

SB 251
TASK FORCE TO STUDY ELECTRONIC HEALTH RECORDS

November 13, 2006
MINUTES

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

x Thomas Allen	x Paul Fowler	x* Shane Pendergrass
√ Stephanie Amey	√ David Gens	√ Victor Plavner
√ Peter Basch	x Mary Hendler	x Jack Schwartz
√ Beverly Collins	x Paula Hollinger	x Kevin Sexton
√ Barbara Cook	x Aubrey Knight	√ Dorothy Snow
x* Jimmie Drummond	√ Carey Leverett	x Angelo Voxakis
√ Rex Cowdry	√ Thomas Lewis	√ James Wieland
√ John Eichensehr	√ Gina McKnight-Smith	√ Ken Yale
√ Michael Flores	x 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 Chair Peter Basch, M.D. called the meeting to order at 3:05 p.m.

Dr. Basch welcomed the members of the Task Force and the public to the meeting. He discussed recent developments in health information technology (HIT) news, noting that the United States Internal Revenue Service (IRS) has cautioned hospitals to wait for its forthcoming rulings regarding donations of information technology resources from hospitals and systems. This caution may slow down donations of hardware and/or software systems that were the subject of last summer's regulatory activity by the U.S. Department of Health and Human Services, which absolves such health IT-related donations, under defined circumstances, from otherwise-applicable prohibitions against exchanges of value between hospitals and physicians considered "kickbacks" or rewards for patient referrals. Vice Chairman Yale suggested that the IT community should anticipate more activity in Congress as a result of the mid-term elections.

II. Approval of the Minutes

Dr. David Gens made a motion to approve minutes of the October 16, 2006 meeting, which was seconded by Dr. Beverly Collins, and unanimously approved.

III. Welcome New Task Force Member – John Eichensehr, Quest Diagnostics

Chairman Basch welcomed Mr. John Eichensehr of Quest Diagnostics, appointed by the Governor to serve as the representative of medical laboratories required by the group's enabling legislation, SB 251.

IV. Workgroup Breakout Session Instructions from the Chair and Vice Chair.

Chairman Basch referred to the newly revised Draft Outline of the Task Force Report, which had been previously distributed to the Task Force, and made available to members of the public attending the meeting. He asked the Workgroups to consider the revised outline, as well as each workgroup's list of policy questions, and return to the group with at least one recommendation regarding policies for each group.

V. Workgroup Sessions

Each Workgroup met for breakout sessions.

VI. Workgroup Updates and Task Force Discussion

Dr. Collins reported that the Electronic Prescribing Workgroup considered policy questions regarding whether or not the state should mandate that physicians and other prescribers adopt e-prescribing. In addition, they discussed whether Maryland should take the lead in encouraging adoption of e-prescribing and what performance incentives should be adopted. Dr. Cowdry pursued this issue further, questioning the kind of incentives that might be effective in this situation, where they'd be generated, and to whom. Chairman Basch observed that, while the Workgroup believes that there are many theoretical benefits to the use of e-prescribing and CPOE (computerized physician order entry), it is unclear from the current literature whether the Task Force should recommend that the state mandate their use.

James Wieland reported that the Electronic Patient Information Workgroup continued to seek to define electronic medical record, electronic health record, and personal health record, having noted a lack of consensus among organizations regarding definitions for these terms. He added that the group considered recommending economic incentives for the adoption of electronic medical records, such as rate differentials favorable to adopters of health IT. The group discussed following federal definitions, and coordinating with work done at the national level.

Vice Chairman Yale reported that the Infrastructure Management Workgroup was not yet ready to answer questions and make recommendations, but had determined to work in detail through the Markle Foundation's Connecting for Health Common Framework for establishing electronic health information exchange. The group's approach is likely to be "technologically agnostic": that is, it will not specify a particular technology, but will

instead focus on what policies and principles should guide Maryland's evolution of health information exchange, and what governance and funding mechanisms should be adopted.

Chairman Basch observed that each workgroup is on track to accomplish a detailed examination of its respective set of issues related to EHR adoption and use in Maryland, and that this will establish a foundation for the Task Force's deliberations as it formulates its recommendations and final report.

VII. Closing Remarks by the Chair

Chairman Basch announced that the next meeting of the Task Force would be December 11, 2006, at 3:00pm and that meetings would continue to be scheduled for the second Monday of the month through 2007. He thanked members of the Task Force and the public for attending the meeting. There being no further business, the Task Force meeting was adjourned at 4:54 p.m.