

A Good Year for HIT

Call it election year politics or just sheer luck, but both houses of the United States Congress passed healthcare information technology (HIT) bills in less than a year. On July 27, the U.S. House of Representatives took a giant step forward with the passage of H.R. 4157, the Health Information Technology (HIT) Promotion Act of 2006. This action follows similar action by the Senate last November when it passed S. 1418, The Wired for Health Care Quality Act of 2005.

The two pieces of HIT legislation now need to be reconciled into one. Though Congress is on recess until September 6, legislative staff for both the House and Senate will be drafting a compromise bill. Members of Congress will name conferees who will take the staff-recommended draft compromise into a closed room and attempt to reconcile differences. For a vote to occur, such reconciliation must be completed prior to the adjournment of the 109th Congress, which gives them less than 30 days.

While the bills are vastly different, there are some similarities. Both H.R. 4157 and S. 1418 codify the Office of the National Coordinator for Health Information Technology and the American Health Information Community into law. Without this measure, both offices could be abolished in 2008 when the next president takes office.

Other similarities include studying the variations in state health information laws and regulations; each bill also promotes a strategic plan for coordinating implementation of HIT and some grant funding.

Regardless of the impetus behind Congress' actions, I commend the Senate and House leadership and members of Congress for passing S. 1418 and H.R. 4157. A recent Institute of Medicine (IOM) report, *Preventing Medication Errors*, conservatively estimates that hospitals commit 400,000

drug errors a year, costing \$3.5 billion, not including lost productivity and other costs. Another 530,000 errors involving Medicare patients in outpatient facilities occur each year. More than 25% of these medication-related injuries are preventable.

H.R. 4157 and S. 1418 are significant steps forward for the HIT industry. Moreover, they fulfill the IOM's top recommendation, which is to improve the HIT infrastructure so that all prescriptions can be written electronically by 2010. The Institute also recommends various regulatory agencies encourage the adoption of practices and technologies that will reduce medication errors.

Members of Congress are getting it! For example, four additional pieces of healthcare information technology-related legislation have been introduced in the last 60 days:

- **Independent Health Record Bank Act of 2006 (H.R. 5559/S. 3454)**, introduced by Rep. Paul Ryan (R-WI) and Sen. Sam Brownback (R-KS). This legislation provides for the establishment of independent health record banks, which must be non-profit entities. The information contained within must be owned solely by its members (individuals whose health information is contained within the banks).
- **AmeriCare Health Care Act (H.R. 5886)**, introduced by Rep. Pete Stark (D-CA), ranking Democrat on the House Ways and Means Health Subcommittee, proposes universal health coverage that builds on both the Medicare and employer-based system, guaranteeing access to medical innovation and the world's most advanced providers and facilities.
- **HIT for Small Business Health Care Providers Act of 2006 (H. R.**

5971), introduced by Reps. Sue Kelly (R-NY) and Nancy Johnson (R-CT), which would establish the Health Information Technology Loan Program within the Small Business Administration.

- **Medicare Physician Payment Reform and Quality Improvement Act of 2006 (H.R. 5866)** introduced by Rep. Mike Burgess (R-TX) along with Reps. Charlie Norwood (R-GA), Dave Weldon (R-FL), and Charles Boustany (R-LA) to modernize the quality improvement organization (QIO) program.

Anyone working in the healthcare field would say the interest is long overdue. To continue the momentum beyond this year, however, is going to take action from you, your colleagues, and the entire industry. Invite your members of Congress to visit your workplace, tell them what is or is not working, and ask them to introduce legislation or work with the federal government to address the issues. **IPSQH**

David Roberts is vice president of government relations for the Healthcare Information and Management Systems Society (HIMSS) and chief executive of HIMSS' Alexandria, Virginia, Office of Advocacy & Public Policy. Formerly a professional staff member for both the U.S. House Appropriations Committee and the U.S. Senate Health Subcommittee on the Handicapped and a civilian financial analyst for the U.S. Air Force, Roberts now resides with his family in Solana Beach, California, where he is an elected member of the City Council.

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