



33 W. Monroe Street, Suite 1700
Chicago, IL 60603-5616

Tel 312 664 4467
Fax 312 664 6143

www.himss.org

May 17, 2013

Honorable John Thune
United States Senate
Washington, DC 20510

Honorable Richard Burr
United States Senate
Washington, DC 20510

Honorable Lamar Alexander
United States Senate
Washington, DC 20510

Honorable Tom Coburn
United States Senate
Washington, DC 20510

Honorable Pat Roberts
United States Senate
Washington, DC 20510

Honorable Mike Enzi
United States Senate
Washington, DC 20510

Dear Senators:

We thank you for your April 16, 2013 letter to Kathleen Sebelius, Secretary of Health and Human Services and the attached white paper, "Reboot: Re-examining the Strategies Needed to Successfully Adopt Health IT."

HIMSS is a cause-based, not-for-profit organization focused on better health through information technology (IT). HIMSS leads global efforts to optimize health engagements and care outcomes using information technology. HIMSS is a part of HIMSS Worldwide, a cause-based, global enterprise producing health IT thought leadership, education, events, market research and media services around the world. Founded in 1961, HIMSS Worldwide encompasses more than 52,000 individuals, of which more than two-thirds work in healthcare provider, governmental and not-for-profit organizations across the globe, plus over 600 corporations and 250 not-for-profit partner organizations, that share this cause. For more information please visit www.himss.org.

HIMSS greatly appreciates your interest and concerns regarding health IT and the Meaningful Use Program authorized by the Health Information Technology for Economic and Clinical Health (HITECH) provisions of the American Recovery and Reinvestment Act of 2009. Widespread adoption of health IT leading to robust data exchange, driven by the Meaningful Use Program, is absolutely essential to any transformation of healthcare in America.

HIMSS respectfully offers the following comments to the major points in the "Reboot" report.

Status of the Meaningful Use Program

As of March 2013, almost 6,000 hospitals and more than 390,000 providers have registered for the Medicare and Medicaid EHR Incentive Program. In addition to the ample evidence from the federal agencies on the significantly increasing rates of adoption of EHRs across the Nation,

HIMSS Analytics' data shows that Meaningful Use is definitely and positively affecting EHR adoption in this country.¹

In 2006, HIMSS released the HIMSS Analytics' Electronic Medical Record Adoption Model ([EMRAMSM](#)) to demonstrate a maturing IT adoption model at all civilian hospitals and healthcare systems in the U.S. Since that time, the EMRAM has become the standard to measure acute care hospitals' adoption of health IT. The facility-level data is collected by HIMSS Analytics with the cooperation of the individual facilities.

Based on our analysis, beginning with the first EHR Incentive Program payments in May 2011, the number of U.S. acute care hospitals achieving EMRAM Stage 5 or Stage 6 has increased by more than 80% for each stage. The number of Stage 7 hospitals has increased 63%. The corresponding data for lower end stages has seen decreases of 16% to 35%.

EMRAM Stage 6 or Stage 7 corresponds with preparedness to share data with other healthcare entities. EMRAM score trending tells us that U.S. hospitals are moving in the right direction to support information sharing necessary for care coordination that supports healthcare transformation.

The next challenge becomes incentivizing data sharing with other entities. To address the expected challenge, HIMSS' [Public Policy Principles](#) call for the federal government to shift the emphasis from the prescriptive models of Meaningful Use Stages 1 and 2 to a model that encourages and teaches providers to take advantage of the capabilities inherent in health IT solutions, including interoperability.

To support this transition, HIMSS is establishing a [Clinical & Business Intelligence Model](#) with the intention of providing practical examples of how data collection and analysis can help providers both in the ambulatory and acute settings improve clinical outcomes and business efficiencies. The model will be evolving over the course of 2013. We look forward to the opportunity to brief you on this important tool for the healthcare community.

Path Toward Interoperability

The healthcare community has a strong history of working together to identify and develop standards and implementation specifications that will support interoperability leading to information exchange. National and international efforts like the Integrating the Healthcare Enterprise ([IHE](#)) Initiative, the Health IT Standards Committee, and the Office of the National Coordinator for Health IT's [Standards & Interoperability Framework](#) each play a role in our collective efforts to more rapidly advance interoperability.

