



LATE
TESTIMONY

House Bill 489 – Electronic Health Networks and Electronic Medical Record Vendors of Nursing Homes – Release of Records - Fees

Position: Unfavorable

February 25, 2026

House Health Committee

Real Time Medical Systems is a data analytics firm working with CRISP, our state's Health Information Exchange, and our state's nursing homes, to help reduce hospital admissions creating better health outcomes for senior and reducing costs to Medicaid.

We are here in strong opposition to HB 489.

Three years ago, this committee passed SB 648/HB 786, a bill authorizing the release of nursing home records by EHRs and EMRs. During that effort, this committee rejected amendments to allow EHRs to charge for the release of data. Now, three years later, the EHRs are back trying again to get what you previously rejected.

As you know, medical records are owned by the patients themselves. EHRs license their database software to nursing homes at a significant cost, money that is almost exclusively paid by taxpayers, through Medicaid or Medicare. Now, EHRs want you to given them ability to charge to release that same data, that again, they do not own. They want to get paid on both the front end and the back end. And this double dip is substantially at taxpayer money.

The amount an EHR can charge is unlimited; potentially thousands of dollars per chart. There is nothing in this legislation that in any way limits the fees. Families and patients would be stuck with a monopoly controlling the data that the patient owns.

At Real Time we utilize this data, as a vendor to CRISP, to analyze and feed back actionable information to nursing homes within hours of their recodation. This real time analysis last year provided over 32,000 recommendations to nursing homes for patient care, resulting, according to a study by the University of Pennsylvania in a 52% reduction in hospital admissions. Any delay in getting this data can have significant and harmful consequences.

In addition, there are two additional concerns with the bill. First, by allowing EHRs that only service nursing homes to charge for their data, it creates a slippery slope for other EHRs that service hospitals or private practices to charge for their data. All of this at taxpayer and State expense.

Second, allowing EHRs to charge for data they do not own creates information blocking barriers under the federal 21st Century Cures Act, an issue currently being investigated by the Department of Justice and Federal Trade Commission.

Connecting Care Through Interventional Analytics

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