2022 AHA Annual Survey

Information Technology Supplement File Layout

	Note: Key FOLLOWS each Question set
Field Description	Database Field Name
AHA Identification Number	ID
Medicare Provider Number	MCRNUM
Hospital name	MNAME
Street Address	MLOCADDR
City	MLOCCITY
State	MSTATE
ZIP code	MLOCZIP
Total facility beds set up and staffed	BDTOT
Control/ownership	MCNTRL

Government, nonfederal	Government, federal
12 - State	10 - Denartment of D

13 = County

14 = City

15 = City-county 46 = Federal other than 41-45, 47-48 16 = Hospital district or authority 47 = Public Health Service Indian Service

Nongovernment, not-for-profit

21 = Church operated

23 = Other

Investor-owned, for-profit

31 = Individual

32 = Partnership

33 = Corporation

Field Description

Primary service code

Key

10 = General medical and surgical

11 = Hospital unit of an institution (prison hospital, college infirmary, etc.)

12 = Hospital unit within a facility for persons with intellectual disabilities

13 = Surgical

40 = Department of Defense

44 = Public Health Service other than 47

45 = Veterans Affairs

48 = Department of Justice

Database Field Name

MSERV

22 = Psychiatric
33 = Tuberculosis and other respiratory diseases
41 = Cancer
42 = Heart
44 = Obstetrics and gynecology
45 = Eye, ear, nose and throat
46 = Rehabilitation
47 = Orthopedic
48 = Chronic disease
49 = Other specialty
50 = Children's general
51 = Children's hospital unit of an institution
52 = Children's psychiatric
53 = Children's tuberculosis and other respiratory diseases
55 = Children's eye, ear, nose and throat
56 = Children's rehabilitation
57 = Children's orthopedic
58 = Children's chronic disease
59 = Children's other specialty
62 = Intellectual disabilities
80 = Acute Long-Term Care
82 = Alcoholism and other chemical dependency
90 = Children's acute long-term
91 = Children's cancer

Patient Engagement

1a. Does your hospital provide outpatient care to patients? Note: Outpatient care refers to both hospital based and satellite outpatient departments/sites.

Hospital provides outpatient care to patients

Q1a

riospital provides outputient care to patients

Key1 = Yes (go to 1b)
0 = No (go to 2)

1b. Is there more than one primary EMR/EHR system in use across your outpatient site(s)?

More than one primary EMR/EHR system in use across your outpatient site(s)

Кеу

Survey Question Number

Q1a

Database Field Name

OPCARE

Survey Question Number

Q1b

Database Field Name
POPEHR

2. Are patients who receive care provided by your hospital or outpatient sites able to do the following: (Check "Yes" only if the functionality has been "turned on" and is fully implemented and available to patients. Check both (1) and (2) if the functionality is turned on in both inpatient and outpatient settings)

	Summer Organian Number	Database Field Names
	Survey Question Number	Database Field Name
a. View their health/medical information online in their portal - some or all inpatient sites	Q2a_1	PEFVIIS
a. View their health/medical information online in their portal - some or all outpatient sites	Q2a_2	PEFVIOS
a. View their health/medical information online in their portal - no	Q2a_3	PEFVINO
a. View their health/medical information online in their portal - do not know	Q2a_4	PEFVIDNK
b. Download health/medical information from their medical record from your portal - some or all inpatient sites	Q2b_1	PEFDIIS
 b. Download health/medical information from their medical record from your portal - some or all outpatient sites 	Q2b_2	PEFDIOS
b. Download health/medical information from their medical record from your portal - no	Q2b_3	PEFDINO
 b. Download health/medical information from their medical record from your portal - do not know 	Q2b_4	PEFDIDNK
c. Import their medical records from other organizations into your portal - some or all inpatient sites	Q2c_1	PEFIRIS
c. Import their medical records from other organizations into your portal - some or all outpatient sites	Q2c_2	PEFIROS
c. Import their medical records from other organizations into your portal - no	Q2c_3	PEFIRNO
c. Import their medical records from other organizations into your portal - do not know	Q2c_4	PEFIRDNK
d. Electronically transmit (send) health/medical information to a third party from your portal (in a structured format such as CCDA) - some or all inpatient sites	Q2d_1	PEFSFIS
d. Electronically transmit (send) health/medical information to a third party from your portal (in a structured format such as CCDA) - some or all outpatient sites	Q2d_2	PEFSFOS
d. Electronically transmit (send) health/medical information to a third party from your portal (in a structured format such as CCDA) - no	Q2d_3	PEFSFNO
d. Electronically transmit (send) health/medical information to a third party from your portal (in a structured format such as CCDA) - do not know	Q2d_4	PEFSFDNK
e. Request an amendment to change/update their medical record online - some or all inpatient sites	Q2e_1	PEFRAIS
e. Request an amendment to change/update their medical record online - some or all outpatient sites	Q2e_2	PEFRAOS

