



MINNESOTA ACADEMY
of OPHTHALMOLOGY

5865 Neal Avenue North, #217
Stillwater, MN 55082

March 25, 2022

Dear House Health Policy and Finance Committee Members:

On behalf of the Minnesota Academy of Ophthalmology and the 446 ophthalmologists across Minnesota, we wanted to share our concerns regarding the direction and intent of HF4110. As written, the bill would unnecessarily require any physician who performs eye surgery to maintain the health records of each patient on whom the physician performed eye surgery for a period of sixty years.

Currently, Minnesota law is limited in its requirements for medical record retention. Under Minn. Stat. § 145.32, only hospitals are required to maintain an “individual permanent medical record” for an indefinite period of time yet only require retention of other portions of an individual’s medical record for seven years for adults or for seven years after a minor reaches the age of majority. This requirement does not apply to individual physicians or to other medical settings outside of a hospital. For those providers who are participating in the state’s Medicaid program, Minnesota Administrative Rule 9505.0205 only requires a provider to maintain medical, and health care records for a period of five years.

Importantly, patients are currently able to request a copy of their medical records from their providers. Medical and surgical practices across the state regularly work with individual patients to provide timely copies of those records. If an individual patient desires to maintain a copy of their medical records for a period of sixty years or more, they have every ability to request those records within the existing five or seven year time periods currently required under Minnesota law.

HF4110 would require the records for eye procedures to be maintained to a different standard than all other types of medical and surgical procedures, far exceeding any existing timeline currently required in law. The bill would mandate all physicians who perform ophthalmic surgery – including ophthalmologists, otolaryngologists, plastic and reconstructive surgeons, oral and maxillo-facial surgeons, and perhaps other specialists – to maintain a health records system through which they would be statutorily required to discern and maintain records for a specific subset of procedures, for over half a century. The administrative burden to single out a group of procedures based on an anatomic region of the body is cumbersome, if not onerous, unnecessarily contributing to higher costs of medical care.

While we applaud every patient’s desire to maintain a record of their medical history, we question why there is a singular focus on the requirements for physicians to maintain the health records for a small subset of surgical procedures that is without practical evidence of benefit for patient care. As an example, any patient who has previously undergone LASIK (refractive) surgery and requires a measurement for future intraocular lens power calculations is not dependent on the prior, historical, or prior medical record information from an original LASIK procedure. It is important to note that an accurate intraocular lens calculation is made using standard measurement technology that will determine a proper lens power without any reliance on a historical surgical note. Thus, the original basis for this legislation must be clarified.

In summary, there is no compelling public health benefit that justifies the increased administrative burden to physicians to retain patient records, with a singular focus on eye surgeries, for a sixty-year time period. Because our first priority as ophthalmologists is the care and safety of our patients, especially with respect to their ocular health, we would be happy to continue to discuss a solution that finds the right balance between best clinical practices, availability of health records for ongoing care, and the administrative costs of eye health care.

We appreciate the opportunity to share our concerns and welcome the ability to continue to engage with you and your colleagues on issues impacting the eye health of patients across Minnesota.

Sincerely,

John Chen, MD, PhD, President