



“ObamaCare” - Mid-Term Elections and EMR What We Believe is Most Likely to Happen

This letter is in response to the calls and questions we at The Quantum Group, Inc. have received regarding the impact of the recent political changes in Washington, D.C.; in particular, the Congressional and State elections that have changed the balance of power between the Democrat and Republican Parties. The changes that resulted from the mid-term elections bear the possibility that the Patient Protection and Affordable Health Care Act of 2010 (PPACA) may be dismantled, reduced or even totally repealed. This begs the question regarding how such changes might impact Quantum’s deployment of our exclusive PWeR® EMR Platform and the expected \$27 billion USD stimulus funding set aside by Congress to assist doctors in the adoption of a qualified EMR by 2014.

The short answer is that we firmly believe it will make:

NO DIFFERENCE AT ALL - NO IMPACT

Let me explain why.

The PPACA is what the US and maybe the world media refer to as “ObamaCare,” and signed into Law March 23, 2010.¹ Prior to this, The Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH)^{2, 3, 4} which is part of the American Recovery and Reinvestment Act of 2009 was passed. Both of these two pieces of legislation were signed into Law on February 17, 2009. Combined with the healthcare component, these two pieces of legislation allocated approximately \$155 billion for improving the healthcare of Americans for the Department of Health and Human Services (HHS) of which approximately \$27 billion is exclusively allocated for advancement of health information technology and incentive payments to providers of healthcare.⁵

¹ http://en.wikipedia.org/wiki/Patient_Protection_and_Affordable_Care_Act

² http://healthit.hhs.gov/portal/server.pt?open=512&objID=1487&parentname=CommunityPage&parentid=58&mode=2&in_hi_userid=1113&cached=true

³ <https://www.cms.gov/EHRIncentivePrograms/>

⁴ <http://waysandmeans.house.gov/media/pdf/111/hitech.pdf>

⁵ http://en.wikipedia.org/wiki/American_Recovery_and_Reinvestment_Act_of_2009

The HITECH Act provides funding for EMR adoption from 2011 to 2014 (and in some cases up to 2020), where the US Government, with various agencies, will fund up to \$63,750 per physician⁶ and a “base payment” per hospital starting at \$2,000,000. The US Department of Health and Human Services (HHS) has already disbursed approximately \$1.5 billion “Recovery Act Funds to Expand Use of Health Information Technology” in numerous grants.⁷

So bottom line, even in a total 180 degree turn where PPACA was repelled, HITECH still stands as does the approximately \$27 billion exclusively allocated for advancement of health information technology and incentive payments to providers of healthcare.

The very conservative Heritage Foundation⁸ describes itself, saying it is there to “*promote conservative public policies based on the principles of free enterprise, limited government, individual freedom, traditional American values, and a strong national defense.*” In their position article “*Repealing ObamaCare and Getting Health Care Right*” they do not discuss⁹ the elimination of the HITECH Act or similar initiatives.

Democrats, Republicans and Independents agree that we MUST drive efficiencies in healthcare and that using modern technologies, such as EMR, is a necessary part of that solution.

The issue is quite clear as you will see in the following references and quotations, EMR is the one issue all sides seem to agree on.^{10,11}

"By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care."

President George W. Bush, 2004 State of the Union address

"Ensure that all Americans have secure, private electronic medical records by the year 2008."

Sen. John Kerry, presidential platform

"... develop a strategic plan to create a comprehensive national healthcare information infrastructure that encompasses public-sector and private-sector health information activities, and that includes a national agenda to guide policymaking, technology investments, research, and integration with ongoing health care and health care information technology activities."

