

June 4, 2012

The Honorable Tom Harkin Chairman Senate Committee on Health, Education, Labor and Pensions 428 Dirksen Senate Office Building Washington, DC 20510

The Honorable Fred Upton Chairman House Energy & Commerce Committee 2125 Rayburn House Office Building Washington, DC 20515 The Honorable Michael Enzi Ranking Member Senate Committee on Health, Education, Labor and Pensions 835 Hart Senate Office Building Washington, DC 20510

The Honorable Henry Waxman Ranking Member House Energy & Commerce Committee 2322A Rayburn House Office Building Washington, DC 20515

Dear Chairman Harkin, Ranking Member Enzi, Chairman Upton, and Ranking Member Waxman,

The Advancing Patient Safety Coalition is committed to improving patient safety through the establishment of a national unique device identification (UDI) system. As prominent hospital, physician, nursing, research, quality and patient advocacy organizations, we are writing to thank you for including language in the House and Senate medical device and user fee reauthorization bills that requires the release of the proposed regulation. We also ask that the final package include the additional provisions from the Senate bill that sets deadlines for the implementation of UDI as well.

As you know, the Food and Drug Administration Amendments Act of 2007 required the FDA to issue a regulation implementing a mandatory national UDI system, though it did not specify dates by which a final rule must be promulgated and a national UDI system implemented. While the FDA has developed a proposed rule on UDI, it has been held up in the Office of Management and Budget (OMB) clearance process since July, 2011.

We believe a UDI system is essential to help protect the safety of patients, reduce medical errors and strengthen the ability of the FDA and manufacturers to monitor adverse events. Every day that goes by without such electronic identification of medical devices is a threat to patient safety and increases costs in the healthcare system. UDI is the missing link to better ensuring patient safety. Implementing a national UDI system will not only reduce clinical risks to patients, but will also save an estimated \$16 billion in costs annually which are incurred due to inefficiencies in the medical products supply chain <sup>1</sup>.

<sup>&</sup>lt;sup>1</sup> Schneller, Eugene, and Larry Smeltzer. Strategic Management of the Health Care Supply Chain. 2006.

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During conference committee deliberations, we strongly urge you to ensure the inclusion of critical language in the final medical device and user fee reauthorization bill to finalize regulations within six months after the close of the comment period, and to implement a national UDI system within two years after the final regulation is issued.

We thank you again for recognizing the immediate importance of establishing a UDI system.

## Sincerely,

## **AARP**

Alliance for Advancing Nonprofit Health Care

Alpha-1 Association

Alpha-1 Foundation

American Association of Neurological Surgeons

American Association of Orthopaedic Surgeons

American Congress of Obstetricians and Gynecologists

American Heart Association

American Medical Association

American Nurses Association

Association for Professionals in Infection Control and Epidemiology

Association of American Medical Colleges

Catholic Health Association of the United States

Congress of Neurological Surgeons

**COPD** Foundation

Federation of American Hospitals

Georgia Hospital Association

MedicAlert Foundation

National Association for Continence

National Association of Public Hospitals and Health Systems

National Rural Health Association

Novation

PeaceHealth

Premier healthcare alliance

Society for Cardiovascular Angiography and Interventions

Society for Healthcare Epidemiology of America

Texas Health Resources

Truth in Medicine Incorporated

University HealthSystem Consortium

Valley Health System

VHA Inc.

West Virginia United Health System