



E-Health Advisory Committee Extension

Summary

The e-Health Advisory Committee is scheduled to sunset in 2015. This bill extends the work of the advisory committee to 2021 in recognition of the continuing evolution of e-health in Minnesota and the importance of public-private collaboration to ensure that clinical data can be exchanged safely and effectively among health care providers for improving quality of care and care coordination.

Background

Since the establishment of the Minnesota e-Health Initiative in 2004 under M.S. 62J.495, health care providers have made great strides in the use and exchange of electronic health records. Seamless, secure electronic exchange of health information has given providers the right information about patients at the right time to improve quality and patient safety, reduce costs, and improve public health.

The Minnesota e-Health Advisory Committee, a key component of the Minnesota e-Health Initiative, has been the cornerstone for building consensus, providing guidance, and advising the Commissioner of Health on policies and common action to ensure secure, effective use of electronic health records and health information exchange to advance care coordination and patient safety. Made up of 25 key Minnesota stakeholders representing diverse groups including consumers, nurses, physicians, dentists, pharmacists, payers, public health, vendors, informaticians, Chief Information Officers, researchers, and others, its many accomplishments

and contributions have been critical to Minnesota's success in advancing e-Health.

Proposal

Under this proposal, the Minnesota e-Health Advisory Committee, currently scheduled to expire on June 30, 2015, would be extended until June 30, 2021.

Rationale

While there has been significant progress in adoption and safe, effective use of electronic health records in many health care settings, continued work is needed to assist providers across the continuum of care to meet an expanding list of federal requirements for electronic health records and health information exchange and meet the needs of complex patients requiring coordination across a wide range of partner organizations and settings. Many of the partners crucial to caring for the health of complex patients – behavioral health, long term care/post-acute care, social services, and local public health, among others – have been left behind, resulting in less effective, fragmented care across settings and poorer outcomes for patients who would otherwise benefit.

The continuation of the Advisory Committee through 2021 will address unmet needs and allow it to continue its highly regarded work, enabling further consensus and guidance to ensure that clinical data can be exchanged safely and effectively among health care providers and results in coordinated, high quality care.