Sen. Hillary Rodham Clinton, S. 2003--
Health Information for Quality Improvement Act

⁶ <http://www.nejm.org/doi/full/10.1056/NEJMp1006114>

⁷ <http://www.hhs.gov/news/press/2010pres/06/20100603a.html>

⁸ <http://www.heritage.org/About>

⁹ <http://www.heritage.org/research/reports/2010/11/repealing-obamacare-and-getting-health-care-right>

¹⁰ http://findarticles.com/p/articles/mi_m3830/is_9_53/ai_n6230147/

¹¹ <http://occupational-therapy.advanceweb.com/Article/HHS-Secretary-Thompson-Unveils-Initiatives-To-Move-Forward-on-National-Electronic-Medical-Records-System.aspx>

"Paper kills.... A paper-based system is an ignorant system."

Newt Gingrich, Former Republican Speaker of the US House of Representatives and currently with The Center for Health Transformation (CHT) summit, June 15, 2004¹²

The last reference above from Speaker Gingrich who during his CHT summit, states that he believes a "A 21st Century Intelligent Health System" ¹³ will be "Electronically Based."

Beyond the \$27 billion mentioned above, the fact is that the US Government EMR stimulus money needs to be seen more as partial investment versus total investment. The best independent estimates are that the US medical industry will spend a total of \$75 billion (2005) in adoption of EMR over the next decade¹⁴. For example most hospitals will spend a minimum of \$5MM to implement even basic EMR, and yet most hospitals are only expected to receive on average \$2MM¹⁵.

The facts are clear; the use of technology in healthcare is not a Republican or Democratic issue; and is very different from the purpose and impacted areas of "ObamaCare" and "individual mandate" that has been the center of attention.

In closing, I refer to a report issued in 2005 by the prestigious RAND Corporation that estimated, ¹⁶ *"If most hospitals and doctors' offices adopted HIT, the potential efficiency savings for both inpatient and outpatient care could average over \$77 billion per year."* This was in 2005 dollars and when the healthcare industry was still just \$1.7 billion (annual). Again, this is the only non-partisan issue in healthcare today. We in the US have a \$2.5 trillion¹⁷ annual healthcare industry that is still in relative "dark ages" in using information technology.

We strongly believe that all the current EMR initiatives will stay. We even expect that in the development of a post-ObamaCare healthcare reform that EMRs will play an even more critical role in creating a system that is better and more efficient.

Noel J. Guillama

Chairman
The Quantum Group, Inc.
November 15, 2010

¹² http://www.healthtransformation.net/cs/about_the_center

¹³ http://www.healthtransformation.net/cs/21st_century_intelligent_health_system

¹⁴ <http://www.randcompare.org/analysis-of-options/analysis-of-health-it#spending>

¹⁵ www.aha.org/aha/content/2009/pdf/09HITincentiveStGrantsARRA.pdf

¹⁶ http://www.rand.org/pubs/research_briefs/RB9136/index1.html

¹⁷ http://www.kff.org/insurance/upload/7692_02.pdf

About The Quantum Group, Inc.

The Quantum Group is an innovation-driven healthcare services organization that provides **Technology Solutions** through [PWeR™](#), a 21st Century EMR platform by [Quantum Innovations](#). PWeR stands for Personal Wellness *electronic* Record™. This 21st Century electronic medical records (EMR) solution is the *one patient, one record*™ intelligent healthcare information platform that hosts medical records and permits interactive use. That's PWeR - *complexity meets simplicity*. For more information, please visit www.QuantumMD.com or www.myPWeR.com.