e. Request an amendment to change/update their medical record online - no	Q2e_3	PEFRANO
e. Request an amendment to change/update their medical record online - do not know	Q2e_4	PEFRADNK
f. View their clinical notes (e.g., visit notes including consultation, progress, history and physical) in their portal - some or all inpatient sites	Q2f_1	PEFVCNIS
f. View their clinical notes (e.g., visit notes including consultation, progress, history and physical) in their portal - some or all outpatient sites	Q2f_2	PEFVCNOS
f. View their clinical notes (e.g., visit notes including consultation, progress, history and physical) in their portal - no	Q2f_3	PEFVCNNO
f. View their clinical notes (e.g., visit notes including consultation, progress, history and physical) in their portal - do not know	Q2f_4	PEFVCNDNK
g. Access their health/medical information using applications (apps) configured to meet the application programming interfaces (API) specifications in your EHR - some or all inpatient sites	Q2g_1	PEFAPIIS
g. Access their health/medical information using applications (apps) configured to meet the application programming interfaces (API) specifications in your EHR - some or all outpatient sites	Q2g_2	PEFAPIOS
g. Access their health/medical information using applications (apps) configured to meet the application programming interfaces (API) specifications in your EHR - no	Q2g_3	PEFAPINO
g. Access their health/medical information using applications (apps) configured to meet the application programming interfaces (API) specifications in your EHR - do not know	Q2g_4	PEFAPIDNK
h. Access their health/medical information using applications (apps) configured to meet Fast Healthcare Interoperability Resource (FHIR) specifications - some or all inpatient sites	Q2h_1	PEFFHIIS
h. Access their health/medical information using applications (apps) configured to meet Fast Healthcare Interoperability Resource (FHIR) specifications - some or all outpatient sites	Q2h_2	PEFFHIOS
h. Access their health/medical information using applications (apps) configured to meet Fast Healthcare Interoperability Resource (FHIR) specifications - no	Q2h_3	PEFFHINO
h. Access their health/medical information using applications (apps) configured to meet Fast Healthcare Interoperability Resource (FHIR) specifications - do not know	Q2h_4	PEFFHIDNK
i. Submit patient generated data (e.g., blood glucose, weight) - some or all inpatient sites	Q2i_1	PEFSDIS
i. Submit patient generated data (e.g., blood glucose, weight) - some or all outpatient sites	Q2i_2	PEFSDOS
i. Submit patient generated data (e.g., blood glucose, weight) - no	Q2i_3	PEFSDNO
i. Submit patient generated data (e.g., blood glucose, weight) - do not know	Q2i_4	PEFSDDNK
j. Submit patient generated data (e.g., blood glucose, weight) through apps configured to meet FHIR specifications - some or all inpatient sites	Q2j_1	PEFAPIS
j. Submit patient generated data (e.g., blood glucose, weight) through apps configured to meet FHIR specifications - some or all outpatient sites	Q2j_2	PEFAPOS
j. Submit patient generated data (e.g., blood glucose, weight) through apps configured to meet FHIR specifications - no	Q2j_3	PEFAPNO

j. Submit patient generated data (e.g., blood glucose, weight) through apps configured to meet FHIR specifications - do not know	Q2j_4	PEFAPDNK
k. Send/receive secure message with providers - some or all inpatient sites	Q2k_1	PERSMIS
k. Send/receive secure message with providers - some or all outpatient sites	Q2k_2	PERSMOS
k. Send/receive secure message with providers - no	Q2k_3	PERSMNO
k. Send/receive secure message with providers - do not know	Q2k_4	PERSMDNK

1 = Yes

0 = No

Social Determinants of Health

3. Does your hospital routinely collect data on individual patients' health related social needs (often referred to as social determinants of health) such as transportation, housing, food insecurity or other?

Hospital routinely collects data on individual patients' health related social needs

Survey Question Number	Database Field Name
Q3	SDHSN

Key

1 = Yes, routinely

2 = Yes, but not routinely

3 = No (go to 6)

4 = Don't know (go to 6)

4a. How are data on individual patient's health related social needs recorded at your hospital? Check all that apply

1. Structured electronic screening tool (including 'keying in' information from a paper form) (go to 4b)

2. Free text note (go to 5)

3. Diagnosis codes (e.g., ICD-10-CM Z codes) (go to 5)

4. Non-electronic methods (including those that are scanned into the EHR) (go to 5)

(80 00	Q4a_1
	Q4a_2
	Q4a_3
	Q4a_4

Survey Question Number

Database Field Name
SNESTL
SNFTNTE
SNDCDS

SNNELEC

Key

1 = Yes

0 = No

4b. If you use a screening tool, what type of screening tool?

Type of screening tool

Survey Question Number	Database Field Name
Q4b	SCTOOL

- 1 = Customized/home grown tool
- 2 = An externally established tool such as PRAPARE, Recommended Social and Behavioral Domains for EHRs, Your Current Life Situation Survey
- 3 = A combination (e.g., modification of externally established tool)
- 4 = Don't know

5. How does your hospital use data on patients' health related social needs documented at your hospital? Check all that apply

	Survey Question Number	Database Field Name
a. For referrals to social service organizations	Q5_A	HSNSSO
b. For population health analytics	Q5_B	HSNPHA
c. For quality management	Q5_C	HSNQMGT
d. To inform community needs assessment or other equity initiatives	Q5_D	HSNCNA
e. To inform clinical decision making	Q5_E	HSNCDM
f. To inform discharge planning	Q5_F	HSNDPLN
g. Other (use health related social needs)	Q5_G	HSNOTH
Other description (use health related social needs)	Q5_G_OTH	HSNOTH_DESC

Key

1 = Yes

0 = No

6. From which sources outside your hospital/health system does your hospital electronically receive data on patients' social needs? Check all that apply

	Survey Question Number	Database Field Name
a. Health information exchanges	Q6_A	OSNHIE
b. Other healthcare organizations	Q6_B	OSNHCORG
c. Community/social service organizations	Q6_C	OSNSSO
d. Social service or community-based referral platform (such as Unite Us or Aunt Bertha)	Q6_D	OSNCBP
e. Other (external source for social needs)	Q6_E	OSNOTH
Other description (external source for social needs)	Q6_E_OTH	OSNOTH_DESC
f. Do not receive data on health-related social needs from any external sources (go to 8)	Q6 F	OSNDN

Key

1 = Yes

0 = No

7. If you indicated receiving data on patients' health related social needs from external sources, how do you use these data? Check all that apply

Survey Question Number	Database Field Name
survey question italiaei	Database i icia italiie

a. For screening at our hospital (e.g., prompt screening, prepopulate screening tool)	Q7_A	ESSCREEN
b. For referrals to social service organization	Q7_B	ESSSO
c. For population health analytics	Q7_C	ESPHA
d. To inform community needs assessment or other equity initiatives	Q7_D	ESCNA
e. To inform clinical decision making	Q7_E	ESCDM
f. To inform discharge planning	Q7_F	ESDPLN
g. Other (use external source)	Q7_G	ESOTH
Other description (use external source)	Q7_G_OTH	ESOTH_DESC

1 = Yes

0 = No

Participation in health information exchange networks

8a. Please indicate your level of participation in a state, regional, and/or local health information exchange (HIE) or health information organization (HIO). Note: This does not refer to a private, enterprise network.

