



Senate Communications & Technology Committee

Senator Mike Folmer
Chairman

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SUMMARY

Senate Bill 8 (PN 1955)

Prime Sponsor: Senator Folmer

Background: Federal moneys were awarded to states to promote the electronic sharing of health records and other patient information. States have used three models to accomplish this goal:

- **Centralized model:** the state acts as the health information organization to electronically share health records and other patient information. Examples of centralized models include: Connecticut, Delaware, Idaho, Maine, Maryland, Massachusetts, Nebraska, New Hampshire, New Mexico, Rhode Island, Utah, Vermont, and Wisconsin
- **Decentralized model:** the state acts as a facilitator or convener to electronically share health records and other patient information by setting policies and/or regulations to create the environment for such sharing. Texas is an example of a decentralized model
- **Hybrid model:** have characteristics of both centralized and decentralized models – the state is not the health information organization but it does create a policy framework and is ultimately responsible for implementing the electronic sharing of information. Examples of hybrid models include: California, Illinois, Michigan, New Jersey, Oregon, Tennessee, and Washington

SR 8 (PN 1955): Senate Bill 8 would establish a hybrid model to electronically share health records and other patient information by establishing a Pennsylvania Health Information Partnership Authority comprised of a 19-member board:

- The Secretary of Health or a designee who is an employee of the Department
- The Secretary of Public Welfare or a designee who is an employee of the Department
- Two representatives of the health care community focused on unserved and underserved rural and urban patient populations
 - One appointed by the Senate Minority Leader from a list of two submitted by a Statewide health education center
 - One appointed by the House Minority Leader from a list of two submitted by a Statewide association of community health centers
- Five representatives of participating health information exchange entities
 - One appointed by the Governor to represent the Commonwealth's internal agencies

- One appointed by the Senate President Pro Tempore
- One appointed by the Senate Minority Leader
- One appointed by the Speaker of the House
- One appointed by the House Minority Leader

- Two physicians selected from a list of four submitted by the Pennsylvania Medical Society and the Pennsylvania Osteopathic Medical Association
 - One appointed by the Senate President Pro Tempore
 - One appointed by the Speaker of the House

- Two hospital representatives selected from a list of four submitted by the Hospital and Healthsystem Association of Pennsylvania
 - One appointed by the Senate President Pro Tempore
 - One appointed by the Speaker of the House

- One representative of the Blue Cross and Blue Shield plans appointed by the Governor
- One representative of an insurer other than a Blue Cross or Blue Shield plan selected from a list of two submitted the Insurance Federation and appointed by the Governor
- Two consumer representatives appointed by the Governor
- One representative of an assisted living residence, personal care home, long-term care nursing facility or continuing care facility appointed by the Governor
- A Commonwealth resident who has expertise in health care or health care information technology appointed by the Governor

The following would be among the Authority's responsibilities (with the Commonwealth handling day-to-day operations):

- Establish a system to provide for the exchange of health care information
- Develop and maintain a provider directory
- Certify regional health information networks comply with national standards
- Assure confidentiality of information
- Adopt transaction, subscription, or other fees to operate an electronic exchange
 - A Pennsylvania Health Information Partnership Fund is established as a repository for such fees
- Secure and make available to the public an annual audit

The Authority would sunset December 31, 2018.

Note: health records and other patient information would *automatically* become part of providers' electronic networks *unless* patients (or minors' parents) specifically "opt out".

However, health information could not be shared with anyone for any other purpose without written patient consent.

This information is also explicitly exempted from Pennsylvania's Right to Know Law.