



# House of Representatives

General Assembly

**File No. 438**

February Session, 2018

Substitute House Bill No. 5415

*House of Representatives, April 12, 2018*

The Committee on Public Health reported through REP. STEINBERG of the 136th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## **AN ACT CONCERNING THE COLLECTION AND USAGE OF HEALTH EQUITY DATA.**

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

1 Section 1. Section 17b-59a of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2018*):

3 (a) As used in this section:

4 (1) "Electronic health information system" means an information  
5 processing system, involving both computer hardware and software  
6 that deals with the storage, retrieval, sharing and use of health care  
7 information, data and knowledge for communication and decision  
8 making, and includes: (A) An electronic health record that provides  
9 access in real time to a patient's complete medical record; (B) a  
10 personal health record through which an individual, and anyone  
11 authorized by such individual, can maintain and manage such  
12 individual's health information; (C) computerized order entry  
13 technology that permits a health care provider to order diagnostic and

14 treatment services, including prescription drugs electronically; (D)  
15 electronic alerts and reminders to health care providers to improve  
16 compliance with best practices, promote regular screenings and other  
17 preventive practices, and facilitate diagnoses and treatments; (E) error  
18 notification procedures that generate a warning if an order is entered  
19 that is likely to lead to a significant adverse outcome for a patient; and  
20 (F) tools to allow for the collection, analysis and reporting of data on  
21 adverse events, near misses, the quality and efficiency of care, patient  
22 satisfaction and other healthcare-related performance measures.

23 (2) "Interoperability" means the ability of two or more systems or  
24 components to exchange information and to use the information that  
25 has been exchanged and includes: (A) The capacity to physically  
26 connect to a network for the purpose of exchanging data with other  
27 users; and (B) the capacity of a connected user to access, transmit,  
28 receive and exchange usable information with other users.

29 (3) "Standard electronic format" means a format using open  
30 electronic standards that: (A) Enable health information technology to  
31 be used for the collection of clinically specific data; (B) promote the  
32 interoperability of health care information across health care settings,  
33 including reporting to local, state and federal agencies; and (C)  
34 facilitate clinical decision support.

35 (4) "Health equity data" means demographic data, including, but  
36 not limited to, race, ethnicity, primary language, age, gender,  
37 socioeconomic position, sexual minority status, disability,  
38 homelessness or geographic data that can be used to consider health  
39 equity issues.

40 (b) The Commissioner of Social Services, in consultation with the  
41 Health Information Technology Officer, shall (1) develop, throughout  
42 the Departments of Developmental Services, Public Health, Correction,  
43 Children and Families, Veterans Affairs and Mental Health and  
44 Addiction Services, uniform management information, uniform  
45 statistical information, uniform terminology for similar facilities,  
46 uniform electronic health information technology standards and

47 uniform regulations for the licensing of human services facilities, (2)  
48 plan for increased participation of the private sector in the delivery of  
49 human services, (3) provide direction and coordination to federally  
50 funded programs in the human services agencies and recommend  
51 uniform system improvements and reallocation of physical resources  
52 and designation of a single responsibility across human services  
53 agencies lines to eliminate duplication.

54 (c) The Health Information Technology Officer, designated in  
55 accordance with section 19a-755, shall, in consultation with the  
56 Commissioner of Social Services and the Health Information  
57 Technology Advisory Council, established pursuant to section 17b-59f,  
58 implement and periodically revise the state-wide health information  
59 technology plan established pursuant to this section and shall establish  
60 electronic data standards to facilitate the development of integrated  
61 electronic health information systems for use by health care providers  
62 and institutions that receive state funding. Such electronic data  
63 standards shall: (1) Include provisions relating to security, privacy,  
64 data content, structures and format, vocabulary and transmission  
65 protocols; (2) limit the use and dissemination of an individual's Social  
66 Security number and require the encryption of any Social Security  
67 number provided by an individual; (3) require privacy standards no  
68 less stringent than the "Standards for Privacy of Individually  
69 Identifiable Health Information" established under the Health  
70 Insurance Portability and Accountability Act of 1996, P.L. 104-191, as  
71 amended from time to time, and contained in 45 CFR 160, 164; (4)  
72 require that individually identifiable health information be secure and  
73 that access to such information be traceable by an electronic audit trail;  
74 (5) be compatible with any national data standards in order to allow  
75 for interstate interoperability; (6) permit the collection of health  
76 information in a standard electronic format; and (7) be compatible with  
77 the requirements for an electronic health information system.

