April 24, 2023

The Honorable Kay Granger, Chair House Committee on Appropriations 2308 Rayburn House Office Building Washington, DC 20515

Washington, DC 20515

The Honorable Robert Aderholt, Chairman Subcommittee on Labor, Health, and Human Services, Education, and Related Agencies House Committee on Appropriations 266 Cannon House Office Building

The Honorable Rosa DeLauro, Ranking Member House Committee on Appropriations; and Subcommittee on Labor, Health and Human Services, Education, and Related Agencies 2413 Rayburn House Office Building Washington, DC 20515

Dear Chairwoman Granger, Ranking Member DeLauro, and Chairman Aderholt,

As you prepare the FY2024 Labor, Health and Human Services, Education, and Related Agencies Appropriations bill, we respectfully request that you include report language that directs the Office of the National Coordinator for Health Information Technology (ONC) within the US Department of Health and Human Services (HHS) to spend \$7 million of the funds appropriated on efforts to improve patient matching.

Specifically, we request that the following report language be included:

The Committee is concerned there is no consistent and accurate way to link patients to their health information as they seek care across the continuum. Health information must be accurate, timely, and robust to inform clinical care decisions for every patient. ONC should work with industry to develop such matching standards that prioritize interoperability, patient safety, and patient privacy. The Committee directs \$7 million of the funds appropriated to ONC to be used for this purpose in collaboration with industry.

ONC has identified the need to have agreed upon patient matching metrics and transparent, public reporting associated with patient matching performance to support industry progress and competition. By assigning funds for ONC to use to improve and support patient matching efforts within the US healthcare system, the House of Representatives will continue its bipartisan goal of ensuring patients can be accurately matched to their health information.

We urge the Committee to act to improve the state of patient misidentification in the US, and include this report language in the FY2024 Labor, Health and Human Services, Education, and Related Agencies Appropriations bill.

Sincerely,

AAHIM Alabama Association of Health Information Management ADVION (NASL)
Alliance for Nursing Informatics

Alliance of Community Health Plans (ACHP)

American College of Obstetricians and Gynecologists

American Health Information Management Association (AHIMA)

American Medical Informatics Association

Arizona Health Information Management Association

Arkansas Health Information Management Association

California Health Information Association

CIVITAS Networks for Health

College of Healthcare Information Management Executives (CHIME)

Council of State and Territorial Epidemiologists

CRISP Shared Services

DirectTrust

Duke Center for Health Informatics

Florida Health Information Management Association (FHIMA)

Georgia Health Information Management Association

Global Patient Identifiers, Inc.

Harris Data Integrity Solutions/ Just Associates

HIMSS Electronic Health Record Association

Intermountain Health

Kansas Health Information Management Association

LexisNexis Risk Solutions

Louisiana Health Information Management Association

Massachusetts Health Information Management Association (MaHIMA)

MdHIMA

Medical Group Management Association

MeHIMA

Minnesota Health Information Management Association

Naphsis

NDHIMA

OCHIN

OHIO Health Information Management Association

Oklahoma Health Information Management Association

PacificEast Research Inc.

Parkview Health

Pennsylvania Health Information Management Association (PHIMA)

SCHIMA

South Dakota HIMA

Tennessee Health Information Management Association

Trinity Health

TxHIMA

Verato

Wisconsin Health Information Management Association (WHIMA)