January 29, 2016

The Honorable Lamar Alexander
Chairman
Senate Committee on Health,
Education, Labor and Pensions
428 Senate Dirksen Office Building
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Senate Committee on Health,
Education, Labor and Pensions
428 Senate Dirksen Office Building
Washington, DC 20510

Dear Chairman Alexander, Ranking Member Murray, and the esteemed members of the Committee:

On behalf of 18,000 board-certified orthopaedic surgeons, the American Association of Orthopaedic Surgeons (AAOS) would like to commend you for your work on the bipartisan discussion draft for legislation that would help improve health information technology for doctors and their patients. The AAOS believes that health information technology (health IT) is a fundamental component to improving our nation’s healthcare system and has been working to increase the adoption of health IT among its members.

**Transparent Ratings on Usability and Security to Transform Information Technology**

The AAOS commends the committee on incorporating in this discussion draft the Transparent Ratings on Usability and Security to Transform Information Technology (TRUST-IT) language developed by Senators Cassidy and Whitehouse. The current marketplace for electronic health records (EHR) is overwhelming and providers are offered no guarantee that the product they purchase will be interoperable, efficient, effective, and secure. This language would address these issues by establishing a transparent EHR rating system and updating the EHR certification process by requiring vendors to report on established criteria.

**Information Blocking and Interoperability**

The AAOS would like to thank the committee for including language that would combine the HIT Policy Committee and the HIT Standards Committee into one synchronous group, the HIT Advisory Committee. The AAOS believes that stakeholder involvement is critical to move the health system forward and to improve health care quality and value. The AAOS was pleased to see that the HIT Advisory Committee would include providers; however, we encourage you to ensure that specialty physicians are well-represented by changing the HIT Advisory Committee makeup to include “at least one primary care provider and at least one specialty care provider.” Elsewhere in this discussion draft the HELP Committee has noted the importance of engaging specialty care providers, as they have needs and experiences that are unique to those of primary care providers.
Leveraging Health Information Technology to Improve Patient Care

AAOS supports the establishment of the definition for the term “clinician-led clinical data registry” and the reference to a clinical data repository. There is only one statutory definition of a clinical registry - a Qualified Clinical Data Registry (QCDR) approved to facilitate physician reporting to the Physician Quality Reporting System. However, there are a number of registries that are not designed for physician quality reporting. Access to administrative (claims) data is becoming increasingly important to registries. In the Medicare Access and CHIP Reauthorization Act, Congress will allow QCDRs to purchase Medicare claims data. Due to the fact that there was no definition of a Clinician-led Clinical Data Registry, access could not be expanded to other types of registries. Having a statutory definition for the term “clinician-led clinical data registry” will help Congress encourage interoperability among Electronic Health Records (EHRs) as well as collaboration with registries for eventual EHR-registry collaboration.

Empowering Patients and Improving Patient Access to their Electronic Health Information

The AAOS recognizes the importance of patient engagement in medical care, and appreciates the draft’s focus on partnering with health information exchange organizations, networks, providers, plans, and other entities in an effort to ensure patients are involved in their medical care.

Sincerely,

David D. Teuscher, MD
President
American Association of Orthopaedic Surgeons