SB 286 Nelson 5/18/2009 (Kolkhorst, J. Davis, D. Howard)

SUBJECT: Electronic health passports for certain acute-care Medicaid recipients

COMMITTEE: Public Health — favorable, without amendment

VOTE: 8 ayes — Kolkhorst, Naishtat, Coleman, J. Davis, Gonzales, Laubenberg,

McReynolds, Zerwas

0 nays

3 absent — Hopson, S. King, Truitt

SENATE VOTE: On final passage, March 19 — 31-0, on Local and Uncontested Calendar

WITNESSES: For — (Registered, but did not testify: Kathy Barber, Texas Federation of

Drug Stores; Marisa Finley, Scott & White Center for Healthcare Policy; Karen Reagan, Walgreens; Denise Rose, Texas Hospital Association;

Katherine Zackel, Texans Care for Children)

Against — None

On — Kathleen Costello, Kay Ghahremani, Health and Human Services

Commission

BACKGROUND: In 2005, the 79th Legislature enacted SB 6 by Nelson, which revised the

system of care for children in the Child Protective Services system. SB 6 required the Health and Human Services Commission (HHSC) to develop for each child in the foster care system an electronic health passport that

contains health history and is accessible to the child's health care

providers.

DIGEST: SB 286 would require HHSC to develop and provide, with the assistance

of health care providers experienced with health information technology or

electronic health records, a health passport for acute-care Medicaid

patients enrolled in managed care. The commission would have to provide the health passport as soon as possible after September 1, 2009, to each eligible Children's Medicaid recipient and provide a health passport to each eligible Medicaid recipient by September 1, 2014. The information

contained in the health passport could include:

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- the name and address of health care providers;
- records from doctors visits and of immunizations;
- information on medications prescribed; and
- a history of known health problems and allergies.

The system used to access the health passports would have to be secure and to keep confidential the person's health records, including through adherence to privacy provisions of the federal Health Insurance Portability and Accountability Act of 1996.

HHSC would provide training or instructional materials about health passports to health care providers and Medicaid recipients who received health passports.

The commission would make printed or electronic health passport information available to a former Medicaid recipient or the parent or guardian of a former Children's Medicaid recipient for 90 days after the person had lost eligibility for Medicaid.

HHSC would make the health passport established for a child in the foster care system transferable between the Medicaid program and the foster care system.

HHSC could use or expand systems or technologies developed for the Medicaid health passport for the purpose of certain electronic communications among the commission, operating agencies, and participating health providers, if cost-effective and allowed by federal law.

HHSC would seek a federal waiver or authorization if necessary to implement any of the provisions of this bill.

The bill would take effect September 1, 2009.

SUPPORTERS SAY:

SB 286 would enhance the efficiency of the Medicaid program by establishing electronic health passports for certain Medicaid recipients to provide a single source for accessing a Medicaid patient's health history. Paper medical histories would not have to be reproduced or requested each time a patient saw a new health care provider. The bill would reduce avoidable medical errors because doctors would have access to a patient's medical allergies or health problems that would prompt a doctor to avoid certain potentially harmful medications or treatments. Doctors also could

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continue courses of medical treatment that a Medicaid patient's passport showed were effective. In emergency situations, doctors would have access to a person's health history to link the symptoms they were assessing to any existing medical condition.

The bill could cut costs to the Medicaid program by minimizing the occurrence of duplicate diagnostic procedures. The bill would establish the same requirements for the security of confidential information that were implemented for the health passport provided to foster children. The bill also would establish a reasonable 90-day window, which would provide more than adequate time, for any former Medicaid recipients who wanted the contents of their health passport to obtain the information.

OPPONENTS SAY:

SB 286 should not limit to 90 days the amount of time health passport information would be made available to a former Medicaid recipient after the person had lost eligibility for Medicaid. No such limit exists with the health passport provided to children exiting the foster care system. The health information contained in a passport could be invaluable to former Medicaid patients in maintaining their health and continuing to pursue effective treatments.