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Written Testimony
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to the
U.S. House Ways and Means Committee
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Health Reform in the 21st Century:
Reforming the Health Care Delivery System

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The Healthcare Information and Management Systems Society (HIMSS) is pleased to submit this written testimony on behalf of our more than 20,000 individual members and over 350 corporate members that collectively represent organizations employing millions of people in the health information technology (IT) industry. HIMSS is the healthcare industry's membership organization exclusively focused on providing global leadership for the optimal use of health IT and management systems for the betterment of healthcare. Founded in 1961, HIMSS has offices in Chicago, Washington D.C., Brussels, Singapore, and other locations across the United States and the globe.

On behalf of HIMSS members, we commend President Barack Obama and the U.S. Congress for their vision and commitment to reform our national healthcare delivery system. President Obama's goal of computerized health records for all Americans by 2014 is an essential component of national healthcare reform.

The Business Case for Health Information Technology

Unfortunately, the reality is that the business of healthcare at the physician/patient level is decades behind in terms of IT. While there has been progress, much of patient clinical information is still recorded on paper. Comparing lab results and the diagnosis of the physician are often manual operations that take several days to process. The insurance company gets a claim that has been handled by at least four people, each of whom have a stake in the financial outcome of the office visit. Such a paper-based system is unacceptable to every other industry in the U.S. Why do we continue to accept it in healthcare?

We must recognize the absurdity of driving a car that can monitor all of its internal systems and alert us to any failings yet we fail to channel our health information into an IT network that would literally save lives. We have the technology at our disposal. It's time we utilize our health IT resources to reform healthcare, save lives, decrease costs, and increase Americans' quality of life. It is ridiculous that we can track anyone with a cell phone anywhere in the world yet we cannot track most patients from one clinician to the next.

Science and technology have contributed to more than half of U.S. economic growth since World War II. But the use of IT in US healthcare lags behind many countries. Analysis of the 2006 Commonwealth Fund International Health Policy Survey of Primary Care Physicians demonstrates that the United States has fallen far behind the Netherlands, New Zealand, the United Kingdom, Australia, and Germany on a number of measures related to the utilization of health IT. The contrast between the United States and the Netherlands is stark, with 98 percent of Dutch primary care physicians reporting the use of electronic medical records compared with only 28 percent of their American counterparts. This general pattern persists when examining the prevalence of other IT functions such as e-prescribing, decision support, and computerized access to test results.

Moreover, a study released in February 2009 by the Information Technology and Innovation Foundation found that while the United States currently ranks sixth among

40 countries and regions in innovation and competitiveness, it placed last in terms of progress made over the last decade. Singapore, Sweden, Luxembourg, Denmark and South Korea now out rank the U.S. U.S. employers pay more than 50% of the costs of healthcare, hurting their competitive positions versus competitors from other countries. Healthcare now represents 17% of U.S. GDP, compared to an average of 10% for all other developed nations, and continues to grow faster than the rate of economic growth.

We need a bold and coordinated plan of action to utilize IT to transform the nation's healthcare delivery system, which will in turn help get our economy back on track. Deloitte LLP reports that investing in e-prescribing and electronic medical records, along with better coordination of patient care through primary-care doctors, would result in 10-year savings of \$530 billion.

When used properly, EHR systems can also help keep patients safe by alerting clinicians to harmful drug interactions or allergic reactions to prescribed medicines and helping clinicians manage the health of patients with complex chronic conditions. The January 26, 2009, issue of the *Archives of Internal Medicine* includes a study by Johns Hopkins School of Medicine that found a 15 percent reduction in patient mortality rates during hospitalization at centers that use computers instead of paper.

The Evidence-Based Case for Health Information Technology

White River Rural Health Care Center in Arkansas and the New York Children's Health Project (NYCHP) serve patients in vastly different environments, but the need for access to healthcare is the same. Both organizations' efforts are not about the technology, but about the patient. Both organizations use information to transform the way they deliver healthcare. Technology is their tool to get to the right information, right away.

The White River Rural Health Clinic has 24 medical locations spanning 6,000 square miles of Arkansas. When setting up the EHR system in 2007, the local telephone company had to import engineers from other states to lay the framework for the technology. By instituting EHRs in all 24 locations as part of their "Total Care System,"

the efficiencies gained have allowed the health clinic to open five new facilities that are not federally funded, including two wellness centers and a dialysis center.

The efficiencies have also allowed White River to take its workforce from 200+, four years ago, to 165 employees today, even with the new sites and services. A tremendous boon to the local economy. And, they will soon be using computerized radiology, truly driving toward the medical home for patients.

Patients – many of whom have transportation or health challenges in getting to their nearest clinic – use a Web-based Patient Portal to easily and securely communicate with their clinicians and review prescription information, lab results, diagnostic results and appointment information, allowing them to better manage their health.

Information technology ties directly into the healthcare delivery system. Technology helps physicians and nurses look at healthcare from the patient's perspective. All of the providers are on the same page with the patient, no matter where the entry point is in the system. Having access to that data and information is essential to efficient, effective patient care.

The Diabetes Self-Management Education program is an example of leveraging technology to improve outcomes at White River. The program served 100 patients in White River clinics from May 1, 2007 until April 30, 2008, for diabetes assessments and education. There were 81 first-time assessments and/or patients attending classes, and 19 one-on-one follow-ups. The average HgbA1c for 2007 was 8.5 prior to education; after education, that average dropped to 7.6. This would convert to an average blood sugar drop from 210 mg/dl to 180 mg/dl. To encourage continued support of these patients, the program implemented self-management goal surveys, follow-up letters after labs, and reminder letters for those who had not returned to the clinic for a follow-up. Of patients in the program, 84 percent had routine follow-ups with their family physician.

