

## OPENING STATEMENT

**The Honorable Ben Quayle (R-AZ), Chairman**

Subcommittee on Technology and Innovation

*Is “Meaningful Use” Delivering Meaningful Results?: An Examination of Health Information Technology Standards and Interoperability*

November 14, 2012

Good morning, I'd like to welcome everyone to today's hearing, which is being held to examine the development of health information technology interoperable standards, and the implementation of the Health Information Technology for Economic and Clinical Health Act, more commonly known as the HITECH Act.

Throughout this Congress, our Subcommittee has been focused on advancing U.S. innovation in a constrained budget environment. We held hearings on cloud computing, startup companies, standards development, spectrum R&D, manufacturing, and innovation policies. Today's discussion is a continuation of this conversation.

This is also the fourth hearing the Committee on Science, Space, and Technology has held on health information technology standards since the 109<sup>th</sup> Congress.

Effective utilization of information technology in the medical field has the potential to fundamentally change healthcare in our country. Application of health IT could lower health care costs by reducing duplicative and unnecessary tests and procedures. It could also lead to more effective care by helping to reduce medical errors and could help to improve public health outcomes by aiding in clinical decision making.

Given the strain of rising health care costs on our budget and the diverse array of healthcare providers, information technology will be a critical component of our future healthcare system.

However, while information technology has become pervasive in our everyday lives, the healthcare industry has historically been slow to effectively deploy IT.

In 2004, President Bush signed an executive order establishing the Office of the National Coordinator for Health Information Technology or, the ONC, within the Department of Health and Human Services to develop, maintain, and direct a strategic plan to guide the nationwide implementation of health IT in the public and private health care sectors.

The National Institute of Standards and Technology has worked with industry and other stakeholders to advance healthcare information technology infrastructure since the early 1990s.

In 2009, the HITECH Act was passed, as part of the American Recovery and Reinvestment Act, to promote the adoption of health IT products, services, and infrastructure through a series of discretionary and mandatory funding programs.

This legislation included \$2 billion in discretionary funds for the ONC to invest in health IT architecture, and to provide grants and training programs to encourage health IT adoption.

Furthermore, the legislation provided financial incentives in the form of mandatory payments through the Medicare and Medicaid programs to encourage physicians and hospitals to adopt and use certified electronic health records, or EHRs.

To date, incentive payments under these programs have totaled over \$7.7 billion. It is estimated that CMS will pay out approximately \$20 billion in incentive payments to providers under this program.

This is a significant Federal expenditure. Given our current budget situation, it is vital that these taxpayer dollars are spent effectively in ways that lead to reduced costs and better health care down the road. Nearly four years after the HITECH Act, taxpayers should know what we have to show for it.

While adoption of health IT products and services has increased since the passage of the HITECH Act, I have serious concerns about our progress towards greater interoperability of health IT systems. Without interoperability, many of the potential benefits of health IT could go unrealized.

Interoperability depends on the development and utilization of strong, technical standards. I am interested in hearing from our witnesses about progress being made towards the development of these standards, and what policy makers can do to advance interoperability.

Further, I am concerned that the meaningful use requirements do not effectively take into account the complexity and diversity of the healthcare marketplace. It is crucially important that health IT is used to improve care without burdening certain providers with requirements that divert valuable time and resources.

Clearly, there are key questions that must be answered to ensure that taxpayer dollars are spent wisely, and to ensure that IT in the healthcare industry is used to reduce costs and improve care.

We thank our witnesses for being here today and we look forward to your testimony.