Level of HIE or HIO participation

Survey Question Number

Q8a

RHIO_LVL1

Key

- 1 = HIE/HIO is operational in my area and we are participating and actively exchanging data in at least one HIE/HIO
- 2 = HIE/HIO is operational in my area but we are not participating
- 3 = HIE/HIO is not operational in my area
- 4 = Do not know

8b. Please indicate which state, regional and/or local HIE/HIO(s) with which your hospital participates and actively exchanges data as well as the first year your hospitals actively participated in this HIE/HIO. (See HIO list)

	Survey Question Number	Database Field Name
8b1a. Name/reference number 1	Q8b1_A	NMREF1
8b1b. First year your hospital participated 1	Q8b1_B	YEAR1
8b1b.Name1 Other	Q8b1_OTH	NM10TH
8b2a. Name/reference number 2	Q8b2_A	NMREF2
8b2b. First year your hospital participated 2	Q8b2_B	YEAR2
8b1b.Name2 Other	Q8b2_OTH	NM2OTH
8b3a. Name/reference number 3	Q8b3_A	NMREF3
8b3b. First year your hospital participated 3	Q8b3_B	YEAR3
8b1b.Name3 Other	Q8b3_OTH	NM3OTH

9. Which of the following national health information exchange networks does your hospital currently actively participate in (i.e., operational exchange)? Check all that apply

	Survey Question Number	Database Field Name
a. CommonWell Health Alliance	Q9_A	CWHA
b. e-Health Exchange	Q9_B	HLTHXCH
c. Civitas (formerly SHIEC)/Patient Centered Data Home (PCDH)	Q9_C	SHIEC
d. Carequality (network-to-network trust/governance framework	Q9_D	SPCAREQ
e. DirectTrust	Q9_E	DIRTRST
f. EHR vendor-based-network that enables record location and exchange within the EHR vendor's network of users (e.g., Epic's Care Everywhere)	Q9_F	VENNET
g. Other national health information exchange network	Q9_G	OTHNET
Other national health information exchange network description	Q9_G_OTH	OTHNET_DESC
h. Do not participate in any national health information exchange networks (either via vendor or directly)	Q9_H	NETNO
i. Do not know (national HIE networks)	Q9_I	NETDNK
Key		
1 = Yes		
0 = No		

10a. Does your hospital currently use Direct messaging that is enabled through the DIRECT protocol?

Q10a DRTMSG

Hospital uses Direct messaging enabled through DIRECT protocal and the DirectTrust

Key 1 = Yes

2 = No (go to 11)

3 = Do not know (go to 11)

10b. If yes, is it enabled by DirectTrust?

Direct messaging enabled by DirectTrust

Survey Question Number	Database Field Name
Q10b	DRTENB

Key

1 = Yes

2 = No

3 = Do not know

Trusted Exchange Framework and Common Agreement

11. Are you aware of the Trusted Exchange Framework and Common Agreement (TEFCA)?

Aware of the Trusted Exchange Framework and Common Agreement (TEFCA)

Survey Question Number	Database Field Name
Q11	ATEFCA

Key

1 = Yes

0 = No (go to 13)

12. If yes, are you planning to participate in TEFCA exchange (such as through your HIE or other national network)?

Planning to participate in TEFCA exchange

Q12

Database Field Name
PTEFCA

Key

1 = Yes

2 = No

3 = Do not know

Querying information from outside providers or sources

13a. Does your hospital <u>query</u> electronically for patients' health information (e.g. medications, outside encounters) from sources <u>outside</u> of your organization or hospital system? *Note:*Hospitals that auto-query should respond "Yes"

Q13a

Hospital able to query electronically for a patient's health information from sources outside organization or system

Survey Question Number Database Field Name

EQPHIOS

Key

1 = Yes (go to 13b)

2 = No, but have the capability (go to 14)

3 = Do not know (go to 14)

4 = No, do not have capability (go to 14)

13b. How often are the following electronic methods used to search for (e.g., query or auto-query) and view patient health information from sources outside your organization or hospital system?

Electronic Methods	Survey Question Number	Database Field Name
1. Provider portals that allow you to view records in another organization's EHR system	Q13b_1	EMOPORT
2. Interface connection between EHR systems (e.g. HL7 interface)	Q13b_2	EMOINTF
 Access to other organizations' EHR system using login credentials Regional, state, or local health information exchange organization (HIE/HIO). NOT local, 	Q13b_3	EMODIRAC
proprietary, enterprise network	Q13b_4	EMOREG

5. EHR vendor-based network that enables record location within the network (e.g. Care Everywhere)	Q13b_5	EMOVBN
6. EHR connection to national networks that enable record location across EHRs in different networks (e.g. CommonWell, e-Health Exchange, Carequality)	Q13b_6	EMONATNET
7. Other electronic methods	Q13b_7	EMOOTH
Other electronic methods description	Q13b_7_OTH	EMOOTH_DESC

- 1 = Often
- 2 = Sometimes
- 3 = Rarely
- 4 = Never
- 5 = Do not know/NA

Sending patient health information

14. When a patient transitions to another care setting organization outside of your organization or hospital system, how often are the following methods used to <u>SEND</u> a summary of care record?

	Survey Question Number	Database Field Name
Methods without intermediaries		
a. Mail or fax	Q14_A	MAILSND
b. eFax using EHR	Q14_B	EFAXSND
c. Provider portals that allow outside organization to view records in your EHR system	Q14_C	PORTSND
d. Interface connection between EHR systems (e.g. HL7 interface)	Q14_D	INTCONSND
e. Login credentials that allow access to your EHR	Q14_E	DIRACCSND
f. Other methods without intermediaries	Q14_F	OTHNISND
Other methods description (sending without intermediaries)	Q14_F_OTH	OTHNISND_DESC
Methods with intermediaries		
g. HISPs that enable messaging via DIRECT protocol	Q14_G	HISPSND
h. Regional, state, or local health information exchange organization (HIE/HIO). <i>Not local proprietary, enterprise network</i>	Q14_H	HIOSND
i. EHR vendor-based network that enables exchange with vendor's other users. (e.g., Epic's Care Everywhere)	Q14_I	SEHRSND
j. National networks that enable exchange across different EHR vendors (e.g. CommonWell, e-Health exchange, Carequality)	Q14_J	MEHRSND
k. Other methods with intermediaries (sending)	Q14_K	OTHISND
Other methods description (sending with intermediaries)	Q14_K_OTH	OTHISND_DESC
Key]	
1 = Often		

- 1 = Often
- 2 = Sometimes
- 3 = Rarely

4 = Never

5 = Do not know/NA

Electronic Notifications

15a. When a patient visits your Emergency Department (ED), do you provide electronic notification to the patient's primary care physician?

