

SENIOR DEMOCRATIC WHIP



PLEASE RESPOND TO:
WASHINGTON OFFICE:
1511 LONGWORTH BUILDING
WASHINGTON, DC 20515-4330
(202) 225-8885

DALLAS OFFICE:
3102 MAPLE AVENUE
SUITE 600
DALLAS, TX 75201
(214) 922-8885

COMMITTEE ON TRANSPORTATION
AND INFRASTRUCTURE
CHAIRWOMAN, SUBCOMMITTEE ON WATER
RESOURCES & ENVIRONMENT
SUBCOMMITTEE ON AVIATION
SUBCOMMITTEE ON RAILROADS

COMMITTEE ON SCIENCE AND TECHNOLOGY
SUBCOMMITTEE ON RESEARCH AND
SCIENCE EDUCATION
SUBCOMMITTEE ON ENERGY AND ENVIRONMENT

Eddie Bernice Johnson
Congress of the United States
30th District, Texas

WWW.HOUSE.GOV/EBJOHNSON/
REP.E.B.JOHNSON@MAIL.HOUSE.GOV

DEMOCRATIC STEERING AND POLICY COMMITTEE

CONGRESSIONAL BLACK CAUCUS
CHAIR, 107th CONGRESS

October 13, 2009

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

Dear Secretary Sebelius:

As you know, on February 17, 2009, President Barack Obama signed H.R. 1, The American Recovery and Reinvestment Act of 2009 (ARRA) into law.

A key provision of that law was the allocation of \$19 billion in funds to stimulate the adoption of Electronic Health Record (EHR) systems by hospitals and physicians to create a nationwide healthcare information technology (HIT) infrastructure. The legislation states that funds shall be used to reimburse hospitals for acquiring information technology that “improves healthcare quality, reduces medical errors, reduces health disparities, and advances the delivery of patient-centered medical care.” In order to accomplish this, the official definition of the term “meaningful use” should embody these principles, including strategies such as:

- Setting clear and achievable healthcare quality improvement and cost reduction goals;
- Tying payments tightly to improved patient care and quality results;
- Engaging patients in achieving meaningful use goals;
- Focusing on information use, not technology functions or features;
- Ensuring that standards and certification directly support meaningful use and foster innovation;
- Encouraging technologies that are easy to use and improve efficiencies;
- Providing special incentives for more rapid improvement of patient care and quality; and
- Providing incentives for commercial, “home-grown” and open source technologies.



The regulations defining “meaningful use” and the criteria for “certified EHR technology” are critical for the improvement of patient care and quality. If we are to advance the quality of patient care in the United States, EHR technology must be linked to improved patient care, quality and efficiency.

A Dallas company called PHNS provides health care information technology services to hospitals and healthcare providers. Such services include health information management services, including electronic medical records and electronic off-site data back-up services. They are an example of an innovator that has developed information technology that has quality of care in mind.

Conversely, much of the current HIT has been focused on creating electronic versions of paper transactions and is primarily used for billing and financial purposes. Only 10% of the 5,000 hospitals in the United States have EHR systems partly because they are deemed to be too expensive, too complicated and time consuming for doctors, nurses and other healthcare workers to use, or because they are incompatible with legacy systems within hospitals and with other healthcare providers. The current payment and reimbursement systems compensate physicians and hospitals based on quantity of services (number of patient visits and procedures performed) not the quality of the results of the services.

ARRA funds and other support for healthcare information technology should be focused on improving quality. Please ensure that regulations defining “meaningful use” and the criteria for “certified EHR technology” are critical for the improvement of patient care and quality. This policy will steer HIT development toward improvements in patient quality, safety, and efficiency.

Sincerely,


Eddie Bernice Johnson
Member of Congress