HOUSE BILL REPORT SJM 8003

As Reported by House Committee On:

Health Care & Wellness

Brief Description: Requesting that Congress issue a date at which health information technology must comply with a uniform national standard of interoperability.

Sponsors: Senators Pflug, Keiser and Parlette.

Brief History:

Committee Activity:

Health Care & Wellness: 3/12/09, 3/17/09 [DP].

Brief Summary of Bill

• Requests Congress to establish a date certain by which health information technology must be subject to a uniform national standard of interoperability.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 10 members: Representatives Cody, Chair; Driscoll, Vice Chair; Bailey, Campbell, Clibborn, Green, Hinkle, Kelley, Moeller and Pedersen.

Minority Report: Do not pass. Signed by 2 members: Representatives Ericksen, Ranking Minority Member; Herrera.

Staff: Jim Morishima (786-7191)

Background:

Generally speaking, health information technology is the comprehensive management of health care information and its secure exchange between health care consumers and providers. In April of 2004, President George W. Bush signed Executive Order 13335, which created the position of National Health Information Technology Coordinator (Coordinator). Under the executive order, the Coordinator must work with stakeholders, make recommendations to the President, and develop a strategic plan regarding interoperable health information technology in both the public and private health care sectors. In

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connection with the executive order, President Bush called for the adoption of interoperable electronic health records within 10 years (i.e., by 2014).

In February of 2009 Congress enacted, and President Barack Obama signed, the American Recovery and Reinvestment Act of 2009 (Act), which created the Office of the National Coordinator for Health Information Technology to be headed by the Coordinator. The Act required the Coordinator to update the strategic plan developed under Executive Order 13335 to include several objectives, including the utilization of an electronic health record for every person in the United States by 2014. The Act also provided funds for research related to the security and interoperability of electronic health records.

Summary of Bill:

The Legislature makes the following findings relating to health information technology:

- Expanded health information technology has the potential to revolutionize the delivery of health care by enabling continuity of care, improving cost efficiency, lowering rates of medical malpractice, decreasing duplicative care, providing better care management, and producing better health outcomes.
- Major investments in the hardware and software infrastructure required to facilitate the expansion of health information technology are currently being made by health care providers.
- The health information systems currently being constructed are often incapable of communicating with each other.
- The costs to providers of maintaining incompatible systems in the name of proprietary licensing will grow exponentially with every delay in reaching a universal standard of interoperability.
- The benefit from health information technology is only derived from the ability of systems to communicate with each other on a fully compatible platform.
- A national public-private partnership has recently commenced with leadership from the U.S. Department of Health and Human Services to define standards of interoperability with the goal of implementing electronic health records for all Americans by the year 2014.

The Legislature therefore requests that Congress institute a date certain, no later than January 1, 2013, by which all vendors, suppliers, and manufacturers of health information technology must comply with a uniform national standard of interoperability. The national standard must allow all electronic medical and health records to be readily shared and accessed across all health care providers and institutions while preserving the proprietary nature of health information technology producers, which will encourage future innovation and competition.

Appropriation: None.

Fiscal Note: Not requested.

Staff Summary of Public Testimony:

(In support) None.

(Opposed) None.

Persons Testifying: None.

Persons Signed In To Testify But Not Testifying: None.