

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

**July 10, 2006**  
**MINUTES**

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

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

\* Chris Gibbons for Jimmie Drummond

\* Paul Kim for James Wieland

**I. Meeting Call to Order**

Task Force Chair Peter Basch, M.D. called the meeting to order at 3:06 p.m.

**Opening Remarks from the Chair**

Dr. Basch welcomed the members of the Task Force and the public to the meeting. He announced that the Workgroups have engaged several national experts to educate the Task Force members on other states' policies and broad issues related to electronic health records. Vice Chair Dr. Ken Yale proposed that when nationally known speakers are scheduled to attend Task Force meetings and address the entire Task Force, those meetings begin at 2:00 p.m. and that members will be provided with advance notice when a change in meeting time is planned. The revised schedule, to include beginning meetings at 2:00 pm when speakers are invited to address the entire Task Force, was agreed upon by consensus. In response to a question from Delegate Pendergrass about whether any funds had been budgeted for outside speakers, Dr. Rex Cowdry replied that the Maryland Health Care Commission would fund Task Force activities.

**II. Approval of the Minutes**

Dr. Thomas Lewis made a motion to approve the minutes of the June 12, 2006 Task Force meeting, which was seconded by Dr. Cowdry, and unanimously approved, with three minor corrections noted by Task Force members.

### **III. Discussion of Prior Month's Presentations — *School Health Records and Evolution of State Health Information Exchange***

Chairman Basch remarked that there were very thoughtful questions and discussions during the June Task Force meeting. He asked whether there were any issues raised that Task Force members would like to discuss further or needed additional information. Dr. Thomas Allen expressed concerns about the privacy of – and policies regarding access to -- school health records; for example, that parents' access to educational and psychological records could create compromised situations for adolescents. Dr. Victor Plavner suggested that the Task Force analyze the gap between HIPAA privacy rules, and the rules governing privacy and permitted disclosures of information about school health records under the Family Educational Rights and Privacy Act (FERPA).

Several Task Force members questioned the contents of school health records, and were reminded that the nature, extent, and sensitivity of medical records generated and maintained by Maryland's 61 school-based health centers merit greater protection. Jack Schwartz expressed his concern that school health records might be "balkanized" and kept separate from a former student's EHR, thereby resulting in important omissions for information about conditions and treatments.

Following further discussion, Chairman Basch suggested that the Task Force form a sub-group to gather more information regarding electronic information exchange issues surrounding school health records. Chairman Basch suggested that some of the Task Force members visit school-based health centers in order to view their operations, how they protect records, and how health information is exchanged.

### **IV. Workgroup Resource Support — Consultant Introductions**

Staff announced that resource support for the Workgroups has been arranged. Staff introduced Thomas Witmer of Misty Meadow Holdings, Inc., consultant to the Electronic Patient Information Workgroup; Beth Franklin of Delmarva Foundation, consultant to the Computerized Prescription Workgroup, and Robyn Kaplan, also of Delmarva Foundation, consultant to the Infrastructure Management Workgroup. Staff explained that consultant tasks proposed by the Workgroups will be evaluated by staff and assigned based on resource allocation and priorities of the Task Force. Staff will monitor the work of the consultants and approve work products for review by the Workgroups.

### **V. Workgroup Sessions**

The members of each Workgroup met with their assigned consultants.

## **VI. Brief Summaries from the Workgroup Leads**

Dr. Yale reported that the Infrastructure Management and Policy Development Workgroup discussed a number of projects and issues related to further evaluation of the models for health information exchange that Dr. Cowdry had presented to the Task Force members in May. The group's consultant will undertake a survey intended to categorize and describe electronic health information exchange currently under development in Maryland. The Workgroup had discussed ways to refine this survey to focus on the most advanced examples of electronic health information exchange, and how to make the survey most efficient and effective. Dr. Cowdry also described in detail two Commission initiatives related to the Task Force's work, which will produce important lessons at approximately the same time the Task Force would be finalizing its recommendations. The first of these is a study of current practices and policies affecting the privacy and security of the exchange of electronic health information in Maryland, and the second is a request for applications for up to three projects to plan and design a system for electronic health information exchange in Maryland.

Beverly Collins reported that the Computerized Prescribing Workgroup identified key areas for which they need more information. The group wanted a flowchart developed that would describe the variations of the electronic prescribing process: the key players, their roles, the costs at each step of the process, and who pays transaction costs. The Workgroup also wants to understand more about where prescriptions are written, where they go for fulfillment, and how many are being written electronically. They want to know more about legislative and policy issues that will affect electronic prescribing on a state and national level, such as the electronic transmission of prescriptions for controlled substances, maintenance of hard copy records, and interstate (and Internet) transmission of prescriptions. They also identified some "back-burner" issues, such as the potential effect of e-prescribing on patient compliance with prescription orders, and patient/consumer concerns about the privacy and security of computerized prescribing.

In the absence of Jim Wieland, Electronic Patient Information and Policy Development Workgroup lead, staff reported on that Workgroup's breakout session. The discussion focused upon the challenges related to technologies for electronic health records, electronic medical records (EMRs), and personal health records (PHRs). The Workgroup would like its consultant to identify key principles central to physician adoption of electronic medical record and to broadly discuss functionality most used by physicians in states or regions where adoption rates exceed about 25 percent. The analysis will focus primarily on identifying areas of functionality deemed most significant by users of each category of electronic record. This Workgroup also plans to better understand large provider groups, such as the Geisinger Health System in Pennsylvania, which have established successful systems of electronic health information exchange and realized significant benefits from electronic health records. Jack Schwartz added that the Workgroup's consultant would also be working on issues related to school health records, including a review of policies and practices of other states' school systems.

**VI. Closing Remarks by the Chair**

Chairman Basch asked if there were any public members wishing to comment. There were no comments. He announced that the next scheduled meeting of the Task Force would be August 14, 2006 at 2:00 p.m., to accommodate a presentation by Mr. Holt Anderson, Executive Director of the North Carolina Healthcare Information and Communications Alliance (NCHICA), as well as to allow sufficient time for questions and discussion. The meeting was adjourned at 5:00 p.m.