July 30, 2020

Dear Representative:

The Patient ID Now coalition urges you to support the amendment being offered by Representative Bill Foster (IL) and Representative Mike Kelly (PA) to HR 7617, the "Defense, Commerce, Justice, Science, Energy and Water Development, Financial Services and General Government, Homeland Security, Labor, Health and Human Services, Education, Transportation, House and Urban Development Appropriations Act of 2021." This amendment strikes Section 510 of the Labor-HHS Appropriations bill, which currently prohibits the US Department of Health and Human Services from spending any federal dollars to promulgate or adopt a national patient identifier.

For nearly two decades, innovation and industry progress have been stifled due to a narrow interpretation of this language included in Labor-HHS bills since FY1999. More than that, without the ability of clinicians to correctly connect a patient to their medical record, lives have been lost and medical errors have needlessly occurred. These are situations that could have been entirely avoidable had patients been able to have been accurately identified and matched with their records. This problem is so dire that one of the nation's leading patient safety organizations, the ECRI Institute, named patient identification among the top ten threats to patient safety.[1]

Now, more than ever, the current COVID-19 pandemic highlights the urgent need to lift this archaic ban. Accurate identification of patients is one of the most difficult operational issues during a public health emergency. Field hospitals and temporary testing sites in parks, convention centers, and parking lots intensify these challenges. Laboratories that are testing patient specimens are reporting that patient misidentification is causing COVID-19 test results to be returned to the wrong patient, and a lack of comprehensive patient demographic data is causing some samples to not be returned to a patient at all. Ensuring the correct patient medical history is accurately matched to the patient is critical for future patient care, patients' long-term access to their complete health record, and for tracking the long-term health effects of COVID-19. Furthermore, in the coming months, any large-scale immunization programs will depend on accurate patient information to identify who has had the disease, who has been vaccinated, and what their outcomes are.

It is clear that COVID-19 disproportionately impacts underserved populations and communities of color. This is further exacerbated by patient misidentification. In particular, evidence suggests that patient matching errors disproportionately impact Black and Latino patients, and homeless, migrant, and corrections populations. Congress must take action to protect patients who are most vulnerable during the current pandemic and ensure that their care is not further impacted by an inability to match them to their health record.

Striking Section 510 from the Labor-HHS appropriations bill will provide the US Department of Health and Human Services the ability to evaluate a full range of patient matching solutions and enable it to work with the private sector to identify a solution that is cost-effective, scalable, secure and one that protects patient privacy. **The Patient ID Now coalition urges you to vote "YES" on the Foster-Kelly Amendment to HR 7617.**

---

[1] Top 10 Patient Safety Concerns for Healthcare Organizations, Available at:
https://www.ecri.org/EmailResources/PSRQ/Top10/2017_PSTop10_ExecutiveBrief.pdf

Sincerely,

4medica
Alliance of Community Health Plans
American Academy of Neurology
American Academy of Ophthalmology
American College of Cardiology
American College of Obstetricians and Gynecologists
American College of Physicians
American College of Surgeons
American Health Information Management Association (AHIMA)
American Heart Association
American Medical Informatics Association (AMIA)
Association of Health Information Outsourcing Services (AHIOS)
Augusta Health
Better Identity Coalition
Billings Clinic
Center for Intelligent Health Care at University of Nebraska
Cerner
Children's Hospital Association
College of Healthcare Information Management Executives (CHIME)
CoverMyMeds
DirectTrust
Duke Center for Health Informatics
Eating Disorders Coalition
eHealth Exchange
eHealth Initiative
Electronic Health Record Association
Experian Health
Faith Regional Health Services
Federation of American Hospitals
Health Innovation Alliance
Healthcare Information and Management Systems Society (HIMSS)
Healthcare Leadership Council
Healthix, Inc
himagine solutions, Inc.
Imprivata
Intermountain Healthcare
Iowa Health Information Network
Just Associates
Kuakini Health System
L.A. Care Health Plan
Lakeland Regional Health System
Logica, Inc (formerly Healthcare Services Platform Consortium)
Mass General Brigham
Medical Group Management Association
Montage Health
National Association for the Support of Long Term Care

National Association of Healthcare Access Management
Nemours Children's Health System
Netsmart
NextGate
NextGen Healthcare
Norman Regional Health System
Nuance
OCHIN
Parkview Health
Premier healthcare alliance
Silver Cross Hospital
Southcoast Health
Strategic Health Information Exchange Collaborative (SHIEC)
The Joint Commission
The Sequoia Project
Trinity Health
U Health, University of Utah