



**200,000 Physicians Strong**

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The Honorable Bart Gordon  
Chairman, Committee on Science & Technology  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Gordon:

On behalf of the Alliance of Specialty Medicine, a coalition of 11 Medical Specialty Societies representing nearly 200,000 specialty physicians in the United States, we are writing to thank you for your efforts to advance health information technology (HIT) legislation. We believe that your legislation, H.R. 2406, authorizing the National Institute of Standards and Technology (NIST) to enhance efforts to integrate healthcare information enterprises in the United States promotes widespread adoption of effective HIT. We commend you for your work in this area.

An integrated information enterprise is critical for useful HIT. Involving an entity, such as NIST, with the capacity to promote guidelines and standards in the public and private sectors will encourage functional uniformity among HIT products. Current problems resulting from the fragmentation of healthcare in the United States would be greatly diminished and physicians will be able to choose a product that conforms to specific practice needs while also ensuring adequate and appropriate information is available to other providers. In addition, encouraging interoperability between entities through research and development grants to institutions of higher education and for profit/non profit centers that promise to form "Centers for Healthcare Information Enterprise Integration" will establish a precedent of the importance of interoperability.

As Congress addresses this legislation or similar legislation in the future, we hope that additional efforts to promote HIT and interoperability include more financial assistance for physicians to obtain HIT. As you know, small physician practices and physicians not affiliated with institutions of higher education will continue to face challenges in financing the purchase of integrated HIT systems. Efforts to ease the burden on physicians seeking to purchase health information technology, especially in the face of annual updates below medical inflation due to the flawed sustainable growth rate (SGR) formula, are greatly appreciated.

It is also essential to identify, early-on, any problems with HIT in order to minimize costs and mitigate risks prior to widespread adoption. A realistic timeline for HIT adoption should allow ample time to develop, test, and validate appropriate HIT criteria, standards and guidelines. Physicians, largely inexperienced with HIT, will also benefit from a timeline that allowed sufficient time to acclimate to a new system.

On behalf of the Alliance for Specialty Medicine, thank you for your leadership in advancing the quality of our health care system and including physicians, those most affected by practice changes, in the process. We look forward to continuing to work with you on this legislation and the establishment of HIT, and implementation and

interoperability standards. Should you need further information, please contact the co-chairs for the Quality and Health IT workgroup for the Alliance for Specialty Medicine, Dave Adler ([davea@astro.org](mailto:davea@astro.org)) or Emily Graham ([egramham@ascrs.org](mailto:egramham@ascrs.org)).

Sincerely,

American Academy of Dermatology Association  
American Association of Neurological Surgeons  
American Association of Orthopaedic Surgeons  
American College of Emergency Physicians  
American College of Obstetricians and Gynecologists  
American Gastroenterological Association  
American Society For Therapeutic Radiology and Oncology  
American Society of Cataract and Refractive Surgery  
American Urological Association  
Congress of Neurological Surgeons  
National Association of Spine Specialists