



General Assembly

January Session, 2015

Proposed Bill No. 812

LCO No. 3004



Referred to Committee on PUBLIC HEALTH

Introduced by:

SEN. LOONEY, 11th Dist.

SEN. FASANO, 34th Dist.

AN ACT CONCERNING ELECTRONIC HEALTH RECORDS AND HEALTH INFORMATION EXCHANGE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 That: (1) The general statutes be amended to promote the
2 establishment of interoperable electronic health records systems in all
3 health care provider settings and a state-wide health information
4 exchange to enable the secure exchange of health information between
5 health care providers regardless of the health care provider's
6 affiliation, location or health record technology; (2) the general statutes
7 be amended to designate "eHealth Connecticut" as the entity for
8 advancing the use and adoption of electronic health records in all
9 health care provider settings and for coordinating and integrating
10 public and private health information technology and information
11 exchange efforts in the state; (3) the general statutes be amended to
12 require all third-party payers to pay a membership fee of one dollar
13 per month, which shall be deposited into a fund known as the "Health
14 IT Trust Fund", to be used to support the adoption of electronic health
15 records and the implementation of the state-wide health information
16 exchange; (4) the general statutes be amended to require each hospital

17 to adopt an interoperable health records system and enable
18 bidirectional connectivity for the secure exchange of patient health
19 records and information between the hospital and other licensed
20 health care providers using certified electronic health record
21 technology; (5) the general statutes be amended to prohibit any
22 hospital, in implementing its interoperable health record system, from
23 (A) requiring a health care provider to pay for any hardware, software
24 or other internal cost associated with the hospital's implementation of
25 its health records system, (B) charging any fee for connecting to, or
26 exchanging information through, the hospital's health records system,
27 (C) refusing to implement any available hardware, software or other
28 functionality that would support such exchange, and (D) requiring a
29 health care provider to adopt, add to or modify any information
30 technology; (6) the general statutes be amended to require each
31 hospital to support, to the extent permitted by federal law, the
32 adoption and implementation of electronic health records systems by
33 independent health care providers who refer patients to the hospital
34 by funding eight-five per cent of the information technology, software
35 and training costs associated with the health care provider's adoption
36 of electronic health records systems and paying for any electronic
37 interface necessary to allow the health care providers' electronic health
38 records systems to communicate with the hospital's system; (7) the
39 general statutes be amended to establish a tax credit to allow hospitals
40 to offset the costs associated with funding the adoption of electronic
41 health records systems by independent health care providers that may
42 be applied against the hospital provider tax, and shall be (A) made on
43 a sliding scale based on the hospital's profitability, and (B) allowed for
44 any hospital that voluntarily provided funding for the adoption of
45 electronic health records systems by independent health care providers
46 within the last three years; (8) the general statutes be amended to
47 require insurers to increase reimbursement to independent health care
48 providers that implement a certified electronic health records system
49 by not less than three per cent; (9) the general statutes be amended to
50 establish a low interest loan and grant program for health care

51 providers to support their adoption of a certified electronic health
52 records system that provides (A) grants of up to ten thousand dollars
53 for health care providers such as primary care providers in rural or
54 high need areas and health care providers that serve a
55 disproportionate number of Medicaid patients, and (B) low interest
56 loans for other eligible health care providers; (10) the State Bond
57 Commission be empowered to authorize the issuance of bonds of the
58 state in accordance with section 3-20 of the general statutes, in
59 principal amounts not exceeding in the aggregate ____ dollars, the
60 proceeds of which shall be deposited into the Health IT Trust Fund to
61 (A) support eHealth Connecticut, (B) provide grants and support
62 programs authorized by this section, and (C) develop the state-wide
63 health information exchange.

Statement of Purpose:

To promote the state-wide implementation of electronic health records among all health care providers and establish a state-wide health information exchange.