Provide electronic notification to primary care physician after ED visit

Survey Question Number	Database Field Name
Q15a	ENED

Key

- 1 = Yes, routinely
- 2 = Yes, but not routinely (e.g. often missing information to route notification)
- 3 = No, but have the capability (go to 16a)
- 4 = No, don't have the capability (go to 16a)
- 5 = Don't know (go to 16a)
- 6 = Don't have ED (go to 16a)

15b. If yes, are electronic notifications provided to primary care physicians below? (Check all that apply)

- 1. Inside the system
- 2. Outside the system
- 3. Do not know (electronic notifications)

Survey Question Number	Database Field Name
Q15b_1	PCPENI
Q15b_2	PCPENO
Q15b 3	PCPENDK

Key

1 = Yes

0 = No

16a. Does your hospital provide electronic admission, discharge or transfer (ADT) notifications to long-term post-acute care providers?

Provide electronic admission, discharge or transfer (ADT) notifications to long-term post-acute care providers

Survey Question Number	Database Field Name
Q16a	ADTLT

Key

- 1 = Yes, routinely
- 2 = Yes, but not routinely (e.g. often missing information to route notification)
- 3 = No, but have the capability (go to 17)
- 4 = No, don't have the capability (go to 17)
- 5 = Don't know (17)

16b. If yes, are electronic notifications provided to LTPAC facilities below? Check all that apply

	Survey Question Number	Database Field Name
1. Inside the same system as the hospital (LTPAC facilities)	Q16b_1	ENLTPIN
2. Outside the hospital's system (LTPAC facilities)	Q16b_2	ENLTPOUT
3. Don't know (LTPAC facilities)	Q16b_3	ENLTPDNK
Key		
1 = Yes		

Receive and integrate patient health information

17. When a patient transitions from another care setting <u>outside your organization or hospital system</u>, how often does your hospital use the following methods to <u>RECEIVE</u> a summary of care record?

	Survey Question Number	Database Field Name
Methods without intermediaries		
a. Mail or fax	Q17_A	MAILRCV
b. eFax using EHR	Q17_B	EFAXRCV
c. Provider portals that allow you to view records in another organizations' EHR system	Q17_C	PORTRCV
d. Interface connection between EHR systems (e.g. HL7 interface)	Q17_D	INTCONRCV
e. Access to other organizations' EHR system using login credentials	Q17_E	DIRACCRCV
f. Other methods without intermediaries (receiving)	Q17_F	OTHNIRCV
Other methods description (receiving without intermediaries)	Q17_F_OTH	OTHNIRCV_DESC
Methods with intermediaries		
g. HISPs that enable messaging via DIRECT protocol	Q17_G	HISPRCV
h. Regional, state, or local health information exchange organization (HIE/HIO). NOT local	Q17_H	HIORCV
proprietary enterprise network	Q17_H	HIORCV
i. EHR vendor-based network that enables exchange with vendor's other users (e.g. Epic's Care	Q17_I	SEHRRCV
Everywhere)	Q±/_i	321 Miles
j. National networks that enable exchange across different EHR vendors (e.g. CommonWell,	017	MEHRROV
eHealth Exchange, Carequality)	Q17_3	WEITKING
k. Other methods with intermediaries (receiving)	Q17_K	OTHIRCV
Other methods description (receiving with intermediaries)	Q17_K_OTH	OTHIRCV_DESC
eHealth Exchange, Carequality) k. Other methods with intermediaries (receiving)		

Key

0 = No

- 1 = Often
- 2 = Sometimes
- 3 = Rarely
- 4 = Never
- 5 = Do not know/NA

18. Does your EHR integrate the information contained in summary of care records received electronically (not eFax) without the need for manual entry?

Q18 Integration of electronically received summary of care records SOCINT Key 1 = Yes, routinely 2 = Yes, but not routinely 3 = No 4 = Do not know 5 = NA 19. Does your EHR integrate health insurer real-time prescription benefit information? **Survey Question Number Database Field Name** Q19 EHR integrates health insurer real-time prescription benefit information **PRESBEN** Key 1 = Yes, for all or almost all payers 2 = Yes, for a limited set of payers 3 = No 4 = Do not know Availability and usage of data that is exchanged 20. When treating a patient that was seen by a provider outside your organization or hospital system, do providers at your hospital routinely have necessary clinical information available electronically (not e-Fax) from outside providers or sources? **Survey Question Number Database Field Name** Clinical information available electronically from outside providers/sources Q20 CIAOUT Key 1 = Yes 2 = No 3 = Do not know 21. How frequently do providers at your hospital use patient health information received electronically (not e-Fax) from outside providers or sources when treating a patient? **Survey Question Number Database Field Name** Q21 Use electronic patient health information from outside providers **PHIOUT** Key

Survey Question Number

1 = Often 2 = Sometimes **Database Field Name**

3 = Rarely

4 = Never

5 = Do not know

22. To what extent do you agree with this statement: my hospital electronically received information from outside providers needed to effectively treat COVID-19?

My hospital electronically received information from outside providers needed to effectively treat COVID-19

Survey Question Number	Database Field Name
Q22	CVDIOP

Key

- 1 = Strongly agree
- 2 = Agree
- 3 = Neither agree nor disagree
- 4 = Disagree
- 5 = Strongly disagree
- 6 = Don't know

Public Health Reporting

23a. What is your hospital's current stage of active engagement towards electronically submitting data for public health reporting related to the activities listed below?

	Survey Question Number	Database Field Name
1. Syndromic surveillance reporting	Q23a_1	SSRAE
2. Immunization registry reporting	Q23a_2	IRRAE
3. Electronic case reporting	Q23a_3	ECRAE
4. Public health registry reporting (i.e. registry maintained by or for a public health agency NOT including immunization registry)	Q23a_4	PHRAE
5. Clinical data registry reporting (i.e. registry maintained by non-public health agency, such as specialty society)	Q23a_5	CDRAE
6. Electronic reportable laboratory result reporting	Q23a_6	ERLAE

Kev

- 1 = Actively electronically submitting production data
- 2 = In the process of testing and validating electronic submission of data
- 3 = Completed registration to submit data
- 4 = Have not completed registration
- 5 = Don't know

23b. How does your hospital electronically submit data for public health reporting related to the activities listed below? Note this is referring to data generated through clinical processes involving patient care (production data NOT test data).

