

# Progress in Health Information Technology

2014 Annual HIT Survey  
by The American Hospital Association

How are Pennsylvania hospitals meeting the Meaningful Use requirements of the Medicare and Medicaid EHR Incentive Programs?