There are certain statements contained in this Quantum Blue Paper or Opinion Paper that are not based on historical facts and are forward-looking statements, as the term is defined in the Private Securities Litigation Reform Act of 1995, and are subject to substantial risks and uncertainties. This Quantum Blue Paper is for educational and informational purposes only and is based on our opinion of a highly volatile political subject. These and other risks and uncertainties are in part detailed in the Company's Annual Report on Form 10-K for the fiscal year ended October 31, 2008, and its Quarterly Reports on Form 10-Q ("Quarterly Reports") for the periods ended January 31, April 30 and July 31, 2009, which were filed with the Securities and Exchange Commission. Forward-looking statements can be identified by the use of words such as "expects," "plans," "will," "may," "anticipates," "believes," "should," "intends," "estimates" "assume" "theorize" and "could," or other words of similar meaning and the negative form of such words. These statements and opinions are subject to risks and uncertainties that cannot be predicted or quantified and, consequently, actual results may differ materially from those expressed or implied by our Opinion Paper. The Company does not have the resources to exploit its pending Patent Portfolio and further with lack of adequate financing at this time, there can also be no assurance that the Company will succeed in the re-deployment of its PWeR® technology platform or that it will be commercially successful or that the continuing infrastructure development, hosting, security, sales and servicing will be accomplished or be accepted by clients. The PWeR platform may also experience further potential complications during utilization by clients, technical and software setbacks and any unexpected costs of development, as well as pricing and competitive pressures, and the capital necessary to deploy it may not be available on time or at all. The Company is also subject to changes in federal and state government regulations dealing with its provider system and technology solutions that could have a material adverse effect on its financial condition and result in interruptions of services, additional contractual risk and expenses and difficulties in compliance with its alliance partner(s) agreements. The Company does not undertake any obligation to release any revisions to these forward-looking statements publicly or to provide any update to this Blue Paper to reflect events occurring after the date of this Blue Paper or to reflect the occurrence of unanticipated events. As a result, investors should not place undue reliance on this Opinion Paper.

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Appendix A

Electronic Health Records News & Views Notable Quotes

"Our recovery plan will invest in electronic health records and new technology that will reduce errors, bring down costs, ensure privacy, and save lives."

President Barack Obama;
[Address to Joint Session of Congress](#);
February 24th, 2009

"Dr. Brailer's plan relies on strategies that the College has previously identified as crucial for success, such as providing incentives for the adoption of health information technology (HIT) and promulgating interoperable standards."

John Tooker, MD, MBA, FACP, ACP CEO and EVP;
[American College of Physicians Press Release](#);
July 22, 2004

"Congress has an important role in promoting HIT adoption and providing the necessary initial and ongoing funding mechanisms to assist physicians in solo and small practices. Unfortunately, without adequate financial incentives, solo and small physician practices and their patients will be left behind the technological curve... To achieve immediate quality and healthcare savings through HIT, Congress must recognize the significant financial barriers for solo and small practices. It must offer creative solutions to stimulate adoption of HIT where most Americans receive health care – in offices of 1-5 physicians."

Lynne M. Kirk, MD, FACP
President of the American College of Physicians (ACP);
[Hearing of the Subcommittee on Regulations, Healthcare and Trade of the U.S. House Committee on Small Business](#);
March 28, 2007

"Based on 35 years of direct patient care and over one year of ePrescribing, I am a great "fan"."

Thomas E. Sullivan, MD, Women's Health Center
Cardiology, Danvers, Massachusetts;
[Testimony Before the Subcommittee on Health of the House Committee on Ways and Means](#);
July 22, 2004

"America needs to move much faster to adopt information technology in our health care system...Electronic health information will provide a quantum leap in patient power, doctor power, and effective health care. We can't wait any longer...Health information technology can improve quality of care and reduce medical errors, even as it lowers administrative costs. It has the potential to produce savings of 10 percent of our total annual spending on health care, even as it improves care for patients and provides new support for health care professionals...This plan sorts out the myriad of issues involved in achieving the benefits of health information technology, and it lays out a coherent direction for reaching our goals."

Tommy Thompson, U.S. Department of Health and Human Services Secretary;
[HHS News Release: Thompson Launches "Decade of Health Information Technology"](#);
July 21, 2004

"Third policy that's important is to apply modern information technology to our medical system. Doctors practice 21st century medicine, they still have 19th century filing systems. And this is an important issue. One reason it's an important issue, because when a doc writes their files by hand, you generally can't read the writing. That leads to inefficiency and error. In hospital there is more risk of preventable medical error when records are handwritten, instead of being cross-checked on a computer. Oftentimes doctors duplicate expensive tests because they do not have access to previous results. In other words, the medical system has not taken advantage of information technology..."

