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ONE HUNDRED THIRTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115
Majority (202) 225-2927
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September 3, 2014

Mr. Dan Riskin
President
Health Fidelity
459 Hamilton Avenue, Suite 205
Palo Alto, CA 94301

Dear Mr. Riskin:

Thank you for appearing before the Subcommittee on Communications and Technology and Subcommittee on Health on July 17, 2014, to testify at the joint hearing entitled "21st Century Technology for 21st Century Cures."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

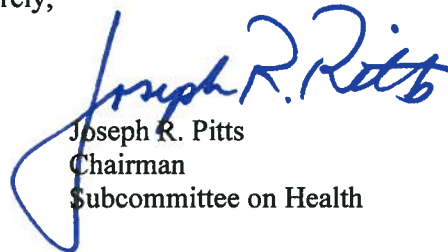
To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on Wednesday, September 17, 2014. Your responses should be mailed to Charlotte Savercool, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to Charlotte.Savercool@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Greg Walden
Chairman
Subcommittee on Communications
and Technology



Joseph R. Pitts
Chairman
Subcommittee on Health

cc: Anna Eshoo, Ranking Member, Subcommittee on Communications and Technology
Frank Pallone, Ranking Member, Subcommittee on Health

Attachment

Attachment—Additional Questions for the Record

The Honorable Joe Pitts

1. The characteristics of big data - Velocity, Variety and Volume - are often minimized when used for healthcare due to the complexity and restraints of HIPAA. Does Congress need to take a fresh look at our privacy laws to enable patients to become “data donors”, giving consent to allow their medical data to be shared for longitudinal research.
2. What are the barriers to deploying genomics data into clinical care? When can we expect to see the ultimate big data incorporated into Electronic Health Records to enable personalized medicine to replace many of the trial and error treatments patients receive today?
3. You state in your testimony that “data-driven healthcare not only assures the right information is available for the right patient at the right time, but also provides pathways for information to be used in less traditional ways, such as population health and patient engagement. In your opinion, what barriers currently exist that this committee and the general public should keep in mind when thinking about the potential of data-driven health care? For instance, some previous witnesses have stated that while the intent of HIPAA is great, it has become burdensome in some areas and actually prohibit the kind of patient empowerment and interaction that we all believe is necessary. Are there others?
4. You state in your testimony that “through the meaningful use program, our country has footed much of the cost of electronic capture of clinical data.” Then you go on to ask “Why wouldn’t we require that all data we capture be available for use by innovative companies and technologies that improve care.” Can you expand on this idea? Are there barriers that currently prohibit such sharing?

The Honorable Anna Eshoo

1. What are your top two policy recommendations that Congress could undertake to improve the adoption of telemedicine?
2. What are additional steps we can take to encourage interoperability with electronic health records, while ensuring patient privacy and HIPPA standards?