ConnectedHealthInitiative

July 1, 2025

The Honorable Vern Buchanan
Chairman
Subcommittee on Health
Committee on Ways and Means
Washington, District of Columbia 20515

The Honorable Lloyd Doggett
Ranking Member
Subcommittee on Health
Committee on Ways and Means
Washington, District of Columbia 20515

The Honorable Jason Smith
Chairman
Committee on Ways and Means
Washington, District of Columbia 20515

The Honorable Richard Neal
Ranking Member
Committee on Ways and Means
Washington, District of Columbia 20515

RE: Hearing titled Health at Your Fingertips: Harnessing the Power of Digital Health Data

Dear Chairman Buchanan, Ranking Member Doggett, Chairman Smith, and Ranking Member Neal:

Thank you for the opportunity to provide testimony for the record for your hearing before the Subcommittee on Health titled "Health at Your Fingertips: Harnessing the Power of Digital Health Data." I applaud the Committee for diving deep on this key priority as you continue to explore health innovation. While there are myriad ways to pursue improving the health of Americans, incenting healthy options is a powerful tool to urge positive change. Wearable health technologies will be integral to supporting value-based care and giving patients options to treat their conditions.

The Connected Health Initiative (CHI) is the leading multistakeholder policy and legal advocacy effort dedicated to improving health outcomes while reducing costs. Our work is driven by the consensus of stakeholders from across the connected health ecosystem. CHI aims to realize an environment in which Americans can see improvements in their health through policies that allow for connected technologies to advance outcomes and reduce costs. CHI members develop and use connected health technologies across a wide range of use cases. We actively advocate before Congress, numerous U.S. federal agencies, and state legislatures and agencies, where we seek to promote responsible pro-digital health policies and laws in areas including reimbursement/payment, privacy/security, effectiveness/quality assurance, U.S. Food and Drug Administration (FDA) regulation of digital health, health data interoperability, and the rising role of artificial intelligence (AI) in care delivery. For more information, see www.connectedhi.com.

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Wearable Health Technology Use Cases

In the last few years, many companies have developed a wide variety of wearable health technology. We have seen some new innovations, like the continuous glucose monitor, make enormous quality of life improvements for people with a specific condition, while others can be used more widely to monitor different aspects of a patient's health.

Wearable health technology can help patients catch new conditions early. In the case of Don Morell, his Fitbit device found evidence of atrial fibrillation (AFib) that he otherwise would have not known about.[1] Don was a healthy army veteran when his Fitbit began to alert him to problems with his heart. The device had detected a state of AFib, a condition in which the upper chambers of the heart do not beat properly and cannot pump blood to the lower chambers of the heart like normal. The condition has several causes and can lead to a variety of concerning implications. Don decided to make an appointment with his primary care doctor, who referred him to a cardiologist. That specialist found an aortic aneurysm—a bulge that occurs in the aorta, blocking proper blood flow and impeding function of different organs. Don now monitors this condition with his doctors and through continued use of his Fitbit.

For Heather Hendershot, heart rate monitoring via her Apple Watch caught a dangerous and often untreated hyperthyroid condition.[2] One night, she received a notification that her heart rate was unusually high—above 120 beats per minute (the average for healthy adults is between 60 and 100 beats per minute while at rest). She says she didn't pay much attention to the alert because she couldn't feel her heart racing, and she was otherwise healthy. However, her husband insisted on a visit to an urgent care clinic the next day. Doctors eventually admitted her to the hospital and diagnosed her with hyperthyroidism. This condition, where the thyroid produces excess thyroxine hormones, can be life-threatening if left untreated. Heather says she would not have caught the condition without the Apple Watch alerts.

