

that researchers and scientists and doctors nationwide can consult in treating patients and curing diseases.

It's cutting edge medicine that has the potential to change the way we treat everything from diabetes to cancer.

But it will only work the way it's supposed to if electronic health records systems work the way they are supposed to.

Number one, electronic health records can help to assemble and understand the genomes of the one million individuals. And, second, if we want to make genetic information useful, being able to exchange information will help doctors when they write a prescription for you.

So that's just one important medical breakthrough initiative that will rely on a big improvement to electronic health records.

This committee is interested not least because the government has invested \$30 billion to encourage doctors and hospitals to install these expensive systems.

The program has increased adoption. According to the Centers for Medicare and Medicaid Services (CMS), since 2009, the percentage of physicians with a basic electronic health record system has grown from 22 percent to 48 percent. And the percentage of hospitals with a basic records system has grown from 12 percent to 59 percent. But the program hasn't done enough to make the systems easy to use or interoperable—meaning able to communicate with one another—or really achieved much beyond adoption.

According to a Medical Economics survey nearly 70 percent of physicians say their electronic health record systems have not been worth it. They are spending more time taking notes than taking care of patients, and they are spending a lot of their own money on systems that have to comply with government requirements, not satisfying their own needs to serve patients with the latest in cutting edge medicine that could be accessed with the kind of technology Health IT is supposed to promise.

Or as the conservative columnist Charles Krauthammer, a doctor himself, wrote recently: "The EHR technology, being in its infancy, is hopelessly inefficient. Hospital physicians will tell you endless tales about the wastefulness of the data collection and how the lack of interoperability defeats the very purpose of data sharing."

Today we have invited experts representing various perspectives:

Medical informatics, the profession focused on what information to use and how to use it to improve care; a records system vendor, one of the companies tasked with building the records systems; a health system chief information officer, the expert in charge of implementing Health IT for a hospital's many different types of care providers across many different types of care settings; and the perspective of the patient so that we can hear recommendations on how improvements in Health IT can improve the patient experience and patient involvement in their own care.

I am especially interested to hear from our witnesses their recommendations to improve the exchange of health information, which has been a glaring failure of the current state of electronic health records.

Patients will receive better care if we can improve the exchange of information so that a patient's health record can be accessed by physicians and pharmacists in an efficient and reliable way, the term industry experts use for this exchange of information is interoperability.

We're fortunate that a report was published May 28, 2015, by the American Medical Informatics Association offering immediate strategies to the challenges in electronic

health records that I've been detailing. The report was written by a task force of experts from all aspects of Health IT: physicians, researchers, vendors, patient advocates, and others.

We know that improvements need to be made to these programs, and they need to be done quickly. One of the things I like about this report is that the recommendations are targeted for the next 6 to 12 months and could make improvements quickly.

The report makes recommendations in these five areas:

Simplify and speed documentation—that means using technology to help doctors spend less time taking notes and more time taking care of patients.

Refocus regulation—that means the government requirements should be clear, simple, and streamlined towards better patient care.

Increase transparency and streamline certification, such as using detailed tests for records systems to receive certification, so purchasers can easily judge performance and compare products.

Foster innovation—The brilliant minds working in Information Technology should be allowed to innovate new ideas, not just react to satisfying government ideas for Health IT. Standards are important, but they should support and enable innovations—not stifle them.

And "support person-centered care delivery"—Today, with a click of a mouse or a swipe on a smart phone, one can see the prices for airplane tickets from competing airlines or, mortgage rates from hundreds of banks. But, in health care, Information Technology has not made much difference to the patient experience. Patients still fill out paper forms with clipboards at every doctor appointment, call multiple offices to make appointments, and piece together their health information one doctor office and one hospital visit at a time. Electronic health records could change that experience for all of us so that when an individual visits a doctor, his care team can access his information no matter where the patient has been or which doctors he's seen in the past and deliver more accurate and higher quality care for the patient.

I look forward to hearing our witnesses' recommendations, their thoughts on this report, and also advice on how we can make improvements as quickly as possible.

ADDITIONAL STATEMENTS

COMMEMORATING THE 100TH ANNIVERSARY OF KIWANIS INTERNATIONAL

● Mr. DONNELLY. Mr. President, today I wish to honor Kiwanis International for its 100th anniversary celebration. Since its formation in 1915, Kiwanis has become a global service organization, supporting communities both in its Indianapolis headquarters and beyond.

Last year, I had the pleasure of meeting Stan Soderstrom, who serves as the executive director of Kiwanis International and oversees the organization's branches and clubs in 80 nations, from the Kiwanis Club of Pike Township in Indianapolis. With a hands-on approach and great leadership from folks like Stan, as well as previous leaders such as State Representative Christina Hale, Kiwanis clubs provide a

place for fellowship, as well as personal and community growth. Kiwanis and its affiliates boast more than 600,000 members who raise more than \$100 million and contribute more than 18 million volunteer hours each year. Their impact is tremendous and felt globally.

In the State of Indiana, there are more than 190 Kiwanis clubs and more than 6,000 adult members participating in a wide variety of charitable efforts. Kiwanis has served the Indianapolis area by providing everything from playground projects to scholarship programs. Hoosier Kiwanis clubs have raised more than \$234,000 to benefit the Child Life program at Riley Hospital for Children and contributed more than \$1.1 million toward the Eliminate Project, which works with developing countries to help immunize millions of women in the fight against maternal and neonatal tetanus. These Hoosiers serve as an example of the hard work and service that make Indiana a great place to live. Each year, Kiwanis clubs in Indiana serve nearly 300,000 children and youths, raise more than \$1.1 million, and donate more than 50,000 volunteer hours of invaluable service. I commend the Indiana district Kiwanis leaders for these great accomplishments in doing good for Indiana communities and the world.

On behalf of the citizens of Indiana, I congratulate and thank each and every member of Kiwanis International for helping Kiwanis evolve into the thriving and impactful organization that it is today. For a century, Kiwanians have faithfully served their local communities and communities around the world. I wish them continued growth and success for many more years to come.●

CONGRATULATING THE UNIVERSITY OF NEVADA, LAS VEGAS ROBOTICS TEAM

● Mr. HELLER. Mr. President, today, I wish to congratulate the University of Nevada, Las Vegas, UNLV, robotics team on being selected as one of the top ten in the world by competing in the 2015 U.S. Defense Advanced Research Projects Agency Robotics Challenge. The competition included a dozen teams from the United States, including the Massachusetts Institute of Technology, the National Aeronautics and Space Administration, and Lockheed Martin. Eleven teams from Japan, Germany, Italy, South Korea, and Hong Kong also participated.

The competition was initially created in response to the humanitarian need after the Fukushima Daiichi nuclear reactor incident in 2011. The goal of the program remains to accelerate the development of advanced robots capable of entering areas too dangerous for humans and acting as first responders in the disaster zone. The robots chosen as finalists, including UNLV's Metal Rebel, competed in eight tasks related to disaster response, including climbing stairs, turning valves, tripping circuit breakers, walking among