

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 494

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO HEALTH CARE PLANNING; AMENDING SECTION 56-1054, IDAHO CODE,  
2 TO REVISE DUTIES OF THE COMMISSION RELATED TO HEALTH INFORMATION  
3 TECHNOLOGY PLANNING, TO PERMIT THE COMMISSION TO USE DATA FROM OTHER  
4 SOURCES, TO PROMOTE HEALTH AND PATIENT SAFETY PLANNING, TO REVISE THE  
5 DUTIES OF THE COMMISSION RELATED TO HEALTH QUALITY AND PATIENT SAFETY  
6 PLANNING; AND REPEALING SECTIONS 2 AND 3, CHAPTER 364, LAWS OF 2008,  
7 THAT IS A SUNSET CLAUSE.  
8

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

10 SECTION 1. That Section 56-1054, Idaho Code, be, and the same is hereby  
11 amended to read as follows:

12 56-1054. HEALTH QUALITY PLANNING. (1) It is the intent of the  
13 legislature that the department of health and welfare ("the department")  
14 promote improved quality of care and improved health outcomes through  
15 investment in health information technology and in patient safety and  
16 quality initiatives in the state of Idaho.

17 (a) Coordinated implementation of health information technology in  
18 Idaho will establish widespread use of networked electronic health  
19 information or health records to allow quick, reliable and secure  
20 access to that information in order to promote patient safety and best  
21 practices in health care. This goal is consistent with the mission  
22 of the office of the national coordinator for health information  
23 technology, established by the president of the United States in  
24 2004, to provide leadership for the development and nationwide  
25 implementation of an interoperable health information technology  
26 infrastructure to improve the quality and efficiency of health care and  
27 the ability of consumers to manage their care and safety.

28 (b) Coordinated implementation of statewide patient safety standards  
29 will identify uniform indicators of and standards for clinical quality  
30 and patient safety as well as uniform requirements for reporting  
31 provider achievement of those indicators and standards.

32 (2) There is hereby created and established within the department a  
33 health quality planning commission ("the commission").

34 (a) By May 1, 2006, and as needed after that date, the governor  
35 shall appoint eleven (11) voting members upon assurance of equitable  
36 geographic and rural representation, comprising members of the public  
37 and private sectors with expertise in health information technology and  
38 clinical quality and patient safety. The membership shall represent  
39 all major participants in the health care delivery and financing  
40 systems. A majority of the commission shall be health care providers  
41 or employees of health care providers. One (1) member shall be an Idaho

1 resident representing the public interest. The commission chairperson  
2 shall be appointed by the director of the department.

3 (b) Members of the commission shall be appointed for a term of two (2)  
4 years. The term of office shall commence on July 1, 2006. As terms of  
5 commission members expire, the governor shall appoint each new member  
6 or reappointed member to a term of two (2) years in a manner that is  
7 consistent with subsection (a) of this section.

8 (c) The commission shall meet quarterly and at the call of the  
9 chairperson.

10 (d) Each member of the commission shall be compensated as provided by  
11 section 59-509(d), Idaho Code.

12 (e) Upon the occurrence or declaration of a vacancy in the membership  
13 of the commission, the department shall notify the represented entity  
14 of that fact in writing and the represented entity shall, within sixty  
15 (60) days thereafter, nominate at least one (1) and not more than three  
16 (3) persons to fill the vacancy and shall forward the nominations to  
17 the governor, who shall appoint from among the nominees a person to be a  
18 member of the commission to fill the vacancy. Such appointments shall  
19 be for a term of two (2) years.

20 (f) Members of the commission may be removed by the governor for  
21 substantial neglect of duty, gross misconduct in office, or the  
22 inability to discharge the duties described in this section, after  
23 written notice and opportunity for response.

24 (g) A majority of the members of the commission shall constitute a  
25 quorum for the transaction of all business and the carrying out of  
26 commission duties.

27 (3) The department may dedicate funding to the operations of the  
28 commission, subject to appropriation from the legislature. The department  
29 shall seek federal matching funds and additional private sector funding for  
30 commission operations.

31 (4) The commission shall perform the following duties related to health  
32 information technology planning:

33 ~~(a) Develop and issue a request or requests for proposals from~~  
34 ~~health care information and communications technology contractors to~~  
35 ~~perform a study on health information technology in Idaho~~ Monitor the  
36 effectiveness of the Idaho health data exchange; and

37 ~~(b) Award a contract or contracts for the performance of the study~~  
38 ~~to a nationally recognized expert or experts in health information~~  
39 ~~technology; Make recommendations to the legislature and the department~~  
40 on opportunities to improve the capabilities of health information  
41 technology in the state.

