

**SB 251**  
**TASK FORCE TO STUDY ELECTRONIC HEALTH RECORDS**

**March 12, 2007**  
**MINUTES**

Task Force Members in Attendance √, Absent x, Representative \*:

√ Thomas Allen	x Paul Fowler	x* Shane Pendergrass
x Stephanie Amey	√ David Gens	x Victor Plavner
√ Peter Basch	√ Mary Hendler	√ Jack Schwartz
√ Beverly Collins	x* Paula Hollinger	x Kevin Sexton
x Barbara Cook	x Aubrey Knight	x Dorothy Snow
x* Jimmie Drummond	x Carey Leverett	x Angelo Voxakis
x Rex Cowdry	√ Thomas Lewis	√ James Wieland
√ John Eichensehr	√ Gina McKnight-Smith	√ Ken Yale
x Michael Flores	√ Susan Newbold	

\*Chris Gibbons for Jimmie Drummond

\*Steve Mandell for Paula Hollinger

\*DeWayne L. Oberlander for Shane Pendergrass

**I. Meeting Call to Order**

Task Force Chairman Peter Basch, M.D. called the meeting to order at 3:00 p.m.

Chairman Basch welcomed Task Force members and the public to the meeting. Chairman Basch reported that the Santa Barbara Community Data Exchange had dissolved last week. According to the Chairman, news reports indicated the exchange dissolved due to ongoing concerns related to privacy, financial sustainability, and the lack of significant progress.

Chairman Basch said that Mr. J.P. Little, Chief Operating Officer of RxHub, had provided answers to a series of questions developed by the Task Force in response to his February 12<sup>th</sup> presentation. The Chairman said answers to these questions have been posted on the Commission's Task Force webpage. Mr. Little's presentation provided the Task Force with an overview of RxHub and the flow of electronic prescription.

**Approval of the Minutes**

As a quorum was not achieved, approval of the February minutes was postponed until the April Task Force meeting.

Staff reported that Section I (Introduction) and Section III (Laws and Principles Guiding Adoption, Use of health information technology HIT/HIE) were available for review and comment on the Commission's Task Force webpage. Chairman Basch requested that Task Force members read over the draft sections and provide staff with comments by March 26<sup>th</sup>. Staff will review Task Force member comments and provide an update at the April 9<sup>th</sup> meeting. Staff reported that Section IV will be distributed at the April

meeting, and Section II at the May 14<sup>th</sup> meeting. Chairman Basch said that member concerns will be discussed at Task Force meetings and the report would note where consensus was not achieved.

## **II. Workgroup Breakout Session Instructions from the Chair and Vice Chair**

Chairman Basch asked the Electronic Prescribing Workgroup to continue to discuss whether there is sufficient proof of benefits to patients from e-prescribing, and whether there is evidence of risk or harm to patients from e-prescribing which would lead the Workgroup to not recommend policies to adopt e-prescribing. Chairman Basch also asked the Workgroup to consider stand-alone e-prescribing applications versus e-prescribing modules that are integrated into an electronic health record. He also requested that the Workgroup review and comment on the National E-Prescribing Safety Initiative (NEPSI), a national initiative sponsored by a consortium of technology and health care organizations to promote e-prescribing at no cost to physicians.

Chairman Basch asked the Electronic Patient Information Workgroup to continue to consider whether they believe there is sufficient distinction between electronic medical records (EMRs), electronic health records (EHRs), and personal health records (PHRs). In addition, he asked the Workgroup to consider whether the Task Force should adopt an application approach, or a functionality approach to EHR adoption, or a combination of both. Chairman Basch also would like the Workgroup to consider whether EHR adoption is useful without a mechanism for patient-centric data exchange.

Chairman Basch asked the Infrastructure Management Workgroup to continue to discuss the Markle Foundation's *Connecting for Health Common Framework* for establishing an electronic health information exchange. He also requested that the Workgroup continue with their prior month discussion that centered on value related to health information exchange if all health care providers are not using electronic health information systems.

## **IV. Workgroup Sessions**

Each Workgroup met for breakout sessions.

## **V. Workgroup Updates and Task Force Discussion**

Mr. James Wieland reported that the Electronic Patient Information Workgroup discussed the first two questions contained in their policy review document. The Workgroup concluded that EMRs should be mandated for hospitals but should not be mandated for physicians or non-hospital facilities. Mr. Wieland said the rationale to mandate hospitals to adopt EMRs is based on the idea that hospitals are at the center of care; mandating physicians to adopt EMR could create financial burdens which could potentially drive physicians out of the state. Dr. Thomas Allen raised the issue of whether the requirements for EMR adoption should be different for psychiatric hospitals than for acute hospitals. Mr. Wieland said the Workgroup decided not to differentiate between psychiatric and acute hospitals.

Dr. Beverly Collins reported that the Electronic Prescribing Workgroup had only two members present, and would not at this time make final recommendations on the e-prescribing policy questions identified by the Chairman. The Workgroup will be reviewing issues surrounding the NEPSI initiative, but will need more information about it before making any recommendations. Dr. Collins said the Workgroup will discuss this issue further in April. Dr. Collins also mentioned that at the last meeting, the Workgroup agreed that they did not support mandates. The Workgroup agreed that insufficient evidence exists to confirm benefits of e-prescribing. Dr. Collins said the Workgroup thought that incentives should be directed to using e-prescribing as part of an EMR system whenever possible. Dr. Collins also mentioned that the Workgroup has started looking at how e-prescribing incentives might be financed.

Vice Chairman Ken Yale reported for the Infrastructure Management Workgroup. He stated that after a thorough review of the policy principles, the Workgroup decided to be clearer about what the principles actually were. The Workgroup will take Dr. Allen's suggestion to reorganize the principles and rewrite the introduction so that they are more in agreement with the principles in the Connecting for Health document. In addition, the Workgroup will be working on finalizing definitions for some of the terms used in the Connecting for Health documents. Vice Chairman Yale said that once completed, these definitions will be posted on the Commission's Task Force webpage.

## **VI. Closing Remarks by the Chair**

Chairman Basch asked the public for any comments. He reminded the Task Force to review draft Sections I and III, and provide staff with their comments over the next two weeks. The Chairman also reminded the Task Force that the May 14<sup>th</sup> meeting will be at the University of Maryland College Park Campus at 1:30 p.m. Chairman Basch said the Vice President of the Health Information Technology section of the American Health Lawyer Association, and a representative from the American Association for Justice will present at this meeting.

The next Task Force meeting will be on April 9, 2007 at 3:00 p.m. There being no further business, the Task Force meeting was adjourned at 5:00 p.m.