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September 22, 2008

The Honorable Pete Stark
Chairman
House Ways and Means Health Subcommittee
1100 Longworth House Office Building
Washington, DC 20515

Dear Chairman Stark:

On behalf of the American College of Cardiology (ACC), representing 37,000 cardiovascular health care professional members, I'm writing in strong support of H.R. 6898, the "Health-e Information Technology Act of 2008." ACC believes the widespread adoption of health information technology (HIT) will lead to a significant improvement in health care quality, prevent unnecessary medical errors, and reduce program cost and inefficiencies.

Unfortunately, the market forces of reduced physician reimbursement and the misalignment of incentives where savings from HIT are translated to payers have all contributed to the significant barriers that prevent physicians from making the expensive acquisition. The College has long-been a strong proponent of the federal government taking a more active and leading role in promoting the acquisition and adoption of HIT through an incentive-based program.

We believe H.R. 6898 is the most comprehensive proposal before Congress that will provide meaningful incentives encouraging widespread adoption of HIT. Among the specific areas the College is particularly supportive include the following provisions:

- **Codification into statute the Office of National Coordinator for Health Information Technology (ONCHIT).** Originally created in 2004, the ONCHIT should be made a permanent established position within the Department of Health and Human Services and be granted permanent funding and authority to oversee the federal government's national role in encouraging the widespread adoption of HIT.
- **Through the creation of an HIT Advisory Committee, recognition that the development of national standards is essential to ensure interoperability, privacy, security, and the overall utility of HIT utilization.** The College believes that the development of national standards is critical to the adoption and standardization to ensure the interoperability of an electronic exchange of health information.

The mission of the American College of Cardiology is to advocate for quality cardiovascular care — through education, research promotion, development and application of standards and guidelines — and to influence health care policy.

- **The testing and certification of products to ensure they meet the interoperable standards for the electronic exchange of information.** Rigidly testing and certifying products coming to the market will help ensure those products meet minimum standards of functionality, security, and interoperability.
- **Providing incentive payments, through Medicare Part B, for physicians to acquire and utilize a certified electronic medical record system.** Due to the significant start-up capital costs in purchasing HIT, physicians need a “business case” to make the costly investment into an area where the savings are likely to be seen by the payers. The College believes most effective way to encourage widespread HIT adoption is to incentivize utilization of certified equipment through the Medicare program.
- **Confidentiality and Security protections that strengthen safeguards for patients.** The College strongly supports efforts to protect patient health information from third-party entities that breach confidentiality.

The one area of improvement the College would recommend, however, is related to the incentive payment program that expires after five (5) years. Correctly recognizing initial start-up costs, this time-limited program fails to recognize the ongoing maintenance costs (periodic upgrades, ongoing training) associated with operating HIT equipment. We would, therefore, encourage Congress to build into the Medicare Part B payment a permanent add-on for those utilizing the clinical functions of an approved health IT system that recognizes these ongoing costs.

In conclusion, the College strongly supports H.R. 6898, the “Health-e Information Technology Act of 2008,” and we look forward to working with you and your Committee to see these provisions are enacted into law.

Sincerely,



W. Douglas Weaver, MD, FACC
President



Jack Lewin, M.D.
Chief Executive Officer