¹ HIMSS Analytics is a wholly owned not-for-profit subsidiary of the Healthcare Information and Management Systems Society. The company collects and analyzes healthcare data related to IT processes and environments, products, health entity information systems department composition and costs, IS department management metrics, healthcare trends and purchase-related decisions. HIMSS Analytics delivers high quality data and analytical expertise to healthcare delivery organizations, healthcare IT companies, state governments, financial companies, pharmaceutical companies, and consulting firms. Visit www.himssanalytics.org for more information.

HIMSS has dedicated a section of our Public Policy Principles to Interoperability, Standards, and Infrastructure. As an organization, we support the advancement of interoperable health information systems, extending well beyond EHRs, to address the functional needs of the full spectrum of healthcare delivery organizations, population and public health agencies, patients, and other healthcare programs. We support ONC's efforts to utilize an open, transparent, multi-stakeholder standards harmonization process that encourages vendors to build robust interoperability into their products, discourages proprietary technology approaches, and supports facilities' secure exchange of health information.

In addition, we strongly support a process to ensure that all nationally-adopted standards, implementation specifications, and operating rules are available, well-tested according to standard testing methodologies, and deemed proven in the field before they are required for implementation. This can be a difficult challenge, but one that is critical to the overall success of interoperability that leads to information exchange.

To that end, there are several industry and HIMSS-led initiatives that can help advance the cause of interoperability, including [IHE](#). Established in 1998 with the Radiological Society of North America (RSNA International), IHE is organized into workflow-focused domains such as Patient Care Coordination, Radiology and Dentistry. Each domain develops consensus, standards-based specifications called [IHE Profiles](#) to address needs to exchange information to deliver care efficiently and effectively. The IHE Profiles are designed to perform such critical functions as organizing and leveraging the integration capabilities that can be achieved by coordinated implementation of communication standards; provide precise definitions of how standards can be implemented to meet specific clinical needs, offer developers a clear implementation path for communication standards that are accepted industry wide; and give purchasers a tool that reduces the complexity, cost and anxiety of implementing interoperable systems.

IHE conducts annual [Connectathons](#) to provide opportunities for product developers to test and demonstrate their products' capabilities to share data with other IHE compliant products in specific, real world scenarios. The products that demonstrate success at the Connectathons are invited to participate in [Interoperability Showcases](#) at HIMSS' Annual Conference, as well as the American College of Cardiology and RSNA annual meetings.

Interoperability testing is a critical component of future success of health IT solutions. In October 2013, HIMSS is launching the [HIMSS Innovation Center](#) in Cleveland Ohio as part of the [Global Center for Health Innovation](#). The HIMSS Innovation Center is a permanent demonstration and testing facility serving as a global resource where health solutions providers can work side by side with other state-of-the-art technology organizations on major initiatives including mobile health, consumer-driven health, accountable care, and coordinated care. The Innovation Center will be the first collaborative environment open year-round in which all healthcare stakeholders can work together to evolve the interoperability capabilities needed to improve healthcare.

Increased Healthcare Costs Attributable to Electronic Health Records

In Section II of “Reboot”, you raised concerns that the “Misuse of EHRs May Actually Increase Health Care Costs.” [HIMSS’ statement](#) for the May 3, 2013 CMS-ONC [Listening Session on Billing and Coding with EHRs](#) addressed the concern that EHRs contribute to increased costs.

Providers have always worried about claims of fraud and abuse. Many anecdotally report that, attempting to select correct codes from complex billing guidelines in the years prior to widespread use of EHRs, they would *under code* for patient encounters if they were unsure.

Coincident with many other beneficial functions, today’s EHR systems can facilitate better documentation as well as the direct selection of diagnosis and procedure codes by providers, as well as a capability for computer-assisted coding. Health IT enables earlier recognition of potential medical problems. Such problems can be addressed in early stages through follow-ups and preventive/screening tests. While these efforts may increase short-term costs, there exists a potential long-term benefit of decreased costs as we aim for a healthier population, improve chronic disease management, and avoid later-stage high care costs by treating conditions at an earlier stage.

There are still challenges, particularly with Evaluation and Management Codes, functionality and systems usability. HIMSS supports billing compliance efforts that enable improvements in documentation that support both patient care and medical necessity determinations. These functions must be performed in an accurate and compliant manner.

