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## State of Nevada Senate & Assembly

June 14, 2024

Electronic Health Information Advisory Group  
Nevada Department of Health and Human Services  
Division of Health Care Financing and Policy

Dear Dr. Southard and Members of the Electronic Health Information Advisory Group,

I am writing to you as the Chair of the Joint Interim Committee on Health and Human Services to discuss the proposed regulatory changes under the purview of the Electronic Health Information Advisory Group, following the passage of Assembly Bill 7 (AB 7).

First and foremost, I want to express my appreciation for the diligent work your group has undertaken in reviewing and refining the regulatory language required by AB 7. This legislation is pivotal in advancing our state's healthcare system and ensuring it meets the demands of the 21st century.

However, I must convey my opposition to the current draft of the proposed regulatory changes. The draft suggests that Health Information Exchanges (HIEs) may be considered for fulfilling the Electronic Health Record (EHR) requirements as set forth by AB 7. This approach raises significant concerns due to the current uncertainty surrounding the future structure and governance of HIEs. Whether these entities will remain as private organizations, transform into public utilities, or become state-run entities is still unresolved.

Here are my recommendations for the regulatory changes currently being considered by the Electronic Health Information Advisory Group:

### Section B – Requirements

4. Compliance with the provisions of subsection X of NRS 439.589 is satisfied by
  - A. maintaining an electronic health record system pursuant to NAC 439.576 subsection 2 and install and implement components or services for exchanging data
  - ~~B. Maintain connection with a health information exchange pursuant to NAC 439.576 subsection 1~~

It is crucial to recognize that AB 7 did not intend for HIEs to serve as primary solutions for interoperability. Instead, our focus should align with federal guidelines as outlined in the Trusted Exchange Framework and Common Agreement (TEFCA). The interoperability goals of AB 7 are best served by adhering to these established federal standards, which will provide a more reliable and consistent framework for EHR systems across our state.

We have set an ambitious deadline of 2030 for all healthcare providers to comply with the EHR requirements mandated by AB 7. Achieving this goal will necessitate a concerted effort from all stakeholders in our healthcare system. It is imperative that we streamline our regulatory approach and provide clear, consistent guidance that aligns with federal interoperability standards. This alignment will not only facilitate a smoother transition for our healthcare providers but also ensure that we are supporting them effectively in modernizing their systems.

The passage of AB 7 was one of the most significant legislative achievements in our last session, aimed at bringing our healthcare system into the modern era. As we move forward, our priority must be to focus on federal requirements in the near term while offering robust support to our local providers. By doing so, we can create a cohesive and interoperable health information ecosystem that benefits all stakeholders.

Thank you for your attention to these important matters. I look forward to your response and to continuing our collaborative efforts to enhance our state's healthcare infrastructure.

Sincerely,

A handwritten signature in black ink, appearing to read 'Fabian Doñate', with a stylized flourish at the end.

Sen. Fabian Doñate,  
Chair, Joint Interim Committee on Health and Human Services  
Nevada State Legislature