78 (d) The Health Information Technology Officer shall, within existing  
79 resources and in consultation with the State Health Information  
80 Technology Advisory Council: (1) Oversee the development and

81 implementation of the State-wide Health Information Exchange in  
82 conformance with section 17b-59d; (2) coordinate the state's health  
83 information technology and health information exchange efforts to  
84 ensure consistent and collaborative cross-agency planning and  
85 implementation; and (3) serve as the state liaison to, and work  
86 collaboratively with, the State-wide Health Information Exchange  
87 established pursuant to section 17b-59d to ensure consistency between  
88 the state-wide health information technology plan and the State-wide  
89 Health Information Exchange and to support the state's health  
90 information technology and exchange goals.

91 (e) The state-wide health information technology plan, implemented  
92 and periodically revised pursuant to subsection (c) of this section, shall  
93 (1) enhance interoperability to support optimal health outcomes and  
94 include, but not be limited to [(1)] (A) general standards and protocols  
95 for health information exchange, and [(2)] (B) national data standards  
96 to support secure data exchange data standards to facilitate the  
97 development of a state-wide, integrated electronic health information  
98 system for use by health care providers and institutions that are  
99 licensed by the state. Such electronic data standards shall [(A)] (i)  
100 include provisions relating to security, privacy, data content,  
101 structures and format, vocabulary and transmission protocols, [(B)] (ii)  
102 be compatible with any national data standards in order to allow for  
103 interstate interoperability, [(C)] (iii) permit the collection of health  
104 information in a standard electronic format, and [(D)] (iv) be  
105 compatible with the requirements for an electronic health information  
106 system; and (2) enhance the ability to collect and utilize health equity  
107 data to improve health outcomes and include, but not be limited to,  
108 general standards with respect to collection, storage and usage of  
109 health equity data. Such standards shall (A) include provisions relating  
110 to security, privacy, data content, structures and format and  
111 vocabulary, (B) be compatible with any national data standards in  
112 order to allow for interstate interoperability, (C) permit the collection  
113 of health equity data in a standard electronic format, and (D) be  
114 compatible with the requirements for an electronic health information  
115 system.

116 (f) Not later than February 1, 2017, and annually thereafter, the  
 117 Health Information Technology Officer, in consultation with the State  
 118 Health Information Technology Advisory Council, shall report in  
 119 accordance with the provisions of section 11-4a to the joint standing  
 120 committees of the General Assembly having cognizance of matters  
 121 relating to human services and public health concerning: (1) The  
 122 development and implementation of the state-wide health information  
 123 technology plan and data standards, established and implemented by  
 124 the Health Information Technology Officer pursuant to this section; (2)  
 125 the establishment of the State-wide Health Information Exchange; and  
 126 (3) recommendations for policy, regulatory and legislative changes and  
 127 other initiatives to promote the state's health information technology  
 128 and exchange goals.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2018	17b-59a

**PH** Joint Favorable Subst.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

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***OFA Fiscal Note******State Impact:*** None***Municipal Impact:*** None***Explanation***

This bill, which expands State-Wide Health Information Technology Plan requirements, does not result in a fiscal impact to the state or municipalities. The Office of Health Strategy has the necessary expertise to accommodate this expansion.

***The Out Years******State Impact:*** None***Municipal Impact:*** None

**OLR Bill Analysis****sHB 5415*****AN ACT CONCERNING THE COLLECTION AND USAGE OF HEALTH EQUITY DATA.*****SUMMARY**

This bill requires the statewide health information technology plan to (1) enhance the ability to collect and use health equity data to improve health outcomes and (2) include general standards on collecting, storing, and using such data. Under the bill, “health equity data” is demographic data, including race, ethnicity, primary language, age, gender, socioeconomic position, sexual minority status, disability, homelessness, or geographic data, that can be used to consider health equity issues.

The bill requires the data standards to:

1. address data security, privacy, content, structures, format, and vocabulary;
2. be compatible with (a) any national data standards, to allow for interstate interoperability, and (b) the requirements for an electronic health information system; and
3. allow the collection of health equity data in a standard electronic format.

Under existing law, the state’s health information technology officer must implement and periodically revise the statewide health information technology plan. He must do so in consultation with the social services commissioner and the Health Information Technology Advisory Council.

Existing law also requires the officer, in consultation with the

council, to annually report to the Human Services and Public Health committees on the development and implementation of the statewide health information technology plan and related data standards.

EFFECTIVE DATE: July 1, 2018

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 17 Nay 9 (03/26/2018)