



# THE COMMITTEE ON ENERGY AND COMMERCE

## MEMORANDUM

April 29, 2014

To: Health Subcommittee Members

From: Majority Committee Staff

Re: “Telehealth to Digital Medicine: How 21st Century Technology Can Benefit Patients”

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On Thursday, May 1, 2014, the Subcommittee on Health will hold a hearing entitled “Telehealth to Digital Medicine: How 21st Century Technology Can Benefit Patients.” The Subcommittee will convene at 10:00 a.m. in 2123 Rayburn House Office Building. Below is background on the hearing.

### **I. Witnesses**

- Dr. Rashid Bashshur, Executive Director for eHealth, University of Michigan Health System, Professor Emeritus, University of Michigan School of Public Health;
- Dr. Ateev Mehrotra, Policy Analyst, Rand Corporation, Associate Professor of Health Care Policy and Medicine, Harvard Medical School;
- Dr. Tom Beeman, President and Chief Executive Officer, Lancaster General Health;
- Gary Chard, Delaware State Director, Parkinson’s Action Network; and,
- Kofi Jones, Vice President of Public Affairs, American Well.

### **II. Background**

The term “telehealth” was first coined in the 1970’s to define technologies that can help “improve patient outcomes by increasing access to care and medical information.”<sup>1</sup> At the time, it was usually thought of as a solution to improve health care access for rural and medically underserved areas via the use of telephones, televisions, and other relevant technologies of the day.

Thinking on the types of technologies and services associated with telehealth has changed since the 1970s. Whereas once it was thought of mainly as the utilization of technologies for dealing with health care access issues related to geography, the term “telemedicine” more

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<sup>1</sup> WHO. *Telemedicine: opportunities and developments in Member States: report on the second global survey on eHealth*, Geneva, World Health Organization, 2009.

recently has been introduced to account for areas of telehealth, as well as newer technologies and concepts such as digital imagery and virtual patient visits. The introduction of digital forms of communication and application, combined with their relatively cheap cost, has increased interest in the application of telemedicine from all sides of the health care sector and encouraged providers, payers, and others to experiment with 21st century technologies as a means of identifying new and efficient ways of delivering care.

Unfortunately, there exists no common definition used to describe the broad use of these technologies. As evidence of this, a 2007 study found 104 separate peer-reviewed definitions of the word “telemedicine.”<sup>2</sup> The World Health Organization has sought to create commonality of understanding with regards to the word by defining it as:

The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation, and for the continuing education of health care providers, all in the interests of advancing the health of individuals and their communities.<sup>3</sup>

Whatever the definition, it appears to be widely-accepted that 21st century technologies hold great promise for the future of our health care system. How to best utilize these new tools, however, is less of a consensus position.

The purpose of this hearing is to begin a discussion on the types of technologies that hold promise for the future of our health care system, explore the positive and negative implications of adopting such technologies, and identify targeted ways that such technologies could help us transform the quality and improve the delivery of health care in the United States.

### **III. Conclusion**

Should you have any questions regarding the hearing, please contact Robert Horne, Chris Pope, or Clay Alspach at 202-225-2927.

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<sup>2</sup> Sood SP, et al. *Differences in public and private sector adoption of telemedicine: Indian case study for sectoral adoption*. Studies in Health Technology and Informatics, 2007.

<sup>3</sup> WHO. *A health telematics policy in support of WHO's Health-For-All strategy for global health development: report of the WHO group consultation on health telematics, 11–16 December, Geneva, 1997*. Geneva, World Health Organization, 1998.