



Protecting, maintaining and improving the health of all Minnesotans

April 24, 2009

David Blumenthal, M.D., M.P.P.
National Coordinator
Office of the National Coordinator
Hubert Humphrey Building
200 Independence Avenue, Suite 729-D
Washington, DC 20201

Dear Dr. Blumenthal:

For the past five years, the Minnesota Department of Health has convened and led the Minnesota e-Health Initiative, a statewide public-private partnership of Minnesota health care stakeholders, to advance the adoption and effective use of health information technology. The work of this initiative has provided valuable insights into the challenges faced by providers in the adoption and use of electronic health records. **There are two areas of utmost concern that I would like to draw your attention to as you work to define the details for implementation of the HITECH Act.**

The primary barrier that has risen to the top of our discussions that providers must overcome in order to adopt, implement and effectively use health information technology is the lack of access to capital resources. In Minnesota we have attempted to provide assistance to health care providers in meeting the capital challenge, but the need identified has greatly exceeded the resources we have available. In 2006, the Minnesota Legislature appropriated \$14.6 million in grant and loan programs to support adoption of interoperable electronic health records, and targeted these funds toward rural and safety net providers. From 2006-2008, \$8.3 million was distributed through the e-Health Grant Program. Grant requests during this period totaled more than \$27 million, leaving an identified gap of more than \$18 million. Similarly, during the same time period, Minnesota distributed \$6.3 million through our EHR Loan Program. Requests for loans exceeded \$14 million, leaving an additional unmet need greater than \$7.7 million.

Assisting providers in accessing the capital resources necessary to adopt and implement electronic health records is the cornerstone in realizing the intended benefits of HITECH to improve health care quality, safety and efficiency. **Understanding that Section 3014 of the HITECH Act is an optional mechanism for ONC to employ in carrying out the Act, we believe accessing the capital resources is essential. On behalf of the Minnesota Department of Health and the Minnesota e-Health Initiative, I urge you to give priority to this critical program in implementing the HITECH Act.**

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The second most commonly cited barrier among our health care providers is the lack of technical “know-how” necessary to purchase, implement, and integrate these technologies into their practice. **We are encouraged by the inclusion of resources under Section 3012 for the creation of extension centers at the national and regional level to assist providers in meeting this challenge. As you move forward in the implementation of this aspect of HITECH, we would encourage you to take into consideration the need for the regional centers to be as close to the communities they serve as possible in order to have the greatest impact.** Having a clear understanding of the context the providers are operating in – including the framework of state laws and regulations, as well as the nuances of the health care community in which they practice – are essential in order to deliver meaningful technical assistance.

Thank you for your time and consideration of these requests. We would welcome the opportunity to answer any questions you have and to provide feedback on other aspects of HITECH implementation based on the work of the Minnesota e-Health Initiative. Please contact Martin LaVenture at 651-201-5950 or martin.laventure@state.mn.us for additional information, or visit the Minnesota e-Health Initiative website at <http://www.health.state.mn.us/e-health/index.html>.

Sincerely,



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Commissioner
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cc: Minnesota Congressional Delegation