

House Bill 2850

Sponsored by Representatives BRUUN, CANNON; Representatives DEMBROW, GARRETT, HARKER, KENNEMER, MAURER

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires health care facilities and health care providers to use interoperable electronic health information system by December 15, 2015.

Creates Task Force on Interoperable Electronic Health Information Systems to assess use of interoperable electronic health information systems, develop uniform standards for interoperable electronic health information systems, plan for implementation and make recommendations to Legislative Assembly for updating state laws.

Sunsetts task force on January 2, 2012.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to electronic health information systems; and declaring an emergency.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. As used in sections 2 and 3 of this 2009 Act:**

5 (1) **"Electronic health information system" means technology using computer hardware**
6 **and software for the storage, retrieval and sharing of patient health data.**

7 (2) **"Interoperable" means the capacity of two or more information systems to exchange**
8 **information or data in an accurate, effective, secure and consistent manner.**

9 **SECTION 2. All health care facilities and health care providers shall use an interoperable**
10 **electronic health information system by December 15, 2015.**

11 **SECTION 3. (1) There is created the Task Force on Interoperable Electronic Health In-**
12 **formation Systems within the Department of Human Services, consisting of 23 members ap-**
13 **pointed by the Governor.**

14 (2) **The Task Force on Interoperable Electronic Health Information Systems shall:**

15 (a) **Assess the use of electronic health information systems by health care providers;**

16 (b) **Develop a plan for implementing a statewide interoperably electronic health informa-**
17 **tion infrastructure that is used by all Oregon hospitals and health care providers by De-**
18 **cember 15, 2015;**

19 (c) **Develop uniform standards for interoperable electronic health information systems;**
20 **and**

21 (d) **Evaluate state health privacy laws and make recommendations for updating state**
22 **privacy laws relating to electronic health information systems, including but not limited to:**

23 (A) **Incorporating provisions relating to interoperable electronic health information sys-**
24 **tems into existing laws;**

25 (B) **Establishing penalties for health care providers who disclose patient records without**
26 **proper authorization; and**

27 (C) **Requiring that all health care providers and insurers electronically exchange eligibil-**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 ity, claims, payment and remittance information in a standard form.

2 (3) A majority of the members of the task force constitutes a quorum for the transaction
3 of business.

4 (4) Official action by the task force requires the approval of a majority of the members
5 of the task force.

6 (5) The task force shall select one of its members to serve as chairperson and another
7 as vice chairperson, for such terms and with such duties and powers necessary for the per-
8 formance of the functions of those offices as the task force determines.

9 (6) A member of the task force serves at the pleasure of the Governor. If there is a va-
10 cancy for any cause, the Governor shall make an appointment to become immediately effec-
11 tive.

12 (7) The task force shall meet at times and places specified by the call of the chairperson
13 or of a majority of the members of the task force.

14 (8) The task force may adopt rules necessary for the operation of the task force.

15 (9) The task force shall submit its preliminary findings and recommendations about the
16 items listed in subsection (2) of this section to appropriate interim committees of the Leg-
17 islative Assembly no later than January 31, 2010. The task force shall submit the final uni-
18 form standards for interoperable electronic health information systems, plan for
19 implementation of the standards and recommendations for legislation to the appropriate in-
20 terim committees of the Legislative Assembly no later than October 1, 2010.

21 (10) Members of the task force are entitled to compensation and expenses in the manner
22 and amounts provided in ORS 292.495. Claims for compensation and expenses incurred in
23 performing the functions of the task force shall be paid out of funds appropriated to the de-
24 partment for that purpose.

25 (11) All agencies of state government, as defined in ORS 174.111, are directed to assist
26 the task force in the performance of its duties and, to the extent permitted by laws relating
27 to confidentiality, to furnish such information and advice as the members of the task force
28 consider necessary to perform their duties.

29 SECTION 4. Section 3 of this 2009 Act is repealed on January 2, 2012.

30 SECTION 5. This 2009 Act being necessary for the immediate preservation of the public
31 peace, health and safety, an emergency is declared to exist, and this 2009 Act takes effect
32 on its passage.