

FINAL BILL REPORT

SJM 8003

Synopsis as Enacted

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.

Senate Committee on Health & Long-Term Care
House Committee on Health Care & Wellness

Background: Over the past decade electronic health information has begun to change the way medical care is practiced. Health information technology provides health care practitioners with instant access to detailed patient medical histories allows for rapid exchange of radiologic images, instant transmission of prescriptions, and evidence-based data on best practices and gives patients access to their own medical records. There is general concern, however, that the systems established to use these technologies do not communicate with each other. This means patients, practitioners, and payors are unable to share information across different regions of the state, and in many cases, within the same geographic areas. There is growing interest in requiring interoperability between proprietary information systems and in standardizing terms used to convey the information so that health information technology can expand its potential for improving health care.

Summary: The Senate Joint Memorial states that health information systems are unable to communicate with each other and that the benefit of health information technology is only derived from systems that can communicate with each other. It recognizes national leadership calling for standards of interoperability and the goal of implementing electronic health records for all Americans by 2014.

Congress is asked to institute a date, no later than January 2013, at which time all vendors, suppliers, and manufacturers of health information technology must comply with a uniform national standard of interoperability. This would be done to allow all medical and health records to be readily shared and accessed across all health care providers, while preserving proprietary nature of health information to encourage innovation and competition.

Votes on Final Passage:

Senate	46	0
House	97	1

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Effective: