

S 1685

Behavioral Health Information Technology Coordination Act of 2013

Congress: 113 (2013–2015, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Nov 12, 2013

Current Status: Read twice and referred to the Committee on Finance.

Latest Action: Read twice and referred to the Committee on Finance. (Nov 12, 2013)

Official Text: <https://www.congress.gov/bill/113th-congress/senate-bill/1685>

Sponsor

Name: Sen. Portman, Rob [R-OH]

Party: Republican • **State:** OH • **Chamber:** Senate

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Nov 12, 2013

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
113 S 1517	Related bill	Sep 18, 2013: Read twice and referred to the Committee on Finance.
113 HR 2957	Related bill	Aug 2, 2013: Referred to the Subcommittee on Health.

Behavioral Health Information Technology Coordination Act of 2013 - Amends the Public Health Service Act to include as health care providers behavioral and mental health professionals, substance abuse professionals, psychiatric hospitals, certain community mental health centers, and residential or outpatient mental health or substance abuse treatment facilities.

Amends title XVIII (Medicare) of the Social Security Act (SSA), with respect to incentives for meaningful use of certified electronic health records (EHR) technology under the pay schedule for physician's services, to include as additional eligible professionals clinical psychologists providing qualified psychologist services. Subjects any additional eligible professionals, including those under a MedicareAdvantage (MA) plan, to reductions in incentive payments after a certain date for failure to be a meaningful EHR user.

Makes inpatient psychiatric hospitals eligible for payment for inpatient hospital services.

Amends SSA title XIX (Medicaid) to treat as Medicaid providers: (1) public and certain private hospitals that are principally psychiatric hospitals, (2) certain community mental health centers, and (3) certain residential or outpatient mental health or substance abuse treatment facilities.

Makes eligible professionals under the Medicaid program certain clinical psychologists providing qualified psychologist services.

Authorizes a covered entity to submit to a patient safety organization information on electronic health record (EHR)-related adverse events with respect to certified EHR technology.

Specifies covered entities as certain EHR users, health information exchange entities, and health care professionals who use EHR technology.

Defines an EHR-related adverse event as a defect, malfunction, or error in the certified health information technology or EHR used by a provider, or in the input or output of data maintained through such technology or record, that results or could reasonably result in harm to a patient.

Limits electronic discovery (e-discovery) in any health care lawsuit against a covered entity relating to an Reallotted adverse event involving certified EHR technology to information: (1) related to that event, and (2) from the period in which the event occurred.

Prohibits a claimant from commencing a lawsuit more than three years after the manifestation of injury or one year after the claimant discovers, or should have discovered, the injury, whichever occurs first. Requires tolling of this limitation, however, to the extent that the claimant is able to prove: (1) fraud; (2) intentional concealment; or (3) the presence of a foreign body, with no therapeutic or diagnostic purpose or effect, in the injured person.

Subjects each party to such a lawsuit which is not a covered entity to proportionate liability only.

Allows punitive damages against a covered entity only upon proof by clear and convincing evidence that the entity acted with reckless disregard for the claimant's health or safety.

Shields covered entities, employees, agents, and representatives from civil liability for libel or slander arising from information or entries made in certified EHR technology, or transferred to another eligible provider, if the information, entries, or transfer were made in good faith and without malice.

Actions Timeline

- **Nov 12, 2013:** Introduced in Senate
- **Nov 12, 2013:** Read twice and referred to the Committee on Finance.