April 16, 2013

The Honorable Kathleen Sebelius
Secretary of Health and Human Services
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Madam Secretary,

We write to request information about the department's progress promoting federal health information technology adoption and standards. The American Recovery and Reinvestment Act of 2009 included the Health Information Technology and Economic and Clinical Health (HITECH) Act, which aimed to promote the adoption and meaningful use of health information technology (health IT). Since the passage of the HITECH Act in 2009, the Department of Health and Human Services (HHS) has released hundreds of pages of regulations to implement the program. In addition, $35 billion over ten years will be spent to implement this program.

The HITECH Act was enacted to promote the adoption and meaningful use of health IT. The goal of the program is to create a secure network in which hospitals and providers can share patient data nationwide. Unfortunately, we have significant concerns with the implementation of the HITECH Act to date, including the lack of data to support the Administration's assertions that this taxpayer investment is being appropriately spent and actually achieving the goal of interoperable health IT.

Congress has an obligation to conduct oversight of government programs to ensure the effective use of taxpayer dollars. In keeping with that role, today we released "REBOOT: Re-examining the Strategies Needed to Successfully Adopt Health IT" (enclosed). This white paper outlines concerns with current health IT policy, including interoperability, increased costs, potential waste and abuse, patient privacy, and sustainability.

We respectfully ask that in conjunction with the Office of the National Coordinator of Health IT (ONC) and the Centers for Medicare and Medicaid Services (CMS), you provide a detailed written plan to address the concerns in the enclosed white paper, to ensure that health IT taxpayer investments today are sound and result in a safe, secure, interoperable health IT system in the future. Specifically, please address your plans to achieve interoperability, control billing costs, prevent waste and abuse, protect patient privacy, and ensure the program is sustainable.

We also ask that, in conjunction with ONC and CMS, you respond in writing to the following questions:

1. Please provide a list of every contract or task order awarded to perform work related to the HITECH Act. Please include the recipient, the amount and length of the contract, and the nature of the work to be performed.

2. ONC planned to contract with Mathematica Policy Research to build a model to understand the linkages between all of the different health IT programs, as well as the cost and quality implications of health IT. Please provide an update on the status of this global evaluation and provide copies of any findings reported to HHS, ONC, or CMS to date.

3. ONC contracted with the National Opinion Research Center at the University of Chicago (NORC) to conduct an evaluation of state health IT programs as mandated in HITECH. Please provide an update on the status of this evaluation and provide copies of any findings reported to HHS, ONC, or CMS to date.

4. ONC funded $250,000,000 in cooperative agreements to Beacon Communities that, according to ONC, "have already made inroads in the development of secure, private, and accurate systems of EHR adoption and health information exchange." How many of these communities will have to reduce their standards in Stages 2 and 3 to avoid penalty payments? What work has HHS, ONC, or CMS done to evaluate the progress of each of the Beacon Community awardees and how they will be impacted by Stage 2 and 3 milestones?

5. The American Institute for Research (AIR) was awarded a contract to evaluate the effectiveness of different HIT activities. The evaluation was to include a survey of providers and regional extension centers (RECs) and capture information such as how the RECs affected EHR adoption in the region. Please provide an update on the status of this contract and provide copies of any findings reported to HHS, ONC, or CMS to date. Has any additional work been done to ensure the sustainable of RECs?

6. ONC was planning to conduct evaluations of HITECH implementation in three cycles with separate deliverable dates to the National Coordinator on February 1, 2012; April 1, 2012; and September 1, 2012. ONC was also expected to produce an overall summary of all three reports. Please provide copies of all reports delivered by ONC to the National Coordinator. If some of these reports have not been completed, please provide an explanation and the expected date of completion.

7. Section 232 of the HITECH Act required the National Coordinator to assess and publish the impact of health IT in communities with health disparities and in areas with a high proportion of individuals who are uninsured, underinsured, and medically underserved

(including urban and rural areas), identify practices to increase the adoption of health IT by health care providers in such communities, and assess the use of health IT to reduce and better manage chronic diseases. Please provide an update on the status of this assessment and provide copies of any related findings reported to ONC to date.

We hope this process will begin a robust dialogue. It is our goal to work cooperatively together to learn more about the issues raised here and to address the problems identified. We request this response in writing by June 16, 2013.
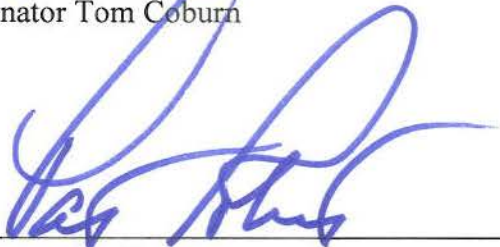
Sincerely,

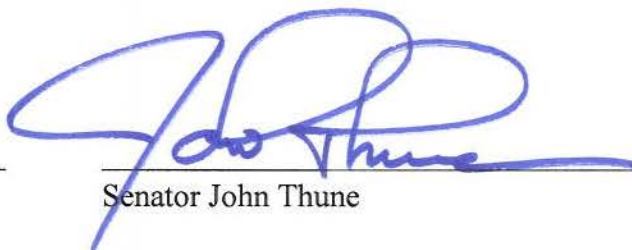Senator Lamar Alexander

Senator Richard Burr

Senator Tom Coburn

Senator Mike Enzi

Senator Pat Roberts

Senator John Thune