Rachael Kabala was an active and healthy woman who had been using Fitbits to track her health data for several years before she became pregnant.[3] During her pregnancy, she noticed that her resting heart rate—generally a low 54 beats per minute on average—had begun to fluctuate and was averaging 58 beats per minute. After the birth of her child, she saw her heart rate drop back down to 53 beats per minute, but it didn't stop there. Her heart rate dropped to an average in the low 40s, and she began to feel her heart pounding. This was concerning enough that she checked her blood pressure and found it was in the hypertension range. She went back to the hospital just two days after discharge following the birth of her child and received a

[1] Fitbit detects aFib and leads to aortic aneurysm detection
[2] High heart rate detection leads to hyperthyroidism diagnosis
[3] Fitbit helps diagnose post-partum preeclampsia

diagnosis of postpartum preeclampsia. This life-threatening condition can lead to seizures, strokes, and organ damage when left untreated. Now, Rachael uses her Fitbit to continue tracking her heart rate and other measures to get a picture of her overall health.

All of these patients used their wearable health technology to diagnose medical conditions with the help of their doctors. They and many others continue to use wearable devices to monitor and treat health conditions with fewer doctor visits and more fine-tuned control. More widespread use of wearable health technology would help patients to better understand their health conditions, reduce doctor visits, and allow more personalized care.

The WEAR IT Act

Just recently, Representatives David Schweikert and Ami Bera introduced H.R. 4203, the Wearable Equipment Adoption Reinforcement and Investment in Technology (WEAR IT) Act. The bill would clarify that wearable health devices and their associated software are eligible for reimbursement through flexible spending accounts (FSAs) and health savings accounts (HSAs). As long as the devices and software are used to diagnose, cure, mitigate, prevent, or treat a health condition through the collection and analysis of physiologic data, patients would be able purchase the items with their FSA or HSA up to $375 per device. CHI supports this bill because of its potential to improve healthcare and reduce costs for patients and the federal government.

For many of CHI's members—which includes small health technology companies—the current path to coverage under HSAs and FSAs is too costly and byzantine to be a viable option. They need the WEAR IT Act to cut through the red tape surrounding HSA and FSA coverage to ensure their innovative products can reach the patients who need them.

Addressing the Physician Shortage

The statistics on physician and provider shortages are grim. The American Association of Medical Colleges (AAMC) estimates that by 2036, there will be a shortage of as many as 86,000 physicians.[4] Additionally if unserved and underserved communities like rural towns, urban environments without sufficient transportation, and difficult-to-reach areas had healthcare usage patterns like those of adequately-served communities, the gap would grow to over 100,000 physicians.[5] This shortage will continue to make healthcare more expensive and harder to access, especially in currently unserved and underserved areas. We need a whole-of-government approach to solving this problem, along with significant private sector investment. Wearable health technology and associated services like remote patient monitoring will help

[4] https://www.aamc.org/news/press-releases/new-aamc-report-shows-continuing-projected-physician-shortage
[5] https://digirepo.nlm.nih.gov/master/borndig/9918417887306676/9918417887306676.pdf

address some of the shortage issues by allowing patients better access to health metrics and empowering those patients to better understand their health.

Digital medicine and telehealth services are a clear value add to the provision of healthcare services, especially in rural areas. The use of wearable health technology by patients in rural areas will help by collecting more detailed information that can improve telehealth detection and treatment. This could be life-changing for patients who live far from their doctors, especially as the physician shortage continues to worsen and underserved areas become unserved.

Chronic care management (CCM), another important issue for Congress and your Committee, is also an area where wearable health technology will help to address issues from the physician shortage. Many long-term conditions like diabetes, hypertension, and atrial fibrillation can be monitored more closely with wearable health technology. The continuous data on key measures can help healthcare providers understand how treatments are affecting the patient and improve patient engagement with their care. Bills like H.R. 3436 (118th), the Chronic Care Management Improvement Act, will help expand access to CCM for Medicare beneficiaries. Although the bill would not directly address wearable health devices, their usefulness in CCM makes them a natural complement to the goals of the legislation.

Interoperability in the Health System

The free flow of information across health systems is life-saving for patients. We need Congress to support interoperability to ensure smooth access to care and timely treatment. A truly interoperable healthcare system facilitates patient engagement across a range of modalities with open application programming interfaces (APIs) that allow the safe and secure introduction of patient-generated health data (PGHD) into electronic health records (EHRs). Data stored in standardized and structured formats with interoperability facilitated by APIs provides analytics as well as near real-time alerting capabilities. The efficacy of precision medicine, population health, and clinical decision support—all critical means for combatting chronic diseases—is dependent in large part on the availability of data. Wearable devices must be part of the interoperability landscape for the future of healthcare. Providers must be able not only to access data from a device or mobile application, but also to synthesize that data into their existing health records to make the best use of it for treatment purposes.

