

Submitted by:
K. Meredith Taylor
Director, Congressional Affairs
HIMSS
4300 Wilson Blvd, Suite 250, Arlington, VA 22203
703-562-8847 ▪ mtaylor@himss.org

Written Testimony
by
C. Martin Harris, M.D., M.B.A., FHIMSS
Chair, HIMSS Board of Directors
to the
U.S. House of Representatives
Ways and Means Committee
Subcommittee on Health
hearing titled:
Efforts to Promote the Adoption and
Meaningful Use of Health Information Technology
July 20, 2010

HIMSS is pleased to submit this written testimony on behalf of our more than 30,000 individual members, of which more than two-thirds work in healthcare provider, governmental and not-for-profit organizations. HIMSS also includes over 470 corporate members and more than 85 not-for-profit organizations that share our mission of transforming healthcare through the effective use of information technology and management systems. HIMSS is a cause-based, not-for-profit organization exclusively focused on providing global leadership for the optimal use of information technology (IT) and management systems for the betterment of healthcare. HIMSS frames and leads healthcare practices and public policy through its content expertise, professional development, and research initiatives designed to promote information and management systems' contributions to improving the quality, safety, access, and cost-effectiveness of patient care. Founded 50 years ago, HIMSS and its related organizations have offices in Chicago, Washington, DC, Brussels, Singapore, Leipzig, and other locations across the United States.

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. We share your commitment to improving the healthcare experience for all patients, and believe that President Obama's goal of computerized health records for all Americans by 2014 is an essential component of national healthcare reform.

Last week, the Office of the National Coordinator for Health Information Technology (ONC) and the Centers for Medicare and Medicaid Services (CMS) in the Department of Health and Human Services (HHS) released their final rules identifying the criteria for hospitals and eligible providers to become meaningful users of health information technology (IT), and the certification criteria and standards for achieving meaningful use in order to qualify for incentive payments under the American Recovery and Reinvestment Act (ARRA).

In its role as the leading authority on the appropriate implementation and use of health IT, supporting the adoption and meaningful use of health IT is a key focus for HIMSS' membership. A cross-organization volunteer work group representing the expertise of our overall membership developed our comments on the Notice of Proposed Rulemaking (NPRM) with input from our committee structure, including the following areas of expertise: Ambulatory Information Systems; Enterprise Information Systems; Financial Information Systems; Healthcare Information Exchange; Management Engineering and Process Improvement; Nursing Informatics; Physician Community; Patient Safety & Quality Outcomes; Personal Health Records; Privacy and Security; and Public Policy. We also sought the expertise of our Chapter Advocacy Roundtable and Legislation & Regulation Review Task Force to ensure the HIMSS response would reflect the diversity of our membership. In addition, we also leveraged the subject matter expertise of our colleagues at the Electronic Health Record Association and the Joint Public Health Informatics Task Force, on issues related to EHR software development and public and population health requirements, respectively. The comments submitted by HIMSS leveraged the subject matter expertise of our members to ensure that our response reflected the broadest level of healthcare experience.

Of course, HIMSS' comments were not the only ones considered by HHS. In a *New England Journal of Medicine* article published to coincide with the release of the final rules, National Coordinator for Health Information Technology Dr. David Blumenthal and Principal Deputy Administrator of the Centers for Medicare and Medicaid Marilyn Tavenner wrote that HHS received 2000 comments on the NPRM (released in January 2010), many calling the approach described in the proposed rule as "demanding and inflexible, an all-or-nothing test that too few providers would be likely to pass." HIMSS is gratified to see that the Department listened and responded to concerns. The final rules are achievable, and we think they will be well-received by providers.

Knowing the baseline of current adoption of health IT is critical to understanding the realities at U.S. hospitals and the federal government's EHR adoption goals. According to quarterly health IT implementation census data from HIMSS Analytics, the use of health IT among healthcare providers has steadily increased over the past four years.

Using a census survey, HIMSS Analytics' EMR Adoption ModelSM (EMRAM)ⁱ tracks adoption of EMR applications within all U.S. civilian hospitals and health systems and scores hospitals based on their progress towards meeting the criteria for various stages within the Model. There are eight stages for hospitals, ranging from 0 to 7, as they move to a completely electronic environment (stage 7); at the pinnacle of the model, paper charts are no longer used in the delivery of patient care.

As of June 2010ⁱⁱ:

- 16.3 percent of U.S. hospitals (850 of 5,217) have achieved "Stage 4" or higher of the Adoption Model. This is up from 3.7 percent in December, 2006.
- Another 50.2 percent of U.S. hospitals (2,621 of 5,217) have achieved "Stage 3."

As it has for the past six years, HIMSS Analytics will continue to gather data and release quarterly updates of its census-based survey, shedding light on EHR adoption levels.

Based upon the responses from our members, HIMSS knows that the healthcare community is spending a considerable amount of time learning how to achieve meaningful use. HIMSS has devoted resources, including successful webinarsⁱⁱⁱ and analyses and other information on the HIMSS website^{iv}, to ensure our members and industry colleagues are equipped to maximize meaningful use opportunities. We stand ready to work with HHS to ensure our community members are ready for the start of the Medicare and Medicaid EHR Incentive Program.

One of the most valuable resources offered by HIMSS is the Nicholas E. Davies Award of Excellence Program.^v Since 1994 the Davies Award has recognized excellence in the implementation and value from health information technology, specifically EHRs. The Davies Award Program provides the nation's largest collection of first-hand accounts of the vision, leadership, technology and management required to achieve successful EHR implementation in large healthcare organizations, independent physician practices, public health entities, and community health organizations. Davies Awardees are recognized for their ability to demonstrate integrated use of healthcare information technology, leveraging their EHR and key functionality as the primary record of care, by all providers. Davies Awardees proactively use their system to streamline workflow and identify clinical trends to produce improved patient safety and quality outcomes. Continuity of care, operational efficiencies, cost savings, and return on investment are achievements recognized by the peer review Committees who ultimately select Davies recipients.

Over the years, different forces have been in place related to EMR implementation, resulting in a long and steady process of technology adoption. With the passage of ARRA, we are now in an era of increased activity. In fact, the Congressional Budget Office (CBO) has estimated that meaningful use incentives will boost health IT adoption rates to about 90 percent for physicians.

As an active stakeholder, HIMSS is playing a large role in helping to educate the community on the final regulations. For example, this month, we began our latest webinar series that focuses on the multiple aspects of the two final regulations. In addition, through member forums, such as Committees, Taskforces, and Roundtables, members will be able to examine the final regulations

in further detail and share feedback and thoughts with one another, aiding in their implementation of the regulations.

In addition, HIMSS continues to publish numerous resources concerning meaningful use. On the HIMSS website, the general public and HIMSS members can access such items as legislative and regulatory summaries, analyses that detail the changes from draft to final regulations, as well as tools to aid providers in estimating how much incentive funding they could be eligible for.

Through the HIMSS Foundation's Institute for e-Health Policy, policy makers will have the opportunity in the coming months to engage in briefings and roundtable discussions around the many facets of the new regulations – helping to inform new policy and address any challenges with existing policy.

HIMSS members appreciate and understand the cultural and technical challenges that healthcare providers face in meeting the requirements for meaningful use. Driving the appropriate use of health IT will improve patient safety and the quality, accessibility, and cost-effectiveness of healthcare. Thanks to its informed and committed member volunteers, HIMSS will be a leader in the transformation.

We would be happy to answer questions that members of the Committee may have on this matter and look forward to providing our members' expertise to help you transform healthcare in the United States.

Thank you for this opportunity.

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- ⁱ http://www.himssanalytics.org/hc_providers/emr_adoption.asp
 - ⁱⁱ <http://www.himssanalytics.org/stagesGraph.html>
 - ⁱⁱⁱ http://www.himss.org/economicstimulus/mu_webinars.asp
 - ^{iv} <http://www.himss.org/economicstimulus>
 - ^v <http://www.himss.org/davies/>