1. Syndromic surveillance reporting - Electronic health record Q23b_1_1 SSREHR

Syndromic surveillance reporting - Health information exchange	Q23b_1_2	SSRHIE
1. Syndromic surveillance reporting - Portal submission	Q23b_1_3	SSRPS
1. Syndromic surveillance reporting - Flat files	Q23b_1_4	SSRFF
Syndromic surveillance reporting - Not electronically submitting	Q23b_1_5	SSRNES
1. Syndromic surveillance reporting - Don't know	Q23b_1_6	SSRDK
2. Immunization registry reporting - Electronic health record	Q23b_2_1	IIREHR
2. Immunization registry reporting - Health information exchange	Q23b_2_2	IIRHIE
2. Immunization registry reporting - Portal submission	Q23b_2_3	IIRPS
2. Immunization registry reporting - Flat files	Q23b_2_4	IIRFF
2. Immunization registry reporting - Not electronically submitting	Q23b_2_5	IIRNES
2. Immunization registry reporting - Don't know	Q23b_2_6	IIRDK
3. Electronic case reporting - Electronic health record	Q23b_3_1	ECREHR
3. Electronic case reporting - Health information exchange	Q23b_3_2	ECRHIE
3. Electronic case reporting - Portal submission	Q23b_3_3	ECRPS
3. Electronic case reporting - Flat files	Q23b_3_4	ECRFF
3. Electronic case reporting - Not electronically submitting	Q23b_3_5	ECRNES
3. Electronic case reporting - Don't know	Q23b_3_6	ECRDK
1. Public health registry reporting - Electronic health record	Q23b_4_1	PHREHR
1. Public health registry reporting - Health information exchange	Q23b_4_2	PHRHIE
1. Public health registry reporting - Portal submission	Q23b_4_3	PHRPS
1. Public health registry reporting - Flat files	Q23b_4_4	PHRFF
1. Public health registry reporting - Not electronically submitting	Q23b_4_5	PHRNES
4. Public health registry reporting - Don't know	Q23b_4_6	PHRDK
5. Clinical data registry reporting - Electronic health record	Q23b_5_1	CDREHR
5. Clinical data registry reporting - Health information exchange	Q23b_5_2	CDRHIE
5. Clinical data registry reporting - Portal submission	Q23b_5_3	CDRPS
5. Clinical data registry reporting - Flat files	Q23b_5_4	CDRFF
5. Clinical data registry reporting - Not electronically submitting	Q23b_5_5	CDRNES
5. Clinical data registry reporting - Don't know	Q23b_5_6	CDRDK
5. Electronic reportable laboratory result reporting - Electronic health record	Q23b_6_1	ERLEHR
5. Electronic reportable laboratory result reporting - Health information exchange	Q23b_6_2	ERLHIE
5. Electronic reportable laboratory result reporting - Portal submission	Q23b_6_3	ERLPS
5. Electronic reportable laboratory result reporting - Flat files	Q23b_6_4	ERLFF
5. Electronic reportable laboratory result reporting - Not electronically submitting	Q23b_6_5	ERLNES
5. Electronic reportable laboratory result reporting - Don't know	Q23b_6_6	ERLDK
7. Hospital capacity and utilization of medical supplies - Electronic health record	Q23b_7_1	HCUEHR
7. Hospital capacity and utilization of medical supplies - Health information exchange	Q23b_7_2	HCUHIE
7. Hospital capacity and utilization of medical supplies - Portal submission	Q23b_7_3	HCUPS
7. Hospital capacity and utilization of medical supplies - Flat files	Q23b_7_4	HCUFF
7. Hospital capacity and utilization of medical supplies - Not electronically submitting	Q23b_7_5	HCUNES
7. Hospital capacity and utilization of medical supplies - Don't know	Q23b_7_6	HCUDK

1 = Yes

0 = No

23c. For each type of public health reporting, please indicate whether your hospital uses automated, manual, or a mix of both types of processes to transmit the data.

	Survey Question Number	Database Field Name
1. Syndromic surveillance reporting	Q23c_1	SSRSTRDT
2. Immunization registry reporting	Q23c_2	IRRSTRDT
3. Electronic case reporting	Q23c_3	ECRSTRDT
4. Public health registry reporting	Q23c_4	PHRSTRDT
5. Clinical data registry reporting	Q23c_5	CDRSTRDT
6. Electronic reportable laboratory result reporting	Q23c_6	ERLSTRDT
7. Hospital capacity and utilization of medical supplies	Q23c_7	HCUSTRDT

Kev

- 1 = Fully or primarily automated
- 2 = Mix of automated and manual processes
- 3 = Fully or primarily manual
- 4 = Don't know

23d. What are some of the challenges your hospital has experienced when trying to submit health information to public health agencies to meet CMS reporting requirements for Promoting Interoperability Program? (Please check all that apply)

	Survey Question Number	Database Field Name
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Syndromic surveillance reporting	Q23d_1_1	NOCAPRSSR
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Immunization registry reporting	Q23d_1_2	NOCAPRIRR
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Electronic case reporting	Q23d_1_3	NOCAPRECR
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Public health registry reporting	Q23d_1_4	NOCAPRPHR
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Clinical data registry reporting	Q23d_1_5	NOCAPRCDR
1. Public health agencies lack the capacity (e.g., technical, staffing) to electronically <u>receive</u> the information - Electronic reportable laboratory result reporting	Q23d_1_6	NOCAPRERL
2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Syndromic surveillance reporting	Q23d_2_1	NOCAPSSSR
2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Immunization registry reporting	Q23d_2_2	NOCAPSIRR
2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Electronic case reporting	Q23d_2_3	NOCAPSECR

