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# Congress of the United States

## House of Representatives

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## SUBCOMMITTEE ON GOVERNMENT MANAGEMENT, ORGANIZATION, AND PROCUREMENT

### OPENING STATEMENT OF CHAIRMAN EDOLPHUS TOWNS

#### **“TOO MANY COOKS? COORDINATING FEDERAL AND STATE HEALTH IT”**

**November 1, 2007, 2:00 p.m. 2154 Rayburn**

The Subcommittee will come to order. I want to welcome everyone here today to what I consider an extremely important hearing. Our nation is on the verge of a revolution in health services delivery through health information technology, or health IT. This revolution, the transition from paper to electronic health records, can reduce medical errors, enhance security and privacy of medical records, and enhance quality of care for medically underserved communities, like my own district in Brooklyn.

I will be frank. I am concerned about how we are currently managing our health IT initiatives. I am concerned that we are developing top-down solutions and not fully connecting them to the reduction of health disparities in the communities that need them the most. I am worried that the programs that state and local governments have started will ultimately be bypassed by a one-size federal solution. But I am also concerned that there is too much duplication of effort and expense as different states start different programs.

I know that Dr. Kolodner and his team have been hard at work – with not enough resources I might add – in terms of developing this health information highway. I just want to make sure that the people from my community in Brooklyn and communities like it all over the country don't get left behind, and that our state, local, and community initiatives are not discarded. I know that encouraging innovation from our local officials is a policy that the ranking member Mr. Bilbray shares.

So I would like our very knowledgeable expert witnesses to tell us how to reconcile the national standards that we will ultimately need with existing state, local, and community health IT initiatives.

I don't think health IT is at all a partisan issue. I don't play football with the lives of people in need. For those of you who know me, I have worked in a bipartisan fashion regardless of who is in the majority and I will work hard to do so again. That's why I hope today we can find some solutions that address everybody's concerns.

Because of my concern and the concern of many others in Congress about the need to connect health IT with underserved communities, I am going to announce a new House caucus, the Health IT Empowerment Caucus, that will focus on doing just that. We plan to work with the Administration, the 21st Century Caucus, and local and private sector groups to develop inclusive language, programs and grant opportunities that connect health IT with the reduction of health disparities.

In this regard, I would like to welcome other Members who have been active on these issues. I would like to thank Congresswoman Doctor Donna Christian Christensen for her work as the leader of the Congressional Black Caucus Braintrust. I know that you have taken a leadership role in working on the reduction of health disparities and I am proud to be an original cosponsor of H.R. 3014, the Health Equity and Accountability Act of 2007.

I would also like to thank Congressman Lacy Clay of St. Louis for his efforts, especially his work last year on the Electronic Health Information Technology Act of 2006.

I would also like to welcome those seated in the audience who have worked long and hard to connect health IT with the reduction of health disparities. I know that you have waited for some time for the formal acknowledgement of your efforts and I hope that you will work with us in the House Health IT Empowerment Caucus to make this happen.

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