President George W. Bush;
[President Discusses Health Care](#);
February 15, 2006

"We need to reduce costs and medical errors with better information technology."

President George W. Bush;
[State of the Union Address](#);
January 23, 2007

"We're developing solutions for a nationwide health information network. One of the things I've insisted upon is that it's got to be secure and private. There's nothing more private than your own health records. And so any system that works is one that is -- it's your record -- you decide the disclosure of your health records."

President George W. Bush;
[President Discusses Health Care](#);
February 15, 2006

"We will make wider use of electronic records and other health information technology, to help control costs and reduce dangerous medical errors."

President George W. Bush;
[State of the Union Address](#);
January 31, 2006

"This year, we're going to launch a revolution in our community health clinics. We'll ask Albany, Washington, and the private sector to join us in investing \$100 million to create secure electronic health records in our community clinics, and in the offices of doctors who practice in our poorest neighborhoods. This will reduce preventable illnesses. It will save millions of dollars a year now wasted on needless procedures. And it will make us the national leader in providing high-quality health care to those most in need."

Michael R. Bloomberg, New York City's Mayor;
[2006 State of the City Address "A Blueprint for New York City's Future"](#);
January 26, 2006

"We need to make sure we expand information technology. I am told -- a lot of health care guys here can tell you -- that the modernization of health care when it comes to information technology should save up to 20 to 25 percent of cost, as well as reducing a lot of medical errors. By that I mean, everybody ought to have an electronic medical record that you're able to transfer from provider to provider. You know, the day of a person carrying these thick files of medical paper, and most of the time it's hard to read because doctors can't write hardly at all, and -- but it needs to be modernized. There's a lot of inefficiency, what I'm telling you, in the health care field, particularly when it comes to information sharing."

President George W. Bush;
[Statement made during a discussion on the Global War on Terror](#);
January 11, 2006

"President Bush has identified health information technology as one of the most important technology areas for America's future. This report lays down a foundation for achieving this national priority and moves us from a period of discussion into a period of rapid action...This approach drives industry-wide change by focusing on the clinician and the consumer. Our goal is to bring about improvement in health care from the inside out. This transformation will require the collaborative efforts and leadership of clinicians, consumers, hospitals, purchasers, payers, technology companies and informatic thought leaders to make this groundwork for change a reality."

David J. Brailer, M.D., Ph.D., National Coordinator for Health Information Technology;
[HHS News Release: Thompson Launches "Decade of Health Information Technology"](#);
July 21, 2004

"With so many heavy hitters in government -- starting with President Bush -- pushing for their use, the question of physicians' adoption of electronic medical records is not if, but when."

American Medical News - Newspaper of the American Medical Association(AMA);
[Editorial: Doctors need to take a leading role on electronic medical records](#);
July 5, 2004

"Widespread adoption of interoperable health information technology is a cornerstone of creating a 21st Century Intelligent Health system."

Newt Gingrich, Founder, The Center for Health Transformation;
[Introductory letter in White Paper: Creative Incentives for the Nationwide Adoption of Interoperable Health Information Technology](#);
July 2, 2004

"This [investment] was not made with ROI in mind. We viewed this as something we had to do so we can improve patient care and go paperless. The real ROI here is the increased functionality we are getting to do the things we need to do. And it's hard to put a number on this. How do you put an ROI on helping patients?"

Peter Dougherty, Touro Infirmary CIO;
[Remarks in Health-IT World article: Bigger IBM Mainframe to Help Touro Infirmary Go Paperless](#);
July 1, 2004

"There are many more potential breakthroughs in health information than we can take on right now. The ones we picked will create benefits for people fairly quickly, and when they are completed, we will choose more to create a wave of innovation that lasts year after year. For instance, once we get the medication history up and running, we could add lab and radiology data. The drugs are first priority, since medication errors and drug allergy errors have caused so many health problems."