2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Public health registry reporting	Q23d_2_4	NOCAPSPHR
2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Clinical data registry reporting	Q23d_2_5	NOCAPSCDR
2. Do not have the capacity (e.g., technical, staffing) to electronically <u>send</u> the information - Electronic reportable laboratory result reporting	Q23d_2_6	NOCAPSERL
3. Technical complexity of interfaces, transmission, or submission process - Syndromic surveillance reporting	Q23d_3_1	COMPSSR
3. Technical complexity of interfaces, transmission, or submission process - Immunization registry reporting	Q23d_3_2	COMPIRR
3. Technical complexity of interfaces, transmission, or submission process - Electronic case reporting	Q23d_3_3	COMPECR
3. Technical complexity of interfaces, transmission, or submission process - Public health registry reporting	Q23d_3_4	COMPPHR
3. Technical complexity of interfaces, transmission, or submission process - Clinical data registry reporting	Q23d_3_5	COMPCDR
3. Technical complexity of interfaces, transmission, or submission process - Electronic reportable laboratory result reporting	Q23d_3_6	COMPERL
4. Cost related to interfaces, transmission, or submission - Syndromic surveillance reporting	Q23d_4_1	COSTSSR
4. Cost related to interfaces, transmission, or submission - Immunization registry reporting	Q23d_4_2	COSTIRR
4. Cost related to interfaces, transmission, or submission - Electronic case reporting	Q23d_4_3	COSTECR
4. Cost related to interfaces, transmission, or submission - Public health registry reporting	Q23d_4_4	COSTPHR
4. Cost related to interfaces, transmission, or submission - Clinical data registry reporting	Q23d_4_5	COSTCDR
4. Cost related to interfaces, transmission, or submission - Electronic reportable laboratory result reporting	Q23d_4_6	COSTERL
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Syndromic surveillance reporting	Q23d_5_1	VOCABSSR
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Immunization registry reporting	Q23d_5_2	VOCABIRR
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Electronic case reporting	Q23d_5_3	VOCABECR
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Public health registry reporting	Q23d_5_4	VOCABPHR
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Clinical data registry reporting	Q23d_5_5	VOCABCDR
5. Use different vocabulary standards than the public health agency, making it difficult to submit - Electronic reportable laboratory result reporting	Q23d_5_6	VOCABERL
6. Difficulty extracting relevant information from EHR - Syndromic surveillance reporting	Q23d_6_1	RELINFSSR

6. Difficulty extracting relevant information from EHR - Immunization registry reporting	Q23d_6_2	RELINFIRR
6. Difficulty extracting relevant information from EHR - Electronic case reporting	Q23d_6_3	RELINFECR
6. Difficulty extracting relevant information from EHR - Public health registry reporting	Q23d_6_4	RELINFPHR
6. Difficulty extracting relevant information from EHR - Clinical data registry reporting	Q23d_6_5	RELINFCDR
Difficulty extracting relevant information from EHR - Electronic reportable laboratory result reporting	Q23d_6_6	RELINFERL
7. Data are not stored in a discrete format within the EHR - Syndromic surveillance reporting	Q23d_7_1	DISFORSSR
7. Data are not stored in a discrete format within the EHR - Immunization registry reporting	Q23d_7_2	DISFORIRR
7. Data are not stored in a discrete format within the EHR - Electronic case reporting	Q23d_7_3	DISFORECR
7. Data are not stored in a discrete format within the EHR - Public health registry reporting	Q23d_7_4	DISFORPHR
7. Data are not stored in a discrete format within the EHR - Clinical data registry reporting	Q23d_7_5	DISFORCDR
7. Data are not stored in a discrete format within the EHR - Electronic reportable laboratory result reporting	Q23d_7_6	DISFORERL
8. Onboarding process for electronic reporting is too cumbersome - Syndromic surveillance reporting	Q23d_8_1	ONBPROSSR
8. Onboarding process for electronic reporting is too cumbersome - Immunization registry reporting	Q23d_8_2	ONBPROIRR
8. Onboarding process for electronic reporting is too cumbersome - Electronic case reporting	Q23d_8_3	ONBPROECR
8. Onboarding process for electronic reporting is too cumbersome - Public health registry reporting	Q23d_8_4	ONBPROPHR
8. Onboarding process for electronic reporting is too cumbersome - Clinical data registry reporting	Q23d_8_5	ONBPROCDR
8. Onboarding process for electronic reporting is too cumbersome - Electronic reportable laboratory result reporting	Q23d_8_6	ONBPROERL

1 = Yes

0 = No

Key

Barriers to exchange and interoperability

Which of the following issues has your hospital experienced when trying to electronically (not eFax) send, receive, or find (query) patient health information to/from other organizations or hospital systems? (Check all that apply)

24a. Barriers related to electronically sending patient health information

	Survey Question Number	Database Field Name
1. Providers we would like to electronically send patient health information to, do <u>not</u> have an EHR or other electronic system with capability to receive the information	Q24a_1	NPEHR
2. Providers we would like to electronically send patient health information to $\underline{\text{have}}$ an EHR; however, it lacks the technical capability to receive the information	Q24a_2	PEHRNRI
3. Difficult to locate the address of the provider to send the information (e.g. lack of provider directory)	Q24a_3	NOPA
4. Many recipients of our electronic care summaries (e.g. CCDA) report that the information is not useful	Q24a_4	NUECS
5. It is difficult to locate the Direct address of the provider to send the information	Q24a_5	NODPA
Key 1 = Yes		
0 = No		

24b. Barriers related to electronically <u>receiving</u> patient health information		
	Survey Question Number	Database Field Name
1. Difficult to match or identify the correct patient between systems	Q24b_1	NOIDP
2. There are providers whom we share patients with that don't typically exchange patient data with us	Q24b_2	PRVNOEX
3. There are providers who share data with us but do not provide that data in the format that we request	Q24b_3	NFMTRQST
4. There are providers who state that they cannot exchange information with us due to privacy laws (e.g. HIPAA) in situations where that does not seem appropriate	Q24b_4	NAPRVLWS
Key 1 = Yes		
0 = No		

24c. Other barriers related to exchanging patient health information				
	Survey Question Number	Database Field Name		
1. Experience greater challenges exchanging (e.g. sending/receiving) data across different vendor platforms	Q24c_1	DIFVEND		
2. We have to pay additional costs to send/receive data with outside organizations/hospital systems	Q24c_2	ADCOST		

3. We had to develop customized interfaces in order to exchange (e.g., send/receive) data with	
outside organizations/health systems	

4. Contractual constraints between healthcare providers and health vendors limit our ability to exchange data with providers using certain systems

Q24c_3	CUSTINT
Q24c_3	COSTIN

Q24c_4 CNTRTCST

Key

1 = Yes

0 = No

Information Blocking Practices

25a. In what form(s) have you observed or experienced information blocking by Enterprise EHR vendor(s)?

