Testimony of Jacqueline Gerhart, MD
Chief Medical Officer, Epic
Before the U.S. House of Representatives
Committee on Ways and Means, Subcommittee on Health

Chairman Buchanan, Ranking Member Doggett, and Members of the Committee, thank you for the opportunity to testify today. My name is Jackie Gerhart. I am a practicing family medicine physician and the Chief Medical Officer of Epic, a health IT software company serving hospitals and health systems in all 50 states including many of the districts you represent.

From our software factory in Wisconsin, we have built one of the nation's most widely adopted electronic health records (EHRs). Through MyChart, our patient portal, millions of Americans can take control of their own healthcare—they can use it to schedule appointments, view test results, and sync wearables. In fact, since 2015, patients have been able to sync wearable devices, such as Apple Watch, to MyChart, enhancing their ability to engage with their own care.

We stand at the precipice of a new age of digitally empowered health and wellness. With advancements like digitization of health records, seamless data sharing, and breakthroughs in artificial intelligence (AI), we are already seeing improvement in patient outcomes. The potential to advance medicine has never been higher.

These innovations are helping us achieve long-held bipartisan priorities of Congress – patient access to their own health information, physician access to their patients' complete and accurate medical records, and reduced abrasion between payers and providers through better communication.

One of the technologies I'm most excited about is artificial intelligence (AI). AI offers an unprecedented opportunity to strengthen the patient/provider relationship. Our goal is to keep the human connection at the center of care while using AI to remove barriers. Right now, health systems are using dozens of AI-powered features in Epic[1] and we have 125 more in development that will reduce clinician burden, accelerate medical discoveries, and save patient lives.[2]

We also support innovative tools, including wearable technology that gives physicians routine insights into our patients' health and wellness , allowing us to offer more personalized and effective care.

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[1] Epic and Generative AI – Attached.
[2] https://www.nejm.org/doi/full/10.1056/NEJMsb2503956

With patient information empowering all these opportunities, we also need policies that manage the risk of patients unknowingly losing control of their own data, especially to actors not covered under HIPAA.

Artificial intelligence in healthcare

As a practicing family medicine physician, what's most important to me is to focus on my patient. I want to look them in the eye and have a real conversation about their health priorities. It's frustrating to break off every few minutes to type into the computer, and I don't want to forget something important that we talked about.

That is exactly what AI-powered features integrated into Epic workflows are designed to do. When making a note of a patient visit, instead of starting from a blank screen, AI drafts a high-quality note clinicians can review and fine-tune based on their conversation with the patient.

Physicians have told me this feature is groundbreaking—that it saves marriages and reduces "pajama time" spent documenting late at night. At Reid Health in Indiana, clinician time writing notes is down 86%. After AI-powered charting went live at John Muir Health in California primary care provider (PCPs) job turnover went down by 44%.

We're also helping clinicians use AI for more than notes. Last month we integrated new features that allow AI to suggest action items like medication, lab, and follow-up orders with based on the visit conversation. AI also answers verbal questions like, "Hey Epic, find the last CBC lab result." In the future, it will be able to answer open-ended conversational questions like, "Tell me about his diabetes."

Just a few years ago I was examining a patient and felt a small lump on her thyroid. I remember thinking how great it would be if, without typing, I could verbally describe what I had found, ask about the patient's past stimulating hormone (TSH) levels, and order a thyroid ultrasound. That type of simple, AI-powered workflow is now available in Epic.

AI has already helped providers improve quality of care for their patients. The Christ Hospital in Ohio uses Epic's AI to scan chest x-ray results and flag incidental findings that could point to unrelated conditions, such as early-stage lung cancer. Nationally, only 27% of lung cancer cases are identified at stage 1 or 2[3]. At The Christ Hospital, with this use of AI, the average is 70%. This led to identification of cancer in over 100 patients that might not have otherwise been caught.

