

## Background on the State of Healthcare IT

Unlike other U.S. industries, healthcare has been slow to implement IT to improve safety, access, quality and efficiency.

- Landmark 1999 Institute of Medicine report “To Err is Human” finds that medical errors in hospitals kill as many as 98,000 people a year
- HHS estimates that standardized health information exchange among U.S. healthcare IT systems would save \$86.8 billion annually by eliminating duplicative tests, reducing medication errors and other improvements
- Close to one-third of health spending goes to care that is duplicative, fails to improve patient health or may even make it worse, according to a study by the Center for Evaluative Clinical Sciences. That’s the equivalent of \$3.1 billion wasted each year

## Timeline for Change

- November 2003: Congress creates the Commission on Systemic Interoperability as part of the Medicare Modernization Act
- January, 2004: In his state of the Union address, President Bush calls for electronic health records for all Americans in 10 years
  - “By computerizing health records, we can avoid dangerous medical mistakes, reduce costs and improve care.” 1/20/04
- May, 2004: President Bush appoints David Brailer, MD, as the first National Coordinator for Health Information Technology
- July, 2004: Dr. Brailer announces a framework for strategic action, which focused the national healthcare IT effort around four goals: informing medical practice, interconnecting clinicians, personalizing care for consumers, and improving population health
  - Three strategies under each goal yielded a dozen key directions for action, from fostering regional collaborations and developing a national health information network to reducing the risk of investment in electronic health records and encouraging the use of personal health records
- July, 2004: then HHS Secretary Tommy Thompson announces plans for a Health Information Technology Leadership Panel, made up of CEOs of major companies that provide health coverage for their employees
- November, 2004: CSI commissioners are named
- November, 2004: Dr Brailer’s office issues a request for information about how to achieve his four stated goals; his office receives more than 500 responses
- January, 2005; CSI commissioners are sworn and have their first meeting, Secretary Thompson and Dr. Brailer address the Commission
- January, 2005: Michael Leavitt is appointed Secretary of Health and Human Services
- May, 2005: Health Information Technology Leadership Panel issues its report calling healthcare IT an imperative for the nation’s ongoing economic health and “expressed concerns that under-investing in HIT could prolong existing problems or enable them to worsen.”
- June, 2005: Secretary Leavitt unveils plans for the American Health Information Community (AHIC,) to tackle a short list of specific tasks to achieve interoperability of healthcare data and computer systems and to lay the groundwork for an Internet-based national information network. To show his commitment to the effort, Secretary Leavitt announced he would chair AHIC.
- June, 2005: Secretary Leavitt and the Office of the National Coordinator for Health Information Technology announces four requests for proposals: They are intended to

unify and harmonize health IT standards; develop a certification process for health IT products; devise prototypes for a national health information network architecture; and develop solutions to ensure privacy and security of health information exchange.