

June 26, 2009

Office of the National Coordinator for Health Information Technology
200 Independence Ave, SW
Suite 729D
Washington, DC 20201

Attention: HIT Policy Committee “Meaningful Use” Comments

Dear Sir or Madam:

Thank you for the opportunity to comment on the preliminary definition of “meaningful use” of electronic health records. This is a critical step in the process of increasing national implementation of health information technology (HIT) to modernize the U.S. health care system and bring about improved health for all Americans.

The Software & Information Industry Association (SIIA) is the principal trade association of the software and digital information industries, representing nearly 500 leading technology companies that develop cutting edge software applications and digital information services. We have carefully reviewed the Proceedings and Information Framework that were released for comment by the Department of Health and Human Services on June 16, 2009, and SIIA recommends that for the US Healthcare system to fully benefit from the breadth of available and developing information technologies, a broader approach should be taken in the creation of a “meaningful use” definition than that which is reflected by the released Proceedings.

The American Recovery and Reinvestment Act’s (ARRA) groundbreaking push towards the utilization of information technology to revolutionize the healthcare system represents one of the singular transformative opportunities for the United States to dramatically improve the delivery and management of healthcare. ARRA has the ability to accomplish three critical goals: (1) improve service quality and delivery of healthcare, (2) enhance dissemination of information to improve people’s understanding and management of their own care, and (3) enhance healthcare administration, efficiency, transparency and cost-effectiveness. All three of these aspects must be addressed in any strategy to encourage adoption of HIT, therefore, these aspects must all be reflected within the scope of the definition of “meaningful use” if the adoption of HIT is to achieve real change.

The intellectual framework for the definition of “meaningful use” of HIT, as reflected in the Recommendations from the Meaningful Use Workgroup on June 16, 2009, are appropriately focused on a wide range of the various aspects of care-giving and the significant value of technological modernization of those processes and the records associated with them. The

Recommendations recognize that this is a “progression towards a fully interoperable health information system,” and suggest that “[t]his transformed healthcare delivery system will also enable and amplify the effectiveness of a host of new reimbursement models that will reward more organized, more coordinated, and more efficient care.”

However, this conceptual framework does not address a meaningful approach to applying technology to the critical objective of healthcare administration and cost containment. The concept of “meaningful use” currently does not capitalize on the enormous value of information technology for the modernization and automation of records associated with those healthcare activities, nor does it provide for the routine collection, aggregation, and analysis of health information to greatly improve accuracy and efficiency of the healthcare system.

It is critical to improve the ability of patients to deal with the healthcare system that would otherwise bog-down medical practitioners and patients alike. Without these reforms, it seems unlikely that we can achieve the identified ultimate vision outlined in the Recommendations that “is one in which all patients are fully engaged in their healthcare, providers have real-time access to all medical information and tools to help ensure the quality and safety of the care provided while also affording improved access and elimination of health care disparities.”

Alternatively, by incorporating the element of administrative efficiency and cost transparency and clarity into the definition of “meaningful use,” the promise of HIT can be realized: electronic health information, provided to patients and providers, in a way that contributes to both better and more cost-efficient health care.

Enormous costs are built into today’s healthcare system to wrestle with paperwork at all levels, and properly focused HIT can help us get to a fuller vision of Healthcare reform and the necessary associated cost reduction and containment. A thoughtful and inclusive “meaningful use” definition will be foundational to truly achieving that vision. Modern electronic record-creation, record-keeping, practice management, billing, information reporting, and patient communications, are all essential elements to making HIT a catalyst to deliver both better care *and* improved cost-efficiency in the healthcare system. Including these elements in the definition of “meaningful use” is critical to ensure that the reform effort is properly grounded in both improving patient care and addressing the significant costs in the system that plague both providers and patients alike. SIIA, therefore recommends that the definition of “meaningful use” of an electronic health record should include: 1) improving care, 2) improving efficiency, 3) enabling cost transparency/clarity, and 4) contributing to cost control.

In summary, SIIA believes:

- a) ARRA has the ability to not only improve service quality and delivery, but also enhance dissemination of information to improve people’s understanding and management of their own care, and enhance healthcare administration, efficiency, transparency and cost-effectiveness.
- b) A broader approach should be taken in creating a definition of “meaningful use” than that which is indicated in the released Proceedings.
- c) The current conceptual framework fails to address a meaningful approach to applying technology to the critical objective of healthcare cost containment.
- d) By incorporating the element of administrative efficiency and cost transparency/clarity into the definition of “meaningful use,” the promise of the adoption of HIT systems can be realized.
- e) Establishing that the collection, aggregation and analysis of electronic records is “meaningful use” would greatly facilitate the development of improved evidence to aid medical decision making and ultimately, the creation of a robust health data system.
- f) “Meaningful use” of an electronic health record should include: 1) improving care, 2) improving efficiency, 3) enabling cost transparency/clarity, and 4) contributing to cost control.

Again, thank you for the opportunity to comment on this important issue. SIIA is available to consult or assist the working group in any way that may be helpful, and I welcome the opportunity to answer any questions you may have.

Sincerely,

A handwritten signature in black ink that reads "Ken Wasch". The signature is written in a cursive, flowing style.

Ken Wasch
President