White River Chief Information Officer Greg Wolverton credits the EHR to this success. “We would not have had the data in the first place without the EHR. Secondly, we had access to the data so that our teams could schedule the follow-ups with the patients to work to improve outcomes.”

The New York Children's Health Project, a program of Montefiore Medical Center and the Children's Health Fund, works with homeless children and families, runaway youth and victims of domestic violence via high-tech mobile medical units ("doctor's offices on wheels") and on-site shelter clinics. These services provide an "enhanced" medical home incorporating primary care, mental health and oral health care. Since 1987, the NYCHP has provided almost 270,000 healthcare services to nearly 60,000 patients. The transient nature of these patients can be a healthcare challenge, so the NYCHP creatively uses and accesses patient data via a wireless EHR system onboard the mobile medical units and at all on-site clinics. In addition, patients are often referred to Montefiore's South Bronx Health Center for Children and Families, which can access the NYCHP EHR records, allowing for seamless continuity of care.

Both organizations cite the need to invest in technology now to improve care, avoid extended hospital stays and save lives. In Arkansas and New York, the medical home is a much-valued model of care with primary care, mental health and oral health patient health information in the same clinical record. The ability to mine data from the EHR has helped both community health organizations approach healthcare from a more strategic approach because they can identify and track trends in their respective patient populations.

White River Rural Health Care Center and the New York Children's Health Project are both recipients of the 2008 HIMSS Nicholas E. Davies Award of Excellence. Since 1994, the Nicholas E. Davies Award of Excellence has recognized excellence in the implementation and value from health IT, specifically EHRs. There are currently four award categories: Public Health, Organizational, Ambulatory, and Community Health Organizations.

White River and NYCHP are stellar examples of how health IT can play an instrumental role in national healthcare reform. In order to achieve real national healthcare reform, improve the health of all Americans, and achieve President Obama's goal of EHRs by 2014, Congress must develop a strategic national healthcare reform plan that effectively leverages health IT.

HIMSS believes that lives can be saved, outcomes of care improved, and costs reduced by transforming the healthcare system through the appropriate use of IT and management systems. It is essential that health IT be harnessed as a tool in transforming healthcare, improving quality by delivering information where and when it is most needed, reducing costs, empowering consumers in their healthcare decisions, improving access to healthcare, and providing for the privacy and security of personal health information.

HIMSS RECOMMENDATIONS

To ensure health IT is appropriately addressed in anticipated healthcare reform policy in 2009, HIMSS released [Ensuring Healthcare Reform Using Health IT](#), a detailed report outlining specific priorities and recommendations for President Obama and the 111th Congress to harness the power of IT to reform healthcare and stimulate the U.S. economy. The report includes specific recommendations to build and sustain a strong infrastructure for our nation's healthcare system. An infrastructure that will provide for the secure, interoperable exchange of health information among clinicians, payers, public health, and consumers throughout the U.S.; improved quality and safety of the care provided; and, decreasing costs – all of which hold great promise for improving the overall quality, cost, and access to healthcare.

A glimpse of the recommendations is as follows:

- 1. The application of recognized standards and certified health IT products among all federally funded health programs** by requiring that federal funding to assist providers and payers within these programs adopt health IT only be used for the purchase or upgrade of new health IT products that apply Healthcare Information Technology Standards Panel (HITSP) interoperability specifications and have Certification Commission for Health Information Technology (CCHIT) certification.
- 2. Expand Stark Exemptions and Anti-Kickback Safe Harbors for EMRs** to cover additional healthcare software and related devices that apply HITSP interoperability specifications, are CCHIT-certified, and allow for better coordination of care and information sharing among related providers and their patients. In carrying-out out this recommendation, the Secretary should implement necessary measures and requirements to protect against conflict of interest and improper relationships among providers.

3. **Codify HITSP as the National Standards Harmonization Body** responsible for collaborating with the public and private sector to achieve a widely accepted and useful set of standards to enable the widespread interoperability among healthcare software applications. Adequate funding should be authorized and appropriated for HITSP from FY10 – FY14.

4. **Establish Health IT Action Zones:** The US Congress should authorize and appropriate funding for grants and other incentives to establish Health IT Action Zones that demonstrate effective practices for promoting the adoption of health IT by clinicians that provide care to individuals in vulnerable populations, as well as by providers who care for patients who are medically underserved and are impacted by health and/or digital disparities. Health IT Action Zones should also apply health IT to foster model clinical practice disease management, address primary prevention and co-occurring chronic conditions, and target patients with low health literacy. Grants and other incentives should require the application of HITSP interoperability specifications and CCHIT-certified health IT products. In addition, the US Congress should require the Secretary, in collaboration with a senior level federal administrator for health IT, to carry-out a study evaluating the impact and healthcare of racial and ethnic minority groups.

5. **Broaden Medicare Reimbursement of Telehealth Services:** The Secretary of HHS should evaluate and make recommendations to the U.S. Congress within 90 days to broaden Medicare reimbursement of telehealth services.

The recommendations concerning IT's role in healthcare represent necessary measures to develop and maintain a robust IT infrastructure for healthcare.

Policymakers should consider the recommendations as components of the necessary foundation to strengthen and sustain the success of their healthcare reform legislation, proposals, and regulation policies.

CONCLUSION

Health IT shows great promise for transforming the delivery of healthcare in the US, improving population health and the overall efficiency and effectiveness of healthcare. Appropriately implemented and utilized, IT can enable better access to healthcare services and information, resulting in improved healthcare outcomes and cost savings. We would be happy to answer any questions that members of the Committee may have on this matter and look forward to providing our members' expertise to helping you transform healthcare in the United States.