



33 W Monroe, Suite 1700  
Chicago, IL 60603  
[swillis@himss.org](mailto:swillis@himss.org)  
Phone: 312-915-9518  
Twitter: @EHRAssociation

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March 21, 2018

The Honorable Morgan Griffith  
House Committee on Energy & Commerce  
U.S. House of Representatives  
2125 Rayburn House Office Building  
Washington, DC 20515

Dear Representative Griffith,

On behalf of the members of the Electronic Health Record (EHR) Association, we thank you for your leadership in drafting an amendment to the Comprehensive Addiction & Recovery Act (CARA) 2.0 of 2018 to further recognize and prioritize the many ways in which health information technology and other digital solutions can play an important role in tackling the nation’s unfortunate opioid and opiate epidemic.

The EHR Association’s more than 30 member companies serve the majority of hospitals and ambulatory care providers across the United States. Our core objectives focus on collaborative efforts to improve the quality and efficiency of care through the use of these important technologies, and we recently formed an Opioid Crisis Task Force to examine how to best utilize EHR systems’ data and capabilities as a tool in nationwide efforts to fight opioid abuse.

Information technology, such as EHRs, information exchange solutions, and Prescription Drug Monitoring Programs (PDMPs) are already playing a role in tackling the opioid crisis and have tremendous potential to do much more. As represented in your discussion draft, our solutions can be used to identify problematic prescribing patterns, patients already addicted, and patients at high risk of becoming addicted.

Further, our technologies play a critical role in:

- Exchanging information between clinicians to alert to “drug shopping” behaviors
- Integrating with the numerous and disparate PDMPs
- Providing tools to support ePrescribing of Controlled Substances (ePCS) approaches being implemented by states
- Supporting physicians through clinical decision support tools in developing comprehensive approaches to pain management as they look beyond prescriptions to help their patients

Policy actions by Congress and the Administration that support maximization of technology or the removal of obstacles to success are critical, and we thank you for identifying several key opportunities within your draft.

Over the last several months, we have worked not only within our own Association but also in partnership with other healthcare stakeholders to identify ways in which EHRs and other health IT can be helpful in this fight; we would be happy to share with your staff what we have learned and some of our ideas for moving forward productively. Please contact Leigh Burchell, VP of Policy and Government Affairs at Allscripts and Chair of the EHRA Opioid Crisis Task Force, at [leigh.burchell@allscripts.com](mailto:leigh.burchell@allscripts.com) or Sarah Willis-Garcia, EHRA Program Manager, at [swillis@himss.org](mailto:swillis@himss.org).

Sincerely,



Sasha TerMaat  
Chair, EHR Association  
Epic



Cherie Holmes-Henry  
Vice Chair, EHR Association  
NextGen Healthcare

#### HIMSS EHR Association Executive Committee



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#### About the EHR Association

Established in 2004, the Electronic Health Record (EHR) Association is comprised of more than 30 companies that supply the vast majority of EHRs to physicians' practices and hospitals across the United States. The EHR Association operates on the premise that the rapid, widespread adoption of EHRs will help improve the quality of patient care as well as the productivity and sustainability of the healthcare system as a key enabler of healthcare transformation. The EHR Association and its members are committed to supporting safe healthcare delivery, fostering continued innovation, and operating with high integrity in the market for our users and their patients and families.

The EHR Association is a partner of HIMSS. For more information, visit [www.ehra.org](http://www.ehra.org).

CC:

The Honorable Greg Walden  
The Honorable Frank Pallone, Jr.  
The Honorable Michael Burgess, M.D.  
The Honorable Gene Green