



Federal Employees Electronic Personal Health Records Act of 2006

Introduced by

Senators Tom Carper (D-DE) and George Voinovich (R-OH)

Legislative History of Bill

On Wednesday, September 6, 2006, Senators Tom Carper (D-DE) and George Voinovich (R-OH) introduced S. 3846, the “Federal Employees Electronic Personal Health Records (FEEPHR) Act of 2006.” The bill was referred to the Senate Committee on Homeland Security and Governmental Affairs for action. The House Government Reform Subcommittee on the Federal Workforce and Agency Organization passed a substitute amendment to H.R. 4589 to create electronic health records for federal beneficiaries. HIMSS has endorsed H.R. 4589.

Like S. 3846, H.R. 4589 proposes leveraging the federal government as a purchaser and provider of health care to improve the quality and delivery of care for the rest of the country. However, the bills differ in that beginning no later than the fourth contract year after enactment this House demonstration will provide valuable information by leveraging the claims data, technology, and capabilities of health plans to improve health care decisions by patients and providers through electronic health records. H.R. 4589 now heads to the full U.S. House Committee on Government Reform for consideration.

Key Provisions of S. 3846:

- Requires contracted health insurance carriers to provide an electronic personal health record for individuals and family members enrolled in Federal Employee Health Benefits Plans.
- Requires FEEPHRs to assure interoperability through compliance with standards approved by the Office of the National Coordinator for Health Information Technology
- FEEPHRs require contracted carriers to assure privacy and confidentiality through various means, as well as audit trail capabilities.
- Requires carriers to leverage claims data for clinical care.
- Provides an opt-out feature.
- Provides for the electronic transfer of data from one health plan to another.
- Enables the individual or family member to add supplemental information to the claims data from either the patient or provider perspective.

S. 3846: Federal Employees Electronic Personal Health Records Act

Weaknesses Identified with S. 3846:

- Page 3: Lines 1-3: Allows for the data to be used for the collection of clinically specific data, but does not provide parameters for doing so.
- Page 4: Lines 18-19: Provides for termination of the ePHR use, but does not indicate what happens to the data once the contract is terminated.
- Page 6: Line 19-20: A provision is made to authenticate the identity of the individual accessing the information, but it does not state specifically how to accomplish.
- Page 7: Lines 15-21: A provision is made to provide for the electronic transfer of the contents of an electronic personal health record to another electronic personal health record under a different health benefits plan, but it does not state how this will be accomplished.

HIMSS Advocacy Legislation/Regulation Review Task Force Discussion/Recommendation on S. 3846

On Friday, September 1, 2006, the HIMSS Legislation and Regulation Review Task force reviewed the draft legislation. The group noted that while the industry is working diligently to develop electronic health records as the ultimate solution, patient advocates on the task force noted that this bill makes currently-available and rich claims data readily available for life-saving patient care. The group noted that a number of private health insurance carriers, already recognizing the value of their claims data for clinical care, are developing similar systems.

Proposed HIMSS Board Position on S. 3846

S. 3846 was vetted through the HIMSS position statement approval process and it was agreed by the Board of Directors that for the near term, HIMSS will take *no position* on this legislation, but will continue to monitor it and work with its sponsors on Capitol Hill.