

**House Bill 2106 — Electronic Medical Records  
PA House Insurance Committee  
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Thank you Chairman DeLuca and members of the Committee for the opportunity for Geisinger Health System to provide comments on HB 2106. My name is Jim Walker, MD and I am Geisinger's Chief Health Information Officer. Geisinger applauds you and your committee for holding hearings on HB 2106 in order to solicit input on this important health information technology legislation. The sponsors of the HB 2106 should be commended for their efforts and commitment to the critical role that health information technology plays in delivering high quality health care to Pennsylvanians in our Commonwealth.

Geisinger Health System serves a population of 2.6 million located in central and northeastern Pennsylvania. We have an electronic health record (EHR) that was implemented 15 years ago with more than 3 million individual patient records. Geisinger has been named as "Most Wired" by Healthcare's Most Wired magazine seven times. We also lead our area's regional electronic health information sharing platform called Keystone Health Information Exchange, with currently ten hospitals and approximately 70 private practices sharing valuable medical information. This secure, patient-approved sharing of information means that our doctors, and more than 1,500 non-Geisinger caregivers can access patient information 24/7 from anywhere-- a remote primary care office, a multi-specialty clinic, an operating room, or at 3:00 am from home. Our patients can also access their own EHR. They can see their lab results, radiology results, request prescription refills, and e-mail their doctors and nurses with questions anytime. And they schedule their own appointments on-line.

I would offer the following comments on HB 2106 to strengthen its efforts:

**(1) Specific language is needed in the bill to protect healthcare organizations and others from expensive requirements that mandate the purchase of new IT systems or create expensive interfaces to proprietary IT systems. I would suggest the following proposed language: "Use standards-based, non-proprietary technology solutions that do not require healthcare organizations or other exchange participants to replace existing health IT systems in order to participate fully in the State health information exchange or other State health IT initiatives."**

**(2) The bill's focus on reducing medical errors has the potential to distract from other important ways to improve care quality (for example, making sure that patients get evidence-based care that is currently being missed.) Under Section 506 (3), I would suggest the following language: "(3) A report on improvements in care quality, including reductions in medical errors and other measures of patient safety, care efficiency, and patient outcomes including access to care and satisfaction with care."**

**(3) The bill makes numerous references to entities in the health care system and serving the interests of entities but in several places it does not specifically include patients and consumers. Consumers and patients should be listed as members of the healthcare team throughout the proposed bill to ensure their valuable input and serving their interests.**

**Again, thank you for the opportunity to comment on this important legislation. Geisinger Health System stands ready to be a resource for you and the Insurance Committee as you continue to consider HB 2106. Please feel free to contact myself if I can be of further assistance on this particular legislation or any other health information technology legislation that is considered by your Committee or by the General Assembly.**