42 ~~(c) Oversee and coordinate contractor performance;~~

43 ~~(d) Provide quarterly progress reports to the director of the~~  
44 ~~department and to the legislative health care task force. An~~  
45 ~~annual report of the commission shall be due to the director and~~  
46 ~~the legislative health care task force on June 30 of each year. The~~  
47 ~~annual report of June 30, 2008, shall review the contractor study~~  
48 ~~and make recommendations regarding implementation of a plan for the~~  
49 ~~creation of a health information technology system as described in~~  
50 ~~subsection (4) (f) (ii) of this section;~~

~~(e) Widely disseminate requests, including through electronic media, for the active participation of private groups and organizations in the development of the plan. Before submitting the final plan to the director of the department, the commission shall issue drafts of the plan for public review and shall hold at least one (1) public meeting to receive public comments on the plan;~~

~~(f) Develop and submit a final plan that shall include, but not be limited to:~~

~~(i) An analysis of existing health information technology in Idaho and of national trends in the development of health information technology systems;~~

~~(ii) A plan for developing a uniform, statewide, flexible and interoperable health information technology system to be used by providers, patients and payers, including a unique patient identifier for all patients;~~

~~(iii) Identification of all major participants in the health care delivery and financing systems that would be affected by the health information technology system;~~

~~(iv) Analysis of the feasibility of incorporating existing infrastructure into the recommended system, analysis of improvements and additions to the existing infrastructure needed to implement the recommended system, and identification of potential obstacles to implementation, such as privacy and security laws, and recommended solutions;~~

~~(v) Development of recommended organizational and governance structures for implementation and maintenance of the system;~~

~~(vi) A business plan for financing the development and maintenance of the technology system, including identification of government and private funding and including consideration of appropriate user fees;~~

~~(vii) A timetable for implementation of the technology system;~~

~~(viii) A means to assess the measurable ability of the recommended system to improve the quality of health care through access to reliable, evidence based current treatment guidelines; and~~

~~(ix) Provisions to ensure that the system meets the health information technology needs of rural Idahoans; and~~

~~(g) Issue grants to selected providers including, but not limited to, primary care providers, in order to support the adoption of health information technology. The commission shall develop criteria for the selection of grantee providers.~~

(5) The commission may use the information generated by the Idaho health data exchange and other data sources to promote health and patient safety planning. The commission may perform the following duties related to health quality and patient safety planning, provided that performance of these duties may include contracting with and supervising independent entities for the performance of some or all of these duties:

(a) Analyze existing clinical quality assurance and patient safety standards and reporting;

(b) Identify best practices in clinical quality assurance and patient safety standards and reporting;

1 (c) Recommend a mechanism or mechanisms for the uniform adoption of  
2 certain best practices in clinical quality assurance and patient safety  
3 standards and reporting including, but not limited to, the creation of  
4 regulatory standards;

5 ~~Recommend a mechanism or mechanisms to promote public~~  
6 ~~understanding of provider achievement of clinical quality and patient~~  
7 ~~safety standards~~ Monitor and report appropriate indicators of quality  
8 and patient safety;

9 (e) Recommend a sustainable structure for leadership of ongoing  
10 clinical quality and patient safety ~~improvement~~ reporting in Idaho;

11 (f) Recommend a mechanism or mechanisms to promote public  
12 understanding of provider achievement of clinical quality and patient  
13 safety standards;

14 (g) Provide quarterly progress reports to the director of the  
15 department and to the legislative health care task force. An annual  
16 report shall be due to the director, the legislative health care task  
17 force and the senate and house of representatives health and welfare  
18 committees on June 30 of each year ~~and a final report shall be due by June~~  
19 ~~30, 2010;~~ and

20 (gh) In regard to the commission's duties provided for in this section,  
21 the commission is directed to ensure that such duties are developed and  
22 implemented in such a manner and in such forms or formats as to result in  
23 health care data that will be readily understood by the citizens of this  
24 state.

25 SECTION 2. That Sections 2 and 3, Chapter 364, Laws of 2008, be, and the  
26 same are hereby repealed.