



Legislative
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HB 18-1032

**REVISED
FISCAL NOTE**

(replaces fiscal note dated January 19, 2018)

Drafting Number:	LLS 18-0517	Date:	January 29, 2018
Prime Sponsors:	Rep. Kennedy; Thurlow Sen. Fields	Bill Status:	House Health, Insurance, and Environment
		Fiscal Analyst:	Bill Zepernick 303-866-4777 Bill.Zepernick@state.co.us

Bill Topic: ACCESS MEDICAL RECORDS STATE EMS PATIENT CARE DATABASE

Summary of Fiscal Impact:

<input type="checkbox"/> State Revenue	<input type="checkbox"/> TABOR Refund
<input checked="" type="checkbox"/> State Expenditure (<i>minimal</i>)	<input checked="" type="checkbox"/> Local Government (<i>potential</i>)
<input type="checkbox"/> State Transfer	<input type="checkbox"/> Statutory Public Entity

This bill requires the Department of Public Health and Environment to make individualized patient information in the Emergency Medical Services Agency Patient Care Database available to health information networks. This will result in an ongoing, minimal state workload increase, and may increase costs and workload for local governments.

Appropriation Summary: No appropriation is required.

Fiscal Note Status: The fiscal note reflects the introduced bill. The fiscal note has been revised based on new information concerning the responsibility for the costs of creating data connections between the EMS database and health information networks.

Summary of Legislation

This bill requires the Colorado Department of Public Health and Environment (CDPHE) to make individualized patient information in the Emergency Medical Services Agency Patient Care Database (EMS database) available to health information networks. The CDPHE must contract with health information networks regarding access to EMS patient data, and the sharing of patient data must comply with the federal Health Insurance Portability and Accountability Act (HIPAA).

Background

The EMS database is an information system maintained by a vendor contracted by the CDPHE. EMS providers input data about a patient's condition, services provided, time of services, and other information about an emergency medical situation and response into the database. This data is currently used by the CDPHE to compile and analyze broad-based trends in EMS care in Colorado. The EMS program is funded by a \$2 fee on all vehicle registrations.

Two health information exchanges - Quality Health Network on the Western Slope and the Colorado Regional Health Information Organization (CORHIO) on the Front Range and Eastern Plains - currently operate in Colorado to facilitate the transfer of patient data among hospitals, health care providers, and health plans.

State Expenditures

This bill increases workload in the CDPHE to contract with health information exchanges concerning the sharing of information from the EMS database. Managing these contracts will increase workload for CDPHE staff, which can be accomplished within existing appropriations. It is assumed that these contracts will outline the allowable use of patient data, but will not include any costs to the CDPHE. In addition, it is assumed that health information networks will bear the cost of establishing a data-sharing interface with the EMS database and that no costs will be incurred by the CDPHE for this purpose.

Local Government

Counties, municipalities, and special districts that employ EMS personnel may have costs and workload if they choose to obtain patient data from health information exchanges for training and quality control purposes. Currently, this type of data is not available from the CDPHE under the current operations of the EMS database. Any costs or workload for local governments depends on their decision to obtain this data from a health information exchange.

Effective Date

The bill takes effect August 8, 2018, if the General Assembly adjourns on May 9, 2018, as scheduled, and no referendum petition is filed.

State and Local Government Contacts

Counties	Health Care Policy and Financing
Higher Education	Information Technology
Law	Municipalities