	Survey Question Number	Database Field Name
1. Price	Q25a_1	EVPRCE
2. Contract language	Q25a_2	EVCNTLNG
3. Artificial technical, process, or resource barriers	Q25a_3	EVARTF
4. Refusal	Q25a_4	EVRFSL
5. Other (EHR venfor information blocking)	Q25a_5	EVOTH
Other description (EHR vendor information blocking)	Q25a 5 OTH	EVOTH DESC

Key

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely
- 4 = Don't know

25b. To what extent have you observed the following stakeholders engaging in information blocking behaviors?

	Survey Question Number	Database Field Name
1. Developers of Certified Health IT (e.g. Enterprise EHR vendors)	Q25b_1	SHCERTDV
2. National Networks (e.g CommonWell, eHealth Exchange)	Q25b_2	SHNTLNTW
3. State, regional, and/or local health information exchange	Q25b 3	SHSRLHIE

Key

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely
- 4 = Not Applicable (i.e. we have not tried to get information from this source)
- 5 = Don't know

	Survey Question Number	Database Field Name
1. Artificial technical, process, or resource barriers	Q25c_1	HCPARTF
2. Refusal	Q25c_2	HCPRFSL
3. Strategic affiliations	Q25c_3	HCPSTAFL
4. Other (healthcare provider blocking)	Q25c_4	НСРОТН
Other description (healthcare provider blocking)	Q25c_4_OTH	HCPOTH_DESC

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely
- 4 = Don't know

25d. To what extent have you observed healthcare providers engaging in information blocking behaviors?

Extent to which healthcare providers engage in in information blocking behaviors

Q25d

INFOBLK

Key

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely (go to 25f)
- 4 = We have not tried to get information from this source (go to 25f)
- 5 = Don't know (go to 25f)

25e. To what extent have you observed the following types of healthcare providers engaging in information blocking behaviors, as described in the question above?

	Survey Question Number	Database Field Name
1. Health Systems blocking	Q25e_1	HSBLK
2. Independent Hospitals blocking	Q25e_2	INDHSBLK
3. Independent physician or physician groups blocking	Q25e_3	INDPHYBLK
4. Other (healthcare provider blocking)	Q25e_4	OTHBLK
Other description (healthcare provider blocking)	Q25e_4_OTH	OTHBLK_DESC

Key

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely
- 4 = Not Applicable (We have not tried to get information from this source)

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25f. If you have experienced practices that you believed constituted information blocking in the past year, how often did you report the information blocking to ONC/HHS using the Report Information Blocking Portal?

Q25f

Reported information blocking to ONC/HHS using the Report Information Blocking Portal

Survey Question Number Database Field Name

RIPBFRQ

Key

- 1 = Often/Routinely
- 2 = Sometimes
- 3 = Never/Rarely
- 4 = Did not experience information blocking within the past year
- 5 = Don't know

EHR System and IT Vendors

26a. Does your hospital use an EHR system that has been certified?

Does your hospital use an EHR system that has been certified?

Survey Question Number	Database Field Name
Q26a	EMRHRCRT

Key

- 1 = Yes
- 2 = No
- 3 = Do not know

26b. If yes, has your hospital switched to a 2015 certified EHR system?

Hospital switched to a 2015 certified EHR system

Survey Question Number	Database Field Name
O26b	EHR2015CRT

Key

- 1 = Yes
- 2 = No
- 3 = Don't know

27a. Does your hospital integrate data into your EHR from third-party software (e.g., patient monitoring devices, telehealth)?

Hospital integrates data into EHR from third-party software

Survey Question Number	Database Field Name
027a	INTHRDPTY

Key

1 = Yes

2 = No (go to 27c) 3 = Don't know (go to 27c)

27b. If yes, how? (hospital integrates data into 3rd party software)

- 2. Standards-based API (hospital integrates data into 3rd party software)
- 3. Data integrator service (hospital integrates data into 3rd party software)
- 4. Don't know (hospital integrates data into 3rd party software)

Survey Question Number	Database Field Name
Q27b_1	INPTYAPI
Q27b_2	INSBAPI
Q27b_3	INDTINSVC
Q27b_4	INDNKAPI

Key

1 = Yes

0 = No

27c. Does your hospital provide data from your EHR to third-party applications used by clinicians at your hospital/health system?

Hospital provides data from EHR to third-party applications used by clinicians at hospital/health system?

Survey Question Number	Database Field Name
027c	DTATHDPTY

Key

1 = Yes

2 = No (go to 27e)

3 = Don't know (go to 27e)

27d. If yes, how? (hospital provides data from EHR to 3rd party applications)

- 1. Proprietary API (hospital provides data from EHR to 3rd party applications)
- 2. Standards-based API (hospital provides data from EHR to 3rd party applications)
- 3. Data integrator service (hospital provides data from EHR to 3rd party applications)
- 4. Don't know (hospital provides data from EHR to 3rd party applications)

Survey Question Number	Database Field Name
Q27d_1	DTPTYAPI
Q27d_2	DTSBAPI
Q27d_3	DTDTINSVC
Q27d_4	DTDNKAPI

Key

1 = Yes

0 = No

27e. Does your hospital provide data from sources other than your EHR to third-party applications used by clinicians at your hospital/health system?

Hospital provides data from sources other than EHR to third-party applications used by clinicians at hospital/health system?

Survey Question Number	Database Field Name
Q27e	OSATHDPTY

Key

1 = Yes 2 = No (go to 28) 3 = Don't know (go to 28)

27f. If yes, how? (hospital provides data from sources other than EHR to 3rd party applications)		
	Survey Question Number	Database Field Name
1. Proprietary API (hospital provides data from sources other than EHR to 3rd party applications)	Q27f_1	OSPTYAPI
2. Standards-based API (hospital provides data from sources other than EHR to 3rd party applications)	Q27f_2	OSSBAPI
3. Data integrator service (hospital provides data from sources other than EHR to 3rd party applications)	Q27f_3	OSDTINSVC
4. Don't know (hospital provides data from sources other than EHR to 3rd party applications)	Q27f_4	OSDNKAPI
Key		
1 = Yes		
0 = No		

28. Which vendor below provides your primary inpatient EHR/EMR system? "Primary" is defined as the system that is used for the largest number of patients or the system in which you have made the single largest investment. Please answer based on the vendor name rather than product. (Check only one)

you nave made the single largest investment. Please answer based on the vendor name rather than product. (Check only one)

