

AMENDMENTS TO UTAH DIGITAL HEALTH

SERVICE COMMISSION ACT

2008 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Ronda Rudd Menlove

Senate Sponsor: _____

LONG TITLE

Committee Note:

The Health and Human Services Interim Committee recommended this bill.

General Description:

This bill amends the Utah Digital Health Service Commission Act.

Highlighted Provisions:

This bill:

- ▶ renames the commission the "Utah Digital Health Service Committee";
- ▶ amends the appointment of the members;
- ▶ requires the chairperson of the committee to report to the executive director of the

Department of Health; and

- ▶ amends the duties of the committee, including requires the committee to:

- advise and make recommendations to the department concerning patient privacy related policies; and

- place an emphasis on helping rural health care providers and special populations.

Monies Appropriated in this Bill:

None

Other Special Clauses:

None



28 **Utah Code Sections Affected:**

29 AMENDS:

30 **26-9f-102**, as last amended by Laws of Utah 2004, Chapter 33

31 **26-9f-103**, as last amended by Laws of Utah 2004, Chapter 33

32 **26-9f-104**, as last amended by Laws of Utah 2006, Chapter 121



34 *Be it enacted by the Legislature of the state of Utah:*

35 Section 1. Section **26-9f-102** is amended to read:

36 **26-9f-102. Definitions.**

37 As used in this chapter:

38 (1) [~~"Commission"~~] "Committee" means the Utah Digital Health Service

39 [~~Commission~~] Committee created in Section 26-9f-103.

40 (2) [~~"Telehealth"~~] "Digital health service" means the electronic transfer [~~or~~], exchange

41 [~~of medically~~], or management of related data for diagnosis, treatment, consultation,

42 educational, public health, or other related purposes.

43 Section 2. Section **26-9f-103** is amended to read:

44 **26-9f-103. Utah Digital Health Service Committee.**

45 (1) There is created within the department the Utah Digital Health Service

46 [~~Commission~~] Committee.

47 (2) The governor shall appoint 11 members to the [~~commission with the consent of the~~

48 ~~Senate, as follows:~~] committee from a list of three nominees recommended by the department

49 and the committee as follows:

50 (a) a physician who is involved in [~~telehealth~~] digital health service;

51 (b) a representative of a licensed health care facility or system as defined in Section

52 26-21-2;

53 (c) a representative of rural Utah, which may be a person nominated by an advisory

54 committee on rural health issues created pursuant to Section 26-1-20;

55 (d) a member of the public who is not involved with [~~telehealth~~] digital health service;

56 and

57 (e) seven members who fall into one or more of the following categories:

58 [~~(i) selected from a list of three nominees for each open position submitted by the~~

59 ~~division over health systems improvement; and]~~

60 ~~[(ii) who fall into one or more of the following categories:]~~

61 ~~[(A)]~~ (i) individuals who use ~~[telehealth]~~ digital health service in a public or private
62 institution;

63 ~~[(B)]~~ (ii) individuals who use ~~[telehealth]~~ digital health service in serving medically
64 underserved populations;

65 ~~[(C)]~~ (iii) nonphysician health care providers involved in ~~[telehealth]~~ digital health
66 service;

67 ~~[(D)]~~ (iv) information technology professionals involved in ~~[telehealth]~~ digital health
68 service;

69 ~~[(E)]~~ (v) representatives of the health insurance industry; and

70 ~~[(F)]~~ (vi) ~~[telehealth]~~ digital health service consumer advocates.

71 (3) (a) The ~~[commission]~~ committee shall annually elect a chairperson from its
72 membership. The chairperson shall report to the executive director of the department.

73 (b) The ~~[commission]~~ committee shall hold meetings at least once every three months.
74 Meetings may be held from time to time on the call of the chair or a majority of the board
75 members.

76 (c) Six ~~[commission]~~ committee members are necessary to constitute a quorum at any
77 meeting and, if a quorum exists, the action of a majority of members present shall be the action
78 of the ~~[commission]~~ committee.

79 (4) (a) Except as provided in Subsection (4)(b), a ~~[commission]~~ committee member
80 shall be appointed for a three-year term and eligible for two reappointments.

81 (b) Notwithstanding Subsection (4)(a), the governor shall, at the time of appointment
82 or reappointment, adjust the length of terms to ensure that the terms of ~~[commission]~~
83 committee members are staggered so that approximately 1/3 of the ~~[commission]~~ committee is
84 appointed each year.

85 (c) A ~~[commission]~~ committee member shall continue in office until the expiration of
86 the member's term and until a successor is appointed, which may not exceed 90 days after the
87 formal expiration of the term.

88 (d) Notwithstanding Subsection (4)(c), a ~~[commission]~~ committee member who fails to
89 attend 75% of the scheduled meetings in a calendar year shall be disqualified from serving.

90 (e) When a vacancy occurs in membership for any reason, the replacement shall be
91 appointed for the unexpired term.

92 (5) (a) Board members who are not government employees may not receive
93 compensation or benefits for the services, but may receive per diem and expenses incurred in
94 the performance of their official duties at rates established by the Division of Finance under
95 Sections 63A-3-106 and 63A-3-107.

96 (b) A [~~commission~~] committee member may decline to receive per diem and expenses
97 for service to the [~~commission~~] committee.

98 (6) The department shall provide informatics staff support to the [~~commission~~]
99 committee.

100 (7) The funding of the [~~commission~~] committee shall be a separate line item to the
101 department in the annual appropriations act.

102 Section 3. Section ~~26-9f-104~~ is amended to read:

103 **26-9f-104. Duties and responsibilities.**

104 The [~~commission~~] committee shall:

105 (1) advise and make recommendations on [~~telehealth~~] digital health service issues to
106 the department[~~;~~ the Utah Technology Commission,] and other state entities;

107 (2) advise and make recommendations on digital health service related patient privacy
108 to the department;

109 [~~(2)~~] (3) promote collaborative efforts to establish technical compatibility, uniform
110 policies, and privacy features to meet legal, financial, commercial, and other societal
111 requirements;

112 [~~(3) serve as a clearinghouse on emerging telehealth technologies;~~]

113 (4) identify, address, and seek to resolve the legal, ethical, regulatory, financial,
114 medical, and technological issues that may serve as barriers to [~~telehealth~~] digital health
115 service;

116 (5) explore and encourage the development of [~~telehealth~~] digital health service
117 systems as a means of reducing health care costs and increasing health care quality and access,
118 [~~including~~] with emphasis on assisting rural health care providers and special populations with
119 access to or development of electronic medical records;

120 (6) seek public input on [~~telehealth~~] digital health service issues; and

121 ~~[(7) educate the public, state officials, and the health care community on telehealth~~
122 ~~issues; and]~~

123 ~~[(8) (7) in consultation with the department,~~ advise the governor and Legislature on:

124 (a) the role of ~~[telehealth]~~ digital health service in the state;

125 (b) the policy issues related to ~~[telehealth]~~ digital health service;

126 (c) the changing ~~[telehealth]~~ digital health service needs and resources in the state; and

127 (d) state budgetary matters related to ~~[telehealth]~~ digital health service.

Legislative Review Note
as of 10-17-07 2:44 PM

Office of Legislative Research and General Counsel

H.B. 24 - Amendments to Utah Digital Health Service Commission Act

Fiscal Note

2008 General Session

State of Utah

State Impact

Enactment of this bill will not require additional appropriations.

Individual, Business and/or Local Impact

Enactment of this bill likely will not result in direct, measurable costs and/or benefits for individuals, businesses, or local governments.