David Brailer, MD, PhD, National Coordinator for Health Information Technology;
[Statement made in UPI article: Health IT: From clipboard to cyberspace;](#)
December 22, 2005

"These health information exchanges, or regional health information organizations (RHIOs), are indeed the building blocks to create the National Health Information Network, a secure, interoperable system where all stakeholders involved in an individual's care can appropriately access and share electronic health information in real time at the point of care."

[Accelerating Transformation through Health Information Technology report;](#)
Released November 28, 2005

"There may not have been an experience that demonstrates, for me or the country, more powerfully the need for electronic health records ... than Katrina"

Mike Leavitt, U.S. Department of Health and Human Services Secretary;
[Statement made to The Associated Press;](#)
September 13, 2005

"Adopting health care information technology is not a technical feat; it's a feat of economics."

David Brailer, MD, PhD, National Coordinator for Health Information Technology;
[Speech at the Healthcare Financial Management Association's \(HFMA\) Annual National Institute;](#)
June 28, 2005

"Physician confidence (in electronic records) in the ambulatory setting will translate to more adoption in the hospital setting... That's where a lot of focus will be, in how to stimulate interest in creating a national fabric of technology."

David J. Brailer, M.D., Ph.D., National Coordinator for Health Information Technology;
[Remarks during media briefing to reaffirm commitment to push the healthcare industry toward rapid implementation of healthcare IT;](#)
June 25, 2004

"I am absolutely passionate about moving this ball down the field because it is so important in reducing mistakes in medicine and improving practice. We are on the cusp of changing the way medicine is practiced... We are going to use the reimbursement system to encourage good practices."

Tommy Thompson, U.S. Department of Health and Human Services Secretary;
[Remarks during media briefing to reaffirm commitment to push the healthcare industry toward rapid implementation of healthcare IT;](#)
June 25, 2004

"Frost & Sullivan estimates that approximately 12.5 percent of the total active private practitioners use electronic medical records (EMR) to store patient data. A majority of these users belong to large or medium group practices. Among solo practitioners and small group practices of three or lesser in size, uptake of EMR is even less at merely 5 percent. This slow rate of penetration is because computer literacy among most physicians is minimal or nil. Being comfortable with traditional systems of maintaining records, they are hesitant to adopt new technology. Further, they are yet to be convinced about increased ROI that EMRs provide. However, computer-literate fresh medical graduates are open to this idea. Vendors would do well to target this segment to boost sales and work toward dispelling the hesitation among the older practitioners to invest in IT."

Frost & Sullivan Research Report Brochure;
[U.S. Electronic Medical Records Markets for Inpatient and Ambulatory Care;](#)
June 22, 2004

"The time has come to put the medical clipboard out of business and replace it with the computer. In doing so, we can transform our health care system so that we achieve fewer medical mistakes, lower costs, better care, and less hassle. We all agree transformation must take place; now let's all agree to work together to do it."

An entrepreneur I admire said, "There are three ways to handle change. You can fight it and die; accept it and survive; or, lead it and prosper."

This is the United States of America. I say, let's lead and prosper."

Mike Leavitt, U.S. Department of Health and Human Services Secretary;
[Speech at the Health Information and Management Systems Society \(HIMSS\) Conference;](#)
June 6, 2005

"The national strategy for achieving interoperability of digital health information is for federal agencies -- who pay for more than one-third of all health care in the country -- to work with private-sector health care providers and employers in developing and adopting an architecture, standards and certification process...The use of electronic health records and other information technology will transform our health care system by reducing medical errors, minimizing paperwork hassles, lowering costs and improving quality of care. We will bring together the public and private health care sectors to transform health care as we know it."