The 21st Century Cures Act prohibits providers, developers, health information exchanges (HIEs), and health information networks (HINs) from practices that are likely to interfere with, prevent, or materially discourage access, exchange, or use of electronic health information (EHI) so that health information may be accessed, exchanged, and used without special effort through the use of application programming interfaces, including providing access to all data

elements of a patient's EHR. Yet, Congress' goals in this law, passed in 2016, are far from realized. Although federal regulations have been fully in effect since 2022, patients and providers still face major barriers to interoperability and access to health information, often stemming from a subset of developers that elect to use tactics amounting to illegal information blocking. These practices delay care coordination, undermine clinical decision-making, and stall innovation. Enforcement of the information blocking rules, developed consistent with Congressional intent in the 21st Century Cures Act, is vital.[6]

We also emphasize the linkage of ensuring interoperability to Congress' priority for leveraging the tremendous potential of artificial intelligence (AI). Many AI use cases, ranging from solving administrative/backend inefficiencies to supportive clinical decisions, have already begun to emerge as necessary to advancing the Quadruple Aim. [7] Data exchange, use of standardized terminologies, and the normalization of data flows across the care continuum, are essential if AI is to positively transform the American healthcare system.

Further, CHI has worked to proactively address health AI governance and policy issues based on consensus views that span the healthcare sector, from technology developers to providers to patients, and we urge for alignment with our:

- Health AI Policy Principles (https://connectedhi.com/wp-content/uploads/2022/02/Policy-Principles-for-AI.pdf);
- Recommendations on advancing transparency for AI in the healthcare ecosystem (https://connectedhi.com/wp-content/uploads/2022/02/AdvancingTransparencyforArtificialIntelligenceintheHealthcareEcosystem.pdf);
- AI Roles and Interdependencies Framework (https://connectedhi.com/wp-content/uploads/2024/02/CHI-Health-AI-Roles.pdf); and
- Recommendations to the Department on Government Efficiency on ways to use AI to improve healthcare governance efficiency (https://connectedhi.com/wp-content/uploads/2025/01/CHI-DOGE-Recommendations-30-Jan-2025.pdf).

Supporting the Transition to Value-Based Care

One of the most important reasons to include wearable health technology and the data they generate in any conversation about improving health options for patients is its ability to support the transition to value-based care. Our current fee-for-service model does not allow physicians

[6] https://connectedhi.com/chi-letter-re-preventing-illegal-information-blocking-to-support-the-seamless-exchange-of-health-information/.

[7] For a review of the Quadruple Aim, see: https://pmc.ncbi.nlm.nih.gov/articles/PMC4226781/

and other providers to focus on things that will actually help control costs while improving access to and quality of care, like preventive medicine. Wearable devices can be used both as preventive medicine and as treatment for chronic conditions, empowering patients with a better understanding of their own health. One way the WEAR IT Act would lower costs and improve care is by allowing patients to take advantage of existing dollars that they have put aside to spend on healthcare to take better control of their health. If the $4.2 billion that is lost from FSAs every year were better used, we would have a powerful tool in addressing healthcare cost issues.

Better access to individual health data through wearable devices and their associated software will also help to give patients more insight into their health and allow them to more fully engage with their healthcare providers. The value-based care system requires a transition to more preventive medicine rather than waiting for patients to get sick and focusing only on treating the symptoms. Wearable devices can help detect acute or chronic conditions earlier than traditional methods, allowing more space for preventive and early-stage treatment. These types of treatments almost always save money in the long term by avoiding costly care for worsening conditions.

Conclusion

Democratizing access to health data and helping patients be the CEO of their own health is an important step towards a healthier, value-focused future for our country. In addition to other key steps toward improving access to digital health tools, I urge you to consider the WEAR IT Act as part of the conversation around incenting healthy options for patients. We need to move our health system into the 21st century, and wearable devices and their data are part of that journey.

Sincerely,

Brian Scarpelli
Executive Director
Connected Health Initiative