	(1)	The cost of administering the office of state						
15		coordinator of health information exchange, including						
16		salary and benefits of employees, computer costs,						
17		including software and infrastructure, and any						
18		contracted services related to administering the						
19		office;						
20	(2)	The cost of administering annual council meetings;						
21	(3)	Reimbursement for expenses incurred by health						
22		information exchange network participants for adopting						
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1		or acquiring new electronic systems, or both; provided				
2		that those participants serve rural or underserved				
3		area	as of the State; and			
4	(4)	Any	other purpose deemed necessary by the department			
5		for	the purpose of operating and administering this			
6		part				
7	All interest on fund balances shall accrue to the fund. Upon					
8	dissolution of the fund, any unencumbered moneys in the fund					
9	shall lapse into the general fund."					
10	SECTION 3. (a) The department of health shall assess:					
11	(1)	The	effectiveness of the office of state coordinator			
12		of h	ealth information exchange, the health information			
13	exchange network, and the ehealth council as					
14	established under part of chapter 321, Hawaii					
15		Revi	sed Statutes, in:			
16		(A)	Providing physicians and health care providers			
17			with secure electronic access to patient			
18			information;			
19	*	(B)	Increasing health care access and quality;			
20	ĝ.	(C)	Decreasing health care costs; and			
21		(D)	Securing of outside funding for the program;			



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(2) The impact of the health information exchange program
 on increasing access and quality of health care in the
 State and on decreasing health care costs; and
 (3) The impact of the health information exchange on
 reducing medical errors and the cost of medical
 malpractice insurance rates in the State.

7 (b) The department of health shall submit an assessment to 8 the legislature no later than twenty days prior to the convening 9 of the regular session of 2010, and each year for nine years 10 thereafter until the regular session of 2019; provided that the 11 department of health shall submit biennial assessments to the 12 legislature beginning with the regular session of 2020, and 13 thereafter.

SECTION 4. There is appropriated out of the general 14 15 revenues of the State of Hawaii the sum of \$1 or so much thereof 16 as may be necessary for fiscal year 2011-2012 and the same sum 17 or so much thereof as may be necessary for fiscal year 2012-2013 18 for deposit into the health information exchange special fund. 19 SECTION 5. There is appropriated out of the health 20 information exchange special fund the sum of \$1 or so much 21 thereof as may be necessary for fiscal year 2011-2012 for the 22 purposes of the fund.



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The sums appropriated shall be expended by the department
 of health.

3 SECTION 6. This Act shall take effect on July 1, 2009;

4 provided that sections 4 and 5 take effect on July 1, 2011.

INTRODUCED BY:

J.Vil. Karent

JAN 2 8 2009





Report Title: Health Information Exchange

Description:

Creates an office of state coordinator of health information exchange within the department of health and creates a health information exchange program. Makes appropriations.