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[3] American Lung Association, "American Lung Association, "New Report: Lung Cancer Survival Rate Improves, But Gaps in Biomarker Testing and Lack of Screening Hinder Progress," https://www.lung.org/media/press-releases/state-of-lung-cancer-2024

Another problem we're helping to solve with AI is prior authorizations. For example, to get a knee replacement approved, early adopters are using AI to sift through the chart, gather relevant imaging reports and physical therapy notes, and present them to the insurer. Today, this process is manual for many health systems. Staff search the entire record, which could run to hundreds of pages of notes, and find each piece of data one by one. We plan to integrate AI features for prior authorizations this fall.

Those are just a few examples, and I will emphasize that every feature I have talked about keeps the human in the loop. Epic's AI acts a trusted clinical assistant, elevating the clinician's ability to serve and interact with patients without replacing their medical judgement. Doctors have told me it is "the best resident they have ever had." It reduces grunt work and helps them get back to what brought them into medicine in the first place—serving patients.

Accelerating health IT innovation with interoperability

At Epic, we believe interoperability should empower patients to access their own health data and ensure clinicians have the complete picture of their patients' health when delivering care. Last month alone, health systems used Epic to exchange more than 700 million patient records to inform treatment. Half of those exchanges were with organizations using non-Epic EHRs.

We have also made hundreds of APIs available through Open.Epic to ensure patients have the freedom to choose which apps will help manage their health. Last year, more than 750 third party apps used Epic's APIs to help patients retrieve their own health data from our customers' systems. Our customers responded to more than 111 billion U.S. Core Data for Interoperability (USCDI) FHIR API calls, enabling a broad range of novel app integrations, including accessing information from remote monitoring devices and wearables.

One of the most powerful examples of the value of interoperability I have seen is managing postpartum hypertension. Women with high blood pressure are at risk of preeclampsia, which can be fatal. Traditionally, we would ask them to come in every day or every few days to check their blood pressure, something that was difficult to coordinate and inconvenient for new mothers.

By integrating remote technologies, we can send new mothers home from the hospital with a blood pressure cuff compatible with Apple Health or other apps using FHIR APIs. They can stay at home with their new babies, and blood pressure readings taken at home can flow directly to the medical record. That simple shift—just prescribing a connected device—has saved lives, eliminated emergency department visits, and reduced health care

costs. This is especially important in rural communities where traveling for frequent office visits can be time consuming and financially burdensome.[4]

Another great example is continuous glucose monitoring (CGM). Originally designed for patients with uncontrolled diabetes, CGM devices are now widely used by people interested in making healthier lifestyle and nutrition choices.

We recently partnered with Abbott, one of the leading CGM device makers, to create deep integration between their hardware and the EHR. Instead of patients taking screenshots from an app, glucose trends can flow directly into the chart in a way that's clinically meaningful. As a physician, I do not need to sift through every data point—instead, key trends surface through decision support, allowing me to act when it matters.

This type of connectivity will be much easier through the Trusted Exchange Framework and Common Agreement (TEFCA) which was created by the bipartisan 21st Century Cures Act. As it expands, TEFCA will allow any app to plug into a single data exchange framework and instantly connect to thousands of health systems nationwide. Early adopters are already using TEFCA to allow patients to transfer their information to personal health record apps today. The Epic community has connected more than 1,150 hospitals and 25,500 clinics through TEFCA, and more are being added every month.

Protecting Americans' most sensitive data

As data exchange grows, so does the need for strong, consistent privacy protections. Patients who choose to share their data should not lose control of it.

Today's privacy protections vary depending on who holds the data. Many people believe HIPAA requires that their medical information be kept private. That is not the case. HIPAA only covers actors like health systems, insurers, and their contracted business associates, such as Epic.

Many of the groups requesting access to patient data have no responsibility under HIPAA for privacy or security breaches. This is confusing for patients, who may not understand that their data is subject to different rules depending on where it goes.

We believe TEFCA, as a federally endorsed trust framework, has great potential to expand interoperability and ensure that patients' privacy expectations are met. TEFCA contractually requires exchange participants to adhere to higher privacy standards. Having said that, we encourage the federal government, through legislation or regulation, to close potential gaps under HIPAA to better meet patients' expectations that anyone sending or

receiving health data through TEFCA or another exchange network is accountable under HIPAA.