Primary provider of inpatient EHR

Key		
_	_	

1 = Allscripts

2 = Cerner

3 = eClinical works

4 = Eclipsys

5 = Epic

6 = GE

7 = McKesson

8 = MED3000

9 = Meditech

10 = NextGen

11 = Harris Healthcare/QuadraMed

12 = Sage

13 = Siemens

14 = Self-developed

15 = Other (specify)

Other described

Survey Question Number	Database Field Name
Q28	PIEMR
Q28_OTH	PIEMRO

16 = Would prefer not to disclose

17 = CPSI/Evident

18 = HMS

19 = Healthland

20 = Vitera/Greenway

21 = Evident

22 = MEDHOST

24 = Prognosis

25 = Athenahealth

26 = MedWorx

27 = Health Care System

28 = Azalea Health/Prognosis

29. Overall, how satisfied or dissatisfied are you with your primary inpatient EHR system?

Satisfaction with primary inpatient EHR system

Survey Question Number	Database Field Name
029	SATISFHR

Database Field Name

SIOPV

Key

1 = Very satisfied

2 = Somewhat satisfied

3 = Somewhat dissatisfied

4 = Very dissatisfied

5 = Neither satisfied nor dissatisfied

30. Have you used the capability to export multiple records from your primary inpatient EHR system to support any of the following uses?

	Survey Question Number	Database Field Name
1. Analytics and reporting	Q30_1	ARCAP
2. Population health management	Q30_2	PHMCAP
3. Switching EHR systems	Q30_3	SWTSYCAP
4. Have not used the capability yet	Q30_4	NOUSECAP
5. Do not have this capability	Q30_5	DNHCAP

Key

1 = Yes

0 = No

31. Do you use the same primary inpatient EHR/EMR system vendor (noted above) for your primary outpatient EMR/EHR system?

Same primary inpatient EHR/EMR system vendor (noted above) for primary outpatient EMR/EHR system

Survey Question Number

Q31

- 1 = Yes, share single instance
- 2 = Yes, but do not share the single instance/version
- 3 = No
- 4 = Do not know
- 5 = NA

А-Н	H-N	N-W
Arkansas Office of HIT	36. HEALTHeLINK	70. North Dakota Health Information Network
Alabama One Health Record	37. Healthix	71. OneHealthPort
3. Alaska eHealth Network	38. HealthShare Exchange of Southeastern Pennsylvania (HSX)	72. OnePartner HIE
4. Bronx RHIO	39. HIE Networks	73. Orange County Partnership RHIO (OCPRHIO)
5. CAHIE	40. Hixny	74. Oregon Community Health Information Network (OCHIN)
6. Camden Coalition	41. Idaho Health Data Exchange	75. Paso del Norte Health Information Exchange (PHIX)
7. Carolina eHealth Alliance (CeHA)	42. Indiana Health Information Exchange	76. PatientBridge
8. Carolinas CareConnect	43. Integrated Care Collaboration	77. Pennsylvania eHealth Partnership Program
Central Coast Health Connect (CCHC)	44. Iowa Health Information Network (IHIN)	78. Pioneer Valley Health Information Exchange (PVIX)
10. Central Valley HIE	45. Jackson Community Medical Record Project	79. Quality Health Network
11. Chesapeake Regional Information System for our Patients (CRISP)	46. Kansas Health Information Network	80. Redwood MedNet
12. Children's IQ Network HIE	47. Kentucky Health Information Exchange	81. Reliance eHealth Collaborative
13. ClinicalConnect HIE	48. Keystone HIE	82. Rhode Island Quality Institute
14. CliniSync/Ohio Health Information Partners (OHIP)	49. Lewis And Clark Information Exchange	83. Rio Grande Valley Health Information Exchange (RGV HIE)
15. Coastal Connect HIE	50. Los Angeles Network for Enhanced Services (LANES)	84. Rochester RHIO
16. Colorado Regional Health Information Organization	51. Louisiana Health Information Exchange (LaHIE)	85. SacValley MedShare
17. Community Health Access Network (CHAN)	52. Maine Health Info Net	86. SafeHealth
18. Community Health IT	53. Manifest MedEx	87. San Diego Health Connect (SD Health Connect)
19. ConnectVirginia HIE	54. Mass Hlway	88. San Joaquin County HIE (SJCHIE)
20. Delaware Health Information Network	55. MedVirginia	89. San Mateo County Connected Care
21. East Tennessee Health Information Network (etHIN)	56. Michiana Health Information Network (merged with IHIE)	90. Santa Cruz Health Information Exchange
22. Emergency Department Information Exchange (EDIE)	57. Michigan Health Information Network Shared Services (MiHIN)	91. South Carolina Health Information Exchange (SCHIEx)
23. Florida Health Information Exchange (Florida HIE)	58. Mission HealthConnect	92. South Dakota Health Link
24. Georgia Health Information Network (GaHIN)	59. Mississippi Health Information Network (MS-HIN)	93. South East Michigan Health Information Exchange (SEMHIE)

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25. Georgia Regional Academic Community Health Information Exchange (GRACHIE)	60. Missouri Health Connection / Midwest Health Connection	94. State of Alaska Department of Health and Social Services
26. Great Lakes Health Connect	61. MyHealth Access Network	95. The Health Collaborative
27. Greater Dayton Area Health Information Network	62. Nebraska Health Information Initiative	96. Tiger Institute for Health Innovation HIE
28. Greater Houston Healthconnect	63. New Jersey Department of Health	97. Trenton Health Information Exchange
29. Greater New Orleans Health Information Exchange (GNOHIE)	64. New Jersey Innovation Institute	98. Upper Peninsula Health Information Exchange
30. Guardian HIE	65. New Jersey Southern Health Information Network Exchange (NJSHINE)	99. Utah Health Information Network (UHIN)
31. Hawaii Health Information Exchange	66. New Mexico Health Information Collaborative (NMHIC)	100. Vale-U-Health RHIO
32. Health Current	67. New York eHealth Collaborative	101. Vermont Information Technology Leaders
33. Health HIE Nevada	68. North Carolina Health Information Exchange Authority (NC HIEA)	102. West Virginia Health Information Network
34. Healthcare Access San Antonio (HASA)	69. North Coast Health Information Network	103. Wisconsin Statewide Health Information Network (WISHIN)
35. HealtheConnections		104. Wyoming Frontier Information (WYFI)