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Vice President

Human Resources Policy

The Honorable John D. Dingell Chairman, Committee on Energy and Commerce United States House of Representatives 2328 Rayburn House Office Building Washington, DC 20515-2215 July 18, 2008

The Honorable Joe Barton Ranking Member, Committee on Energy and Commerce United States House of Representatives 2109 Rayburn House Office Building Washington, DC 20515-4306

Dear Chairman Dingell and Ranking Member Barton:

On behalf of the National Association of Manufacturers (NAM) – the nation's largest industrial trade association representing small and large manufacturers in every industrial sector and in all 50 states – thank you for your leadership in advancing legislation that supports the use and integration of health information technology (HIT). Manufacturers agree that with proper implementation, HIT can cut rising healthcare costs; save lives and create a more transparent marketplace for business and individual purchasers in order to develop an increasingly consumer-friendly health care system.

It is critical that HIT legislation be enacted this year, as health information technology has the potential to reduce medical costs, prevent deadly errors and promote innovation in medical research. We appreciate the hard work that was put forth in developing H.R. 6357- the 'Protecting Records, Optimizing Treatment, and Easing Communication through Healthcare Technology Act of 2008' - or the 'PRO(TECH)T Act of 2008'. Our members recognize the importance of and support health IT standards and the infrastructure required to ensure seamless deployment, measurement, and reporting. That being said, other provisions in the bill could complicate the very goals that HIT promises - specifically H.R. 6357's provisions on consent. We are hopeful our concerns will be fully considered and addressed as H.R. 6357 quickly moves through the legislative process.

Our primary concern regarding the consent issue is embodied in section 312(d), which requires all providers who adopt electronic medical records to obtain consent before using the information for health care operations. Current law calls for the minimal use of personal information to treat patients combined with "implied consent" for treatment, and other essential activities. This law has worked well and was carefully crafted to strike the appropriate balance of protecting information while enabling providers to do their job. Requiring providers to obtain consent for the many activities they perform could significantly delay or hinder key services such as population based studies that require a certain threshold of participation in order to provide value or tracking information in cases where an infection breaks out.

We recognize the careful balance that is required between protecting patient privacy and ensuring health care professionals have access to the patient medical information needed to provide effective care. Patient privacy and security are extremely important; however, the safe-keeping of information should not come at the expense of providing quality and efficient care. We appreciate the opportunity to express our comments to you and look forward to working with the Committee as the bill goes through the legislative process to address these concerns.

Kind regards,

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