Conclusion

AI and digital health have already begun to transform medicine. These tools are helping us deliver safer, smarter, and more patient-centered care while strengthening the bond between patients and providers. Thank you for the opportunity to contribute to this conversation and for your leadership in advancing digital health across America.

Epic & Generative AI

AI is built into Epic and already in use. Multiple AI-assisted workflows are now available to Epic customers around the globe. New AI-assisted workflows are being added frequently.

✅ Live and in use   ☑ In testing at health systems *(Available soon)*   ⚙ In development   • Stay tuned

Simplify Documentation
Reduce time spent at the keyboard by having the system:

- ✅ Generate In Basket responses to MyChart messages.
- ✅ Write visit notes based on conversations using AI charting.
- ✅ Adjust notes, correspondence, and patient education for factors like brevity and reading level.
- ✅ Generate utilization review summaries.
- ✅ Generate care plan notes for nurses.
- ✅ Generate hospitalists' course summaries and discharge summaries.
- ☑ Document flowsheets with AI charting. *Q3 2025*
- ☑ Help cardiologists write case narratives. *Q3 2025*
- ☑ Generate MyChart result comments for patients. *Q4 2025*
- ☑ Nudge physicians with opportunities to improve clinical documentation. *Q1 2026*
- ⚙ Complete dental hard tissue exams with AI charting. *Q1 2026*
- ⚙ Document home health OASIS forms with AI charting. *Q1 2026*

Generated documentation is reviewed by clinicians before sending.

Tailor Communication
Communicate better by having the system:

- ✅ Help translate clinical and scheduling questionnaires into additional languages.
- ✅ Revise letters, patient instructions, and patient message responses to use less technical language.
- ✅ Transform questions into reporting queries.
- ☑ Answer patients' billing questions in plain language. *Q3 2025*
- ☑ Remind patients of visit instructions in MyChart. *Q4 2025*
- ☑ Translate patient messages written in Spanish for clinicians to preview and translators to verify. *Q1 2026*
- • Write patient instructions based on clinical notes.

Have Questions?
Contact Ladd Wiley, ladd@epic.com

Summarize the Chart
Reduce time spent searching the chart by having the system:

- ✅ Summarize recent notes before a visit.
- ✅ Provide a review of the previous shift.
- ✅ Analyze dashboard for key takeaways.
- ☑ Summarize the patient journey and SDOHs for care transition planning. *Q3 2025*
- ☑ Highlight key details in imaging studies. *Q4 2025*
- ⚙ Gather medications, results, and other details relevant to answering a MyChart message. *Q4 2025*
- ⚙ Summarize results for patients in MyChart. *2026*

Automate Actions
Reduce time spent on administrative work by having the system:

- ✅ Extract follow-ups from imaging reports.
- ✅ Draft denial appeals letters.
- ✅ Recommend codes from clinical details.
- ✅ Generate content for your campaigns.
- ✅ Find clinical documentation improvement opportunities and prioritize reviews.
- ✅ Spin up draft MyChart microsites.
- ✅ Identify clinical risk adjustments.
- ☑ Schedule follow-ups with AI live chat agents. *Q2 2025*
- ☑ Extract colonoscopy quality metrics from pathology reports. *Q2 2025*
- ☑ Address patient questions with AI live chat agents. *Q3 2025*
- ☑ Calculate a level of service from clinical details. *Q3 2025*
- ☑ Automatically document synoptic forms. *Q3 2025*
- ☑ Justify medical necessity for medical prior auths. *Q3 2025*
- ⚙ Queue up orders mentioned during the visit with AI charting. *Q4 2025*
- ⚙ Suggest discrete instructions to complete refill requests more quickly. *Q4 2025*
- ⚙ Identify cancer staging data from notes. *Q1 2026*
- ⚙ Evaluate patients for clinical trials using eligibility data and the chart. *2026*
- • Use conversational language to find answers quickly.
- • Retrieve discharge insights from notes.

Dates represent current plans for initial production availability.
AI charting workflows may use voice recognition technology.

Last updated: April 25, 2025