

SUBCOMMITTEE ON HEALTH HEARING ENTITLED, "DISCUSSION DRAFT OF HEALTH INFORMATION TECHNOLOGY AND PRIVACY LEGISLATION"

Today's hearing will focus on a legislative discussion draft that we hope will improve the quality and efficiency of healthcare in this country through the adoption of Health Information Technology (HIT).

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June 4, 2008

Today's hearing will focus on a legislative discussion draft that we hope will improve the quality and efficiency of healthcare in this country through the adoption of Health Information Technology (HIT).

We have before us an opportunity to increase our Nation's ability to provide better quality of care, significantly reduce healthcare costs, and strengthen privacy protections in a new electronic world.

The care provided by doctors, nurses, pharmacists, and other healthcare entities is based on information about the individual patient, such as medical history, previous treatments, past surgeries, drug allergies, and more. If that patient's information is inaccurate or incomplete, it could lead to devastating consequences such as serious medical errors or the failure to detect a condition early on. Furthermore, giving healthcare providers access to a patient's up-to-date medical history can reduce costs by avoiding unnecessary or duplicative diagnostic testing or treatment.

The discussion draft legislation that we will focus on today represents a strong bipartisan agreement of the need to facilitate the creation of a health information system that is electronically maintained and exchanged. It codifies the Office of the National Coordinator for Health Information Technology in order to develop and implement a nationwide HIT infrastructure, which includes the use of electronic health records for all individuals, as well as the electronic exchange of health information amongst those entities that are essential for the delivery of health care.

An additional but fundamental component of this legislation will strengthen the law to ensure that

the privacy and security of an individual's health information are well protected. The discussion draft fills in the gaps in current law to ensure that an individual's electronic personal health information is only used for legitimate and appropriate purposes.

I thank the witnesses who will be testifying today on this legislation, and I also thank my colleagues on both sides of the aisle for encouraging the establishment of a more effective healthcare system in this country.

I am particularly proud of the work done by Committee Ranking Member Barton, and Subcommittee Chairman Pallone and Ranking Member Deal in developing this draft bill. I would also like to acknowledge the important contributions made by Ms. Eshoo, Mr. Rogers, Mr. Gordon, Mr. Waxman, Mr. Gonzalez, Mr. Markey, Ms. Capps, and Mr. Towns. I look forward to continuing to work in a bipartisan manner so that we may introduce and then move forward with this important legislation.

Prepared by the Committee on Energy and Commerce

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