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State of Minnesota
HOUSE OF REPRESENTATIVES

**EIGHTY-SIXTH
SESSION**

HOUSE FILE No. 1814

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The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

1.1 A bill for an act
1.2 relating to state employees; providing criteria for state employees' personal
1.3 electronic health records.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. **STATE EMPLOYEES' PERSONAL HEALTH RECORDS;**
1.6 **CRITERIA.**

1.7 (a) The system that the commissioner of administration selects to provide electronic
1.8 personal health records under Laws 2007, chapter 148, article 2, section 78, must meet the
1.9 following criteria:

1.10 (1) be interoperable and compliant with the ASTM International's Continuum of
1.11 Care Record standards and the Continuity of Care Document standards;

1.12 (2) provide consumer-owned records that are portable among plans, employers,
1.13 and providers;

1.14 (3) not be tethered to or affiliated with a specific health plan or provider;

1.15 (4) support management, storing, and sharing of complete health history information,
1.16 including but not limited to, medical conditions, medication history, surgeries, medical
1.17 procedures, immunizations, lab results, radiology reports, health directives, and other
1.18 medical records;

1.19 (5) provide a calendar or scheduling program that is exportable to other programs;

1.20 (6) enable manual and automatic uploading of health indicators obtained from home
1.21 health devices, such as blood pressure measurements, weight, and blood sugar levels,
1.22 and provide graphing and charts;

2.1 (7) provide maximum consumer control, including ability for consumers to
2.2 customize health education and wellness data links, and screen formatting options, such as
2.3 font size and color scheme;

2.4 (8) provide employees the ability to share their health data electronically with health
2.5 providers and others and give them flexibility and control over which specific health
2.6 data is shared;

2.7 (9) enable each employee to manage multiple personal health record accounts for
2.8 family members under the employee's account;

2.9 (10) provide a range of consumer engagement and decision support tools, such as
2.10 online provider directories and health care cost management tools; and

2.11 (11) support integration of third-party applications, such as health risk assessments
2.12 and wellness and incentive programs.

2.13 (b) The commissioner of administration must contract with a vendor that
2.14 demonstrates the following:

2.15 (1) a plan and ability to provide Minnesota consumers access to data on prescription
2.16 history, immunizations, lab and radiology results, and other medical records;

2.17 (2) a commitment to providing online consumer-owned health records to all
2.18 Minnesotans by 2011;

2.19 (3) a plan to serve rural and underserved communities; and

2.20 (4) a commitment to providing Minnesota-based staff for onsite assistance in
2.21 planning and participation in securing and integrating health data from multiple sources
2.22 for consumers.

2.23 The commissioner of administration must give preference to Minnesota-based
2.24 vendors.

2.25 (c) The selected system must not permit ad-serving cookies, tracking of clicked
2.26 links, and server log commercial data mining without the express consent of the consumer.
2.27 The selected system must require the same privacy terms for all linked services and must
2.28 not share aggregate, de-identified information without express consent from the consumer.

2.29 **EFFECTIVE DATE.** This section is effective the day following final enactment.