Mike Leavitt, U.S. Department of Health and Human Services Secretary;
["Secretary Leavitt Takes News Steps to Advance Health IT" News Release;](#)
June 6, 2005

"Information technology is a pivotal part of transforming our health care system. We are at a critical juncture. Working in close collaboration, the federal government and private sector can drive changes that will lead to fewer medical errors, lower costs, less hassle and better care."

Mike Leavitt, U.S. Department of Health and Human Services Secretary;
["Health Information Technology Leadership Panel: Final Report" News Release;](#)
May 11, 2005

"Paper records and prescriptions kill. Mistakes made by depending on [and using] paper keep happening; the thing is, they're avoidable. Everyday that we don't act, people will continue to die unnecessarily."

former House Speaker Newt Gingrich;
[Remarks at 2004 Frontiers of Health Care Conference at Brown University;](#)
June 22, 2004

"To assure that modern information technology will be fully utilized in health care, [my] legislation sets a goal of full implementation of a broad-based system of electronic medical records and automated bill-paying. It authorizes grants, loans and loan guarantees for health providers to install and implement clinical information systems that meet national technical standards for parameters such as security and interoperability. The bill also offers larger reimbursements for providers who implement these types of information systems. Over a period of time, it reduces payments for large health care facilities that fail to do so."

Senator Edward Kennedy;
[Press Release: Introduction of the Health Care Modernization, Cost Reduction, and Quality Improvement Act;](#)
May 13, 2004

"Americans deserve a seamless and secure national health information infrastructure. This system must provide accurate, complete patient data to providers wherever they are, in time to be useful-even in an emergency. It must allow doctors to prescribe medications electronically, so the medications can be checked for safety before they are administered. And it must do all this without revealing personally identifiable information without the patient's consent."

Tommy Thompson, U.S. Department of Health and Human Services Secretary;
[Remarks at Health IT Summit;](#)
May 6, 2004

"By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care."

President George W. Bush;
[State of the Union Address;](#)
January 20, 2004

"Health IT can enable transformation of healthcare by allowing a better way to care – consumer by consumer, physician by physician, disease by disease and region by region...It is ultimately about treating the industry itself so that we can have not only the best science, infrastructure and professionals in the world, but also the best value, safety and productivity."

David Brailer, MD, PhD, National Coordinator for Health Information Technology;
[Remarks at HIMSS 2005 Annual Conference](#);
February 17, 2005

"Interoperability must be addressed now, or else widespread adoption of stand-alone EHRs will be a fait accompli."

David Brailer, MD, PhD, National Coordinator for Health Information Technology;
[Remarks at HIMSS 2005 Annual Conference](#);
February 17, 2005

"We need to recognize that solutions that work for large practices and hospitals, such as pay-for-performance, may not help small physician offices in their efforts to adopt EHRs and improve practice performance. We have to develop solutions that assist EHR adoption up and down the spectrum of care delivery organizations."

David Brailer, MD, PhD, National Coordinator for Health Information Technology;
[Remarks at HIMSS 2005 Annual Conference](#);
February 17, 2005

"We've got 21st century medical practices, but 19th century paperwork system...medical electronic records is going to be one of the great innovations in medicine."

President George W. Bush;
[Remarks at National Institutes of Health](#);
January 26, 2005

"Fully standardized HIEI (Healthcare Information Exchange and Interoperability) could yield a net value of \$77.8 billion per year once fully implemented...The clinical impact of HIEI for which quantitative estimates cannot yet be made would likely add further value."

[The Value Of Health Care Information Exchange report](#);
January 19, 2005

"If all Americans' electronic health records were connected in secure computer networks that safeguarded patient privacy, health care providers would have complete records for their patients, so they would no longer have to re-order tests that have already been done.... widespread adoption of technology will depend in large part on federally organized public-private partnerships."

