

RESOLUTION 47-08A

Title: A Call to Further Recognize and Expedite the Nationwide Health Information Network

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Referred to: Reference Committee A

House Action: Referred to the Board for Study

Whereas, access to vital health care documents on any patients current and past medical conditions is essential, especially in acute care situations, and

Whereas, in order for physicians to provide their patients with the proper care; errors and duplication of services have occurred in patient care because of a lack of communication of diagnostic information, current medications, and past health history within the health care system,¹ and

Whereas, significant resources are spent on duplicative diagnostic tests, prescription errors, redundant insurance claims, and liability law suits that occur as a result of lack of information,² and

Whereas, designing an interoperable network to facilitate the sharing of essential health care information from differing medical centers will improve patient care and cost effectiveness across the health care system and provide physicians with a more efficient way of practicing medicine, especially in emergency situations,³ and

Whereas, such systems will seamlessly process and incorporate incoming data from existing electronic medical records at multiple health care facilities as defined by the concept of interoperability,⁴ and

Whereas, the Veteran's Administration hospital system already has taken it upon itself to design such a program in order to link 5.3 million patients' records for easy access and adequate care through a universal database that has created a cost-saving, safe, and effective central link between 155 hospitals, 881 clinics, 135 nursing homes and 45 rehabilitation centers nationwide,⁵ and

Whereas, this interoperable network will assist with circulation of records and images and provide physicians with a tracking record of current

and past medications to enable safer prescription processing and more efficient documentation,⁶ and

Whereas, this interoperable network will enable catalog development of a multiuser database available to all health care providers at minimal or no cost to their establishment or place of work, and

Whereas, this universal program will have a template form with spots created for noting critical test results, interview information, medication requests, and images compatible for all viewers who may be accessing the program, and

Whereas, the National Health Information Network is a network of networks built on top of an internet platform that securely connects consumers, providers, and others who use health related data and services while protecting the confidentiality of health information with shared architecture, processes, and procedures to interconnect health information and the professionals who use it,⁷ and

Whereas, the AMA already supports the development and use of national health information technology (H-478.995) and plans to support all efforts necessary to expedite the implementation of this process (D-478.995), and

Whereas, policy still must be created to address and mandate centralized collection and access to all new and existing electronic medical records (EMR) files, and

Whereas, efforts through the National Coordinator for Health Information Technology are developing, maintaining, and directing the implementation of Health and Human Services strategic plan to guide the nationwide implementation of interoperable health information technology in both the public and private health care sectors by the year 2014,⁸ and

Whereas, the most feasible way to implement a universal electronic medical record program associated with an interoperable network is to unite current and future planned corporate and government based production elements and that without government input, corporate competition to develop proprietary systems such as Google Health and Microsoft Health Vault will not result in successful achievement of true interoperability,⁹ and

Whereas, the government's duties in relation to the database will pertain to implementation, maintenance, and system user oversight, and

Whereas, as the number of providers who accept e-medicine reaches critical mass, more third party payers, including Medicare, are likely to

recognize its efficiencies and include reimbursements for it in contracts with providers,¹⁰ and

Whereas, in an attempt to alleviate the cost barrier, on August 8, 2006, the Centers for Medicaid and Medicare Services and the Office of the Inspector General simultaneously established rules creating an exception to the Physician's Self-Referral Stark Law and a new safe harbor to the anti-kickback statute, which were intended to support and promote physician adoption of e-prescribing and EMR technology,¹¹ and

Whereas, the number one goal of all physicians is always to provide their patients with the best quality of life and care, requiring negotiation between a multitude of decisions, considerations, numbers, possibilities, and warnings, but that without the proper knowledge, tools, and information available at the point of service wherever that may be, health care providers are limited in what they can accomplish; therefore be it

RESOLVED: That MSMS recognize the efforts of the U.S. Department of Health and Human Services and the National Health Information Network (NHIN) and push for an accelerated implementation of the NHIN program earlier than 2014; and be it further

RESOLVED: That MSMS support an initiative to unite the development of HIPAA-compliant electronic health information software between government and for-profit corporations and encourage interoperability; and be it further

RESOLVED: That the Michigan Delegation to the AMA ask the AMA to recognize the efforts of the U.S. Department of Health and Human Services and the NHIN and push for an accelerated implementation of the NHIN program earlier than 2014; and be it further

RESOLVED: That the Michigan Delegation to the AMA ask the AMA to support an initiative to unite the development of HIPAA-compliant electronic health information software between government and for-profit corporations and encourage interoperability.

WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE

¹ Connecting for Better Health. San Jose, CA.: Cisco Systems – Medical Grade Network, 1992-2006. Available at:

www.berbee.com/public/CVA/Medical_Grade_Network_WP.pdf

² The Real Cost of Medical Mistakes. Lori Widmer. Risk and Insurance.

Available at: http://findarticles.com/p/articles/mi_m0BJK/is_4_12/ai_73327463

³ Electronic Medical Records. BusinessWire. Available at:

<http://www.businesswire.com/emk/medicallogic/backgroundunder.htm>

⁴ Health Information Exchange Policy Issues. Agency of Healthcare Research and Quality National Resource Center. (AHRQ)

http://healthit.ahrq.gov/portal/server.pt?open=514&objID=5554&mode=2&holderDisplayURL=http://prodportallb.ahrq.gov:7087/publishedcontent/publish/communities/k_o/knowledge_library/key_topics/health_briefing_04052006112504/health_information_exchange_policy_issues.html

⁵ VA Takes the Lead in Paperless Care; Computerized Medical Records Promise Lower Costs and Better Treatment. David Brown. Washington Post. April 10, 2007. HE01.

⁶ Elimination Paper, Improving Efficiency. Dan Kaelin. Vascular Surgery Associates. Cerner Corporation. www.cerner.com/powerworks

⁷ Testing and Demonstrations of the Nationwide Health Information Network Trial Implementations. Office of the Coordinator for Health Information Technology. February 20, 2008. <http://www.hhs.gov/healthit/NoFA022008.pdf>

⁸ Office of the National Coordinator: Mission. Human Health Services.

<http://www.hhs.gov/healthit/onc/mission/>

⁹ Get Ready to Google-ize your Health Records. Elinor Mills. News Blog. February 27, 2008. http://www.news.com/8301-10784_3-9880909-7.html?tag=recentPosts

¹⁰ Communication between Physicians and Patients in the Era of E-Medicine. John H. Stone. New England Journal of Medicine. June 14, 2007. 356;24

¹¹ HIT Issues and Debates. American Medical Association Issues Website. November 19 2007. <http://www.ama-assn.org/ama/pub/category/16694.html#5>