SENATE FILE NO. SF0029

Health care information technology study.

Sponsored by: Joint Labor, Health and Social Services Interim Committee

A BILL

for

- 1 AN ACT relating to health care; authorizing a study and
- 2 development of a plan to establish a uniform statewide
- 3 health care information and communications technology
- 4 system; specifying duties of the Wyoming health care
- 5 commission in conducting the study and plan; requiring
- 6 recommendations in the plan; requiring reports; providing
- 7 appropriations; and providing for an effective date.

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9 Be It Enacted by the Legislature of the State of Wyoming:

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11 Section 1.

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- 13 (a) The Wyoming health care commission shall enter
- 14 into a contract or contracts to conduct a study on health
- 15 care information and communication technology in Wyoming.

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1 (b) The commission shall appoint an information 2 technology technical management subcommittee to provide 3 oversight of the contractor's work from the perspective of 4 the ultimate users of the infrastructure. The information 5 technology technical management subcommittee shall consist of seven (7) to thirteen (13) members as determined by the 6 health care commission. The membership shall represent all 7 major participants in the health care delivery and 8 9 reimbursement systems. A majority of the subcommittee 10 shall be health care providers or employees of health care 11 providers. The subcommittee shall include one (1) or more 12 members of the public as determined by the commission. The 13 members of the subcommittee shall be reimbursed for 14 expenses in the same manner as members of the health care commission. 15

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17 (C) The subcommittee chairman shall be appointed by the commission. State agencies shall cooperate with the 18 subcommittee to the extent necessary for the subcommittee 19 20 to perform its duties under this section.

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22 (d) The subcommittee shall:

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(i) Develop and issue a request or requests for 1 2 proposals from health care information and communications 3 technology contractors to perform the study, to include, 4 but not be limited to: 5 6 (A) An organizational structure for the 7 study; 8 9 (B) The feasibility of obtaining 10 governmental or private grant to assist in funding the 11 study. 12 13 (ii) Award a contract or contracts for the performance of the study to a nationally recognized expert 14 or experts in health care information and communications 15 16 technology; 17 18 and coordinate contractor (iii) Oversee 19 performance; 20 21 (iv) Provide quarterly progress reports to the 22 health care commission and the joint labor, health and 23 social services interim committee, including an interim status report due to the commission and the committee by 24

November 15, 2004. The subcommittee's final report shall 1

2 be due to the commission on September 1, 2005. The

3 commission's final report shall review the contractor and

4 subcommittee study and plan and make recommendations

5 regarding implementation of a plan for creation of a health

care information and communication technology system to the 6

joint labor, health and social services interim committee 7

no later than October 15, 2005; 8

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(v) Widely disseminate requests, including 10

11 through electronic media, for the active participation of

12 private groups and organizations in the development of the

13 subcommittee's plan. Before submitting the final plan to

the health care commission, the subcommittee shall issue 14

drafts of the plan for public review and hold at least one 15

(1) public meeting in a central location in the state to 16

17 receive public comments on the plan.

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19 The subcommittee's plan shall include (e) the

20 following:

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22 (i) Determination of the feasibility of and a

23 plan for developing and deploying a health care information

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infrastructure system to be used by providers, patients and 1 2 payors; 3 4 (ii) Identification at an early stage of the 5 study of all major participants in the health care delivery and reimbursement systems who would be affected by a 6 7 uniform statewide health care information technology and communications system; 8 9 10 (iii) Identification of organizational 11 structures for the development of an open, flexible and 12 interoperable technology infrastructure and for continued operation and maintenance of the recommended health care 13 information technology system; 14 15 16 (iv) Analysis of existing information technology 17 systems of health care providers, government agencies and third party payors, national trends in the development of 18 the systems, and the feasibility of incorporating existing 19 20 systems into the recommended health care information 21 technology system;

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23 (v) Development of recommended organizational 24 and operational documents for the recommended governance

1 structures, such as charters, bylaws and participant

2 contracts;

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4 (vi) Identification of available governmental or

5 private grants for the feasibility study or implementation

6 of a health care information and communication technology

7 system;

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9 (vii) A timetable for implementation of the

10 technology infrastructure, with an estimate of the costs

11 that would be incurred over time separating development and

12 implementation costs from ongoing operating and maintenance

13 costs;

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15 (viii) A business plan for financing the

16 development and maintenance of the technology

17 infrastructure, including available governmental and

18 private grants;

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20 (ix) Identification of potential problems and

21 recommended solutions regarding such matters as privacy,

22 security, federal mandates or preemption and antitrust

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23 laws;

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1 (x) An analysis to determine the current

2 capabilities of the public and private telecommunications

3 systems in Wyoming to support the type and volume of data

4 transmission required by the recommended health care

5 information and communication technology system.

6 Recommendations to upgrade those systems shall include

7 methods of financing the upgrades.

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9 (f) The recommendations in the subcommittee's plan

10 shall consider the following features:

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12 (i) Provisions to guarantee security and privacy

13 for all health care consumers, providers and other users of

14 the system;

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16 (ii) Provision for an interoperable personal

17 health record, including a unique patient identifier, for

18 all patients;

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20 (iii) Demonstrable and measurable ability to

21 improve the quality of health care, improve patient safety,

22 reduce medical errors and reduce duplication of health care

23 services;

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1 (iv) Ability to gather, store and recall data

2 efficiently and cost effectively;

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4 (v) Ability for providers and patients to

5 quickly access reliable, evidence based, current treatment

6 guidelines, standards and protocols and relate this

7 information to the personal health care records;

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9 (vi) Provisions for individual patients to

10 interact with their personal health records for the

11 awareness of, involvement in and responsibility for their

12 own health and health care costs;

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14 (vii) Ability to provide rapid, point-of-care

15 access to medical information;

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17 (viii) Provisions to enhance public health

18 through such means as population based epidemiological

19 studies, automatic notification of reportable diseases and

20 maintenance of statistical databases and registries.

21 Privacy of individuals shall be maintained in all instances

22 where personal identification is not required for public

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23 health necessity;

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1 (ix) Methods for financing initial and 2 continuing system-related costs of health care providers, 3 including the possibility of user fees; 4 5 (x) Other features considered appropriate. 6 7 Section 2. There is appropriated for fiscal year commencing July 1, 2004 four hundred thousand dollars 8 9 (\$400,000.00) from the general fund to the Wyoming health care commission to procure professional services necessary 10 11 to conduct a study on health care information and 12 communication technology in Wyoming as provided in this act 13 and for the expenses of the subcommittee. The department of health shall provide administrative support as needed. Any 14 remaining unexpended, unobligated funds shall revert to the 15 16 general fund on June 30, 2006. 17 18 Section 3. This act is effective immediately upon completion of all acts necessary for a bill to become law 19 20 as provided by Article 4, Section 8 of the

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23 (END)

Constitution.