Congressman Patrick Kenney
& former Speaker Newt Gingrich;
[Op-ed in New York Times: Operating in a vacuum](#);
May 3, 2004

"Medicine ought to be using modern technologies in order to better share information, in order to reduce medical errors, in order to reduce cost to our health care system by billions of dollars...Within ten years, every American must have a personal electronic medical record. The federal government has got to take the lead in order to make this happen by developing what's called technical standards."

President George W. Bush;
[Remarks at American Association of Community Colleges Annual Convention](#);
April 26, 2004

"By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care."

President George W. Bush;
[State of the Union Address](#);
January 20, 2004

"We need a better way to share information. We need a better system so that physicians have at their fingertips all the information they need to do their job - including patient history, the latest research, drug interactions, and everything else they need...Information, in the hands of the right people, at the right time, drives quality and value. We need to empower patients and health care providers to make the right choices. And to do that, health care decision makers-providers, payers, and patients -- need to have access to the right information, where and when it is needed, securely and privately...We need to build an information technology infrastructure that enables information sharing...Federal leadership is needed to encourage the adoption of health care information technology that promotes interoperability, assures affordability, and reduces barriers to IT adoption."

Senator Hilary Clinton;
[Remarks of Senator Hillary Rodham Clinton on The Health Information for Quality Improvement Act](#);
January 12, 2004

"Electronic health records have the potential to help reduce medical errors, lower costs and empower patients. However, without the widespread adoption of electronic health records by small and medium physician practices ... and the requirements for achieving the interconnectivity necessary to allow for the effective exchange of health related information, the benefits of information technology cannot be fully realized."

Carol Diamond, MD,
Managing Director at the Markle Foundation and Chair
of Connecting for Health;

[Press Release for: *Financial, Legal and Organizational Approaches to Achieving Electronic Connectivity in Healthcare report*](#);

October 22, 2004

"Increased adoption of information technology will speed the transformation of health care services in this nation."

U.S. Department of Health and Human Services
Secretary;

[News Release - *HHS Awards \\$139 Million to Drive Adoption of Health Information Technology*](#);

October 13, 2004

"The time has come for an electronic medical record in every group medical practice in America. Period. End of story."

Donald M. Berwick, MD, MPP,
President and CEO,

Institute for Healthcare Improvement (IHI);
[A Keynote Address at the *Medical Group Management Association's \(MGMA\) Annual Conference*](#);

October 6, 2004

"Become an influence of change or a victim of change."

Valarie Willis, a senior consulting partner with Tom
Peters Co.;

[Remarks at the 2004 annual conference of the *Medical Group Management Association*](#);

October 4, 2004

"Significant performance improvement will only be accomplished by tracking dramatic, system-level changes. The courageous among us will get there first, achieving performance levels never imagined by previous generations."

Donald M. Berwick, MD, MPP,
President and CEO,
Institute for Healthcare Improvement (IHI);
[IHI 2004 Progress Report](#);

"The establishment of the Center signals the importance for both members and leaders of the AAFP of the need to move from paper-based to computerized information systems in the family physicians office."

Douglas E. Henley, M.D., AAFP Executive Vice
President;

[Press Release: *American Academy of Family Physicians Establishes Center for Health Information Technology*](#);

September 25, 2003

"We want to build a standardized platform on which physicians' offices, insurance companies, hospitals and others can all communicate electronically, which will improve patient care while reducing the medical errors and the high costs plaguing our health care system."

Tommy Thompson, U.S. Department of Health and
Human Services Secretary;

[News Release: *HHS Launches New Efforts to Promote Paperless Healthcare System*](#);

July 1, 2003

"Our vision is to transform the practice of medicine using a new set of medical informatics tools. It is the right thing to do for leaders who care...Status quo is being in a rut. We cannot tolerate that."

Mark Neaman, CEO and President of Evanston
Northwestern Healthcare;

[Health-IT World article: *Health IT Takes "Guts" and Leadership, reporting on HIMSS Summer Conference*](#);

June 10, 2003