To that end, HIMSS supports the development of clear documentation guidelines to protect healthcare program integrity, while educating providers to ensure they are not penalized or subject to undue fraud allegations for simply utilizing technology to improve clinical documentation.

HIMSS is actively engaged with the federal government and other healthcare organizations to address billing and coding challenges to ensure providers optimize the use of EHRs to improve the quality and cost effectiveness of care delivery.

Evaluation and Oversight

HIMSS supports the proposal for more formal analyses and progress reviews. We strongly concur with CMS and ONC decisions to defer, for the remainder of 2013, further rulemaking related to Meaningful Use Stage 3.

In addition, our Public Policy Principles call on CMS and ONC to conduct periodic reviews to evaluate Meaningful Use and Certification Process requirements to analyze the benefits and costs/burdens on providers, vendors, and government. To ensure greater understanding and compliance with the Meaningful Use program, we encourage the Secretary and the Department of Health and Human Services to maintain a clear process for interpreting Meaningful Use rules that goes beyond reliance on Frequently Asked Questions and other sub-regulatory processes. Streamlining the regulatory process and making timely and appropriate edits to the regulations will help ensure program compliance.

Finally, we encourage Congress to exercise oversight authority by engaging the Government Accountability Office and conducting bipartisan hearings on progress toward meeting the goals of HITECH.

Patient Privacy and Safety at Risk

Our collective focus must be on improving the quality and safety of care delivery, achieving cost-effectiveness, and ensuring easier access to care. We can accomplish such improvement by ensuring the value of health IT. To appropriately engage the patient as a willing consumer of these necessary improvements to the healthcare system, patient safety and protection of personal health information must be paramount.

With respect to patient safety, HIMSS supports the promotion and reporting of improvements in patient safety that are achievable as a result of the widespread use of EHR. This must be simultaneously balanced with encouraging innovation, and with disseminating lessons learned from unintended consequences associated with technology use. Advancements in technology associated with clinical decision support, electronic prescriptions, and computerized provider order entry have an incredible impact on the quality of care delivered to the patient. Utilizing these tools can improve care delivery. The patient, provider, and others in the healthcare community must be educated on the proper use of technology to ensure care improvements.

To support interoperability that enhances patient safety, HIMSS suggests one of the largest unresolved issues in the safe and secure electronic exchange of health information is the need for a nationwide patient data matching strategy to ensure the accurate, timely, and efficient matching of patients with their health data across different systems and settings of care. Such a nationwide patient data matching strategy *does not* mean a national identity number or card. Technological advances now allow for much more sophisticated solutions to patient identity and privacy controls, including patient consent, voluntary patient identifiers, metadata identification tagging, and access credentialing. We strongly encourage Congress to direct an appropriate study to develop the national strategy in a timely and effective manner.

Privacy and security remain important elements to ensure patients trust the secure exchange of their data. HIMSS strongly supports efforts to ensure patients, families, and legal surrogates have electronic access to data. We need to balance the requirements of essential, appropriate, and secure information access and exchange without imposing requirements that are technically or operationally impractical, unreasonably costly, or overly burdensome.

The Value of Healthcare Information Technology

In conclusion, when properly utilized, health IT can be an impactful tool to improve care delivery and care coordination goals. Examples of the successful use of health IT is evident in the [case studies](#) of HIMSS Nicholas E. Davies Award recipients. These hospitals, clinical practices, and public health settings are utilizing EHRs and other health IT solutions to improve the quality of life and care delivered for patients and providers in their communities. The challenge is ensuring these success stories are transferable to provider settings across the U.S.

HIMSS Letter to Senators Thune, Alexander, Roberts, Burr, Coburn, and Enzi May 2013

HIMSS looks forward to continuing the dialogue between our members and the Congress to ensure the health IT remains the transformational force for the betterment of health and healthcare for all Americans. If you have any questions, please contact [Richard M. Hodge](#), HIMSS Senior Director of Congressional Affairs at 703-562-8847.

Sincerely,



Willa Fields, DNSc, RN, FHIMSS
Chair, HIMSS Board of Directors
Professor, School of Nursing,
San Diego State University



H. Stephen Lieber, CAE
President/CEO
HIMSS