

February 23, 2009

Dear AMIA Members:

As you know, on February 17, 2009, President Obama signed into law HR 1, The American Recovery and Reinvestment Act, a \$787 billion stimulus package intended to revitalize the U.S. economy. I am pleased to provide you with a summary of recent AMIA activities regarding the passage of this bill as well plans for future activities.

Contained in HR 1 is some \$19.2 billion intended to support widespread deployment and utilization of health information technologies (HIT) and the availability of an electronic health record (EHR) for all citizens by 2014. Within Title XIII of HR 1 entitled "Health Information Technology" (or the "Health Information Technology for Economic and Clinical Health Act" or the "HITECH Act") there are many provisions that members of AMIA will be pleased with; there are also some provisions (especially relating to "improved" privacy and security requirements) likely to cause concern.

Through activities of our Board of Directors (BOD), the Public Policy Committee (PPC) AMIA staff, and interested members, AMIA was deeply involved as the HIT provisions of the stimulus package were crafted, providing input from the informatics community during the consideration of predecessor legislation, (such as the Kennedy-Enzi 'Wired for Quality' Act, and the 'Health-e Information Technology Act introduced by Rep. Stark (D-CA) in September 2008,) and significantly ramping up our advocacy efforts as the drafting of HR 1 moved at lightspeed in early January, before the inauguration of our new President.

AMIA has long supported codification (recognition in law, rather than only by way of Presidential order) of the Office of the National Coordinator for Health Information Technology (ONC). We consult frequently with Dr. Kolodner and the staff of ONC regarding informatics issues, and a number of our members have had ongoing involvement with ONC, the AHIC, and the AHIC-successor, the National e-health Collaborative. As an association representing a diverse membership, we are enormously pleased that HR 1 stipulates some \$2 billion in funding for HIT that will flow through ONC.

It is certainly fair to say that AMIA was instrumental in the inclusion of several key provisions of HR 1, including three related to our focus on biomedical and health informatics standards and the informatics workforce. First, we worked closely with the office of Rep. Bart Gordon (D-TN), Chairman of the House Committee on Science and Technology, on provisions of the bill that direct the National Institute for Standards and Technology (NIST) to assist HHS in developing a program for voluntary certification of HIT and to be involved in the testing of HIT standards and specifications adopted by

ONC, which is charged with adopting initial standards, implementation specifications and certification criteria for HIT not later than December 31, 2009. Second, representatives of AMIA worked closely with the office of Rep. David Wu (D-OR), and with Sens. Whitehouse (D-RI) and Carper (D-DE), to ensure that the language of the “10,000 Trained by 2010 Act” was included in the American Recovery and Reinvestment Act. The availability of immediate funding for medical and health informatics education programs, including certification, is a significant achievement for AMIA and one in which you should be justifiably proud.

We are pleased, too, to report that AMIA’s input to Sen. Carper led to inclusion of the following as one of the duties of the National Coordinator: to publish annual reports regarding the resources needed to attain EHR availability by 2014, including “the resources needed to establish a health information technology workforce sufficient to support this effort (including education programs in medical informatics and health information management).” AMIA’s unwavering commitment to interdisciplinary approaches to biomedical and health informatics workforce development is key to our efforts.

In addition to ongoing work with the champions of HIT mentioned already – including Reps. Gordon and Wu, Sens. Whitehouse and Carper – AMIA provided steady input to the many drafters of the HIT provisions of HR 1, including the Committees on Ways and Means, and Energy and Commerce in the House, and the Senate HELP and Finance Committees. As those who have participated in AMIA Hill Days in the past know, members of these Committees, including, to name only a very few, Sens. Kennedy (D-MA), Dodd (D-CT), Enzi (R-WY), Baucus (D-MT), Hatch (R-UT), and Leahy (D-VT), and Reps. Waxman (D-CA), Dingell (D-MI), Barton (R-TX), Markey (D-MA), Stark (D-CA) and Camp (R-MI) were highly influential in the drafting of HR 1, and will continue to exert significant influence on HIT policy going forward, and AMIA will continue to actively represent the informatics community to these legislators.

As you know, in addition to allocating \$2 billion in funding to support such initiatives as regional health information exchanges and State-level grants and information technology assistance programs, HR 1 provides \$17.2 billion in Medicare and Medicaid payment incentives to physicians and hospitals. Payment of these incentives will begin in 2011 and AMIA looks forward to working closely with the Department of Health and Human Services (DHHS) as the Secretary produces a series of guidances, regulations and reports relating to the “meaningful use” of EHRs and HIT.

In addition to funding for ONC and incentives for HIT, the privacy provisions of HR 1 make dozens of changes to the existing regulatory structure of the HIPAA Privacy and Security rules, and it is fair to say that some of these will cause concerns for our

members. A summary (as both a text and slide presentation) of the Bill's provisions is available on the AMIA web site at: [http://www.amia.org/public\\_policy](http://www.amia.org/public_policy).

With greater and lesser impact, AMIA provided input to the drafters of HR 1 on these and many other provisions of the privacy subtitle of the bill. In general, our positions could be characterized as 'privacy moderate' as we advocated rigorous protection of PHI and responsible data stewardship, while arguing strongly for an HIT infrastructure and policy framework that will improve health care quality, reduce costs, improve public health and facilitate research, among other purposes.

As is true of the bill as a whole, there is much in the privacy provisions of HR 1 to be pleased with, such as the extension of HIPAA's reach to BAs and in the direction of non-covered entities, such as PHRs, that may be holding significant amounts of PHI. There are also reasons to be concerned that many of these privacy provisions will increase costs and liabilities without producing any greater protection of health information.

While the legislation has indeed been signed by the President, the initial compliance date for most of the new privacy provisions is February 17, 2010, and over the next 6 months to 5 years the Secretary, National Coordinator, FTC, GAO, IOM, CMS, and others have been tasked with issuing a series of standards, guidances, reports and regulations to facilitate implementation of the HIT provisions of HR 1 – you can rest assured that AMIA intends to be very much involved in those processes.

In the deliberations leading up to the passage of HR 1 Members of Congress and their staffs reached out to AMIA on many occasions. We are recognized as an important source of information and expertise regarding health information policy and as an "honest broker" committed to advancing biomedical and health informatics in all its forms, rather than more narrow or parochial interests. It has been my great pleasure to be involved with our advocacy efforts on HIT and I congratulate you on the great achievement that the inclusion of HIT in The American Recovery and Reinvestment Act represents for AMIA. Please consider joining us as we participate in AMIA's 2009 Hill Day on April 2, 2009.

Sincerely,

A handwritten signature in black ink that reads "Don Eugene Detmer". The signature is written in a cursive, flowing style.

Don Detmer, MD, MA  
President and CEO