

E-Healthcare Policy in 2018

Nora Belcher, Executive Director Texas e-Health Alliance May 23rd, 2018



Background- Nora Belcher

- 20+ years in public policy with an emphasis on health care technology
- Senior leadership roles in Texas Medicaid and the Governor's Office
- Involved in starting the SXSW Health and MedTech Expo
- Won computer programming contest in the 1980s and still has the trophies



Background

What is the Texas e-Health Alliance?

- State's leading advocate, from local communities to the national level, for the use of health information technology to improve the health system for patients
- 501(c)6 non-profit started in 2009
- Serves as a trade association for HIT companies
 - As such, cannot recommend or endorse specific products



Role of the Patient is Changing

Health information technology landscape is generally thought of as lagging behind the Internet in terms of

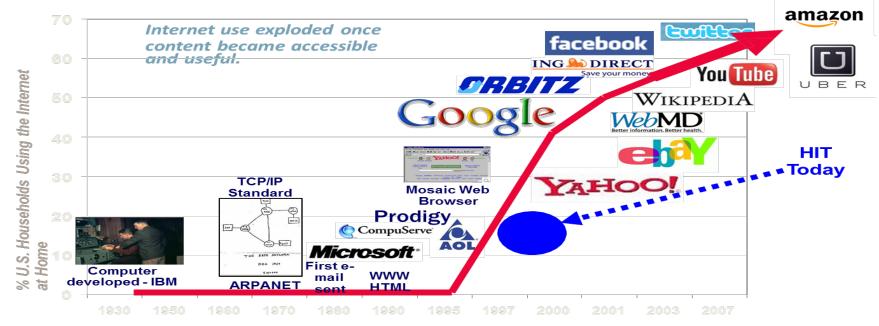
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Internet Revolution: Value to Users



Today, health care information technology (HIT) is at the "2000" of the Internet age

Source: U.S. Census Bureau, Population Division, Education & Social Stratification Branch, "Reported Internet Usage for 5/18/2018 Households, by Selected Householder Characteristics,:2007"; Texas eHealth Alliance: Nora Belcher



Presentation Outline

- Update on 2017 Session
 - Passed Bills
 - Bills that Didn't Pass
 - Special Session/Legislative Interim and Hearings



"Tele" Bills

Bill #	Author	Subject
SB 1107	Schwertner	Direct to consumer telemedicine, insurance coverage for telemedicine
HB 1697	Price	Pediatric access grant program for rural areas (teleNICU)
SB 922	Buckingham	Telemedicine in schools (incl. charter) for SHARS
SB 1633	Perry	Telepharmacy for rural areas



Delivery System Bills

Bill #	Author	Subject
HB 10	Price	Mental health treatment
HB 1296	Frullo	Prescription drug synchronization
HB 2425	Price	Designated caregiver- discharge instructions



Cybersecurity Bills

Bill #	Author	Subject
HB 8	Capriglione	Cybersecurity for state agencies
HB 9	Capriglione	Cybercrime
HB 1861	Elkins	Confidentiality of computer security incidents under open records laws
SB 564	Campbell	Allows non-open meetings discussions of IT security by government entities



Legislative Interim

- HHSC e-Health Advisory committee meets quarterly
 - Meetings are broadcast online
 - Covers HIE and telemedicine issues
- SB 1107 rulemaking is complete at the Texas Medical Board and has begun at Medicaid
- HIE language promoting CCD exchange in the terms and conditions for Medicaid waiver



Senate HHS Interim Charge-Harvey

Review the state's response to Hurricane Harvey with a focus on public health efforts at the local and state level. The review should include an analysis of the state and local response related to vector control, immunization needs, utilization of health-related volunteers, adequacy of an emergency medical network, evacuation of vulnerable populations from state operated or regulated facilities, and coordination between all levels of government. Recommend any legislative changes necessary to improve public health response and coordination during and after a disaster.



House Appropriations Interim Charge- Harvey

• Examine the use of federal funds by state agencies responding to the effects of Harvey and identify opportunities to maximize the use of federal funds to reduce the impact of future natural disasters. Also identify the need for state resources to respond to Hurricane Harvey relief and recovery efforts, as well as opportunities for state investment in infrastructure projects that will reduce the impact of future natural disasters.



House Committee on Government Transparency and Operations Interim Charges

- 1. Examine the role of technology in disaster preparedness and the response to Hurricane Harvey and future natural disasters. Review and make recommendations to drive innovation and efficiency and evaluate whether there are any regulatory impediments to collaboration between the public and private sectors.
- 5. Study how state agencies can share knowledge and practices, reduce duplicative data gathering, and conduct business in a more efficient manner through interagency data sharing. Review best practices to provide the public with more transparency and access to government information.



Senate HHS Interim Charge-Substance Abuse/Opioids

Review substance use prevention, intervention, and recovery programs ۲ operated or funded by the state and make recommendations to enhance services, outreach, and agency coordination. Examine the adequacy of substance use, services for pregnant and postpartum women enrolled in Medicaid or the Healthy Texas Women Program and recommend ways to improve substance use related health outcomes for these women and their newborns. Examine the impact of recent legislative efforts to curb overprescribing and doctor shopping via the prescription monitoring program and recommend ways to expand on current efforts.



House Select Committee on Opioids and Substance Abuse

- 3. Review policies and guidelines used by state agencies to monitor for and prevent abuse of prescription drugs in state-funded or state-administered programs. Include in this review policies implemented by the Texas Medicaid Program, the Division of Workers' Compensation of the Texas Department of Insurance, the Teacher Retirement System, and the Employee Retirement System. Make recommendations regarding best practices.
- 4. Monitor and evaluate the implementation of legislation passed by the 85th Legislature regarding the Prescription Monitoring Program. In addition, review the prescribing of addictive drugs by physicians and other health care providers within various geographic regions of this state. Determine the role of health care professionals in preventing overutilization and diversion of addictive prescriptions. Provide recommendations that will improve efforts to prevent overutilization and diversion of addictive prescription of addictive prescriptions.



House Committee on Public Health

5. Review opportunities to improve population health and health care delivery in rural and urban medically underserved areas. Identify potential opportunities to improve access to care, including the role of telemedicine. In the review, identify the challenges facing rural hospitals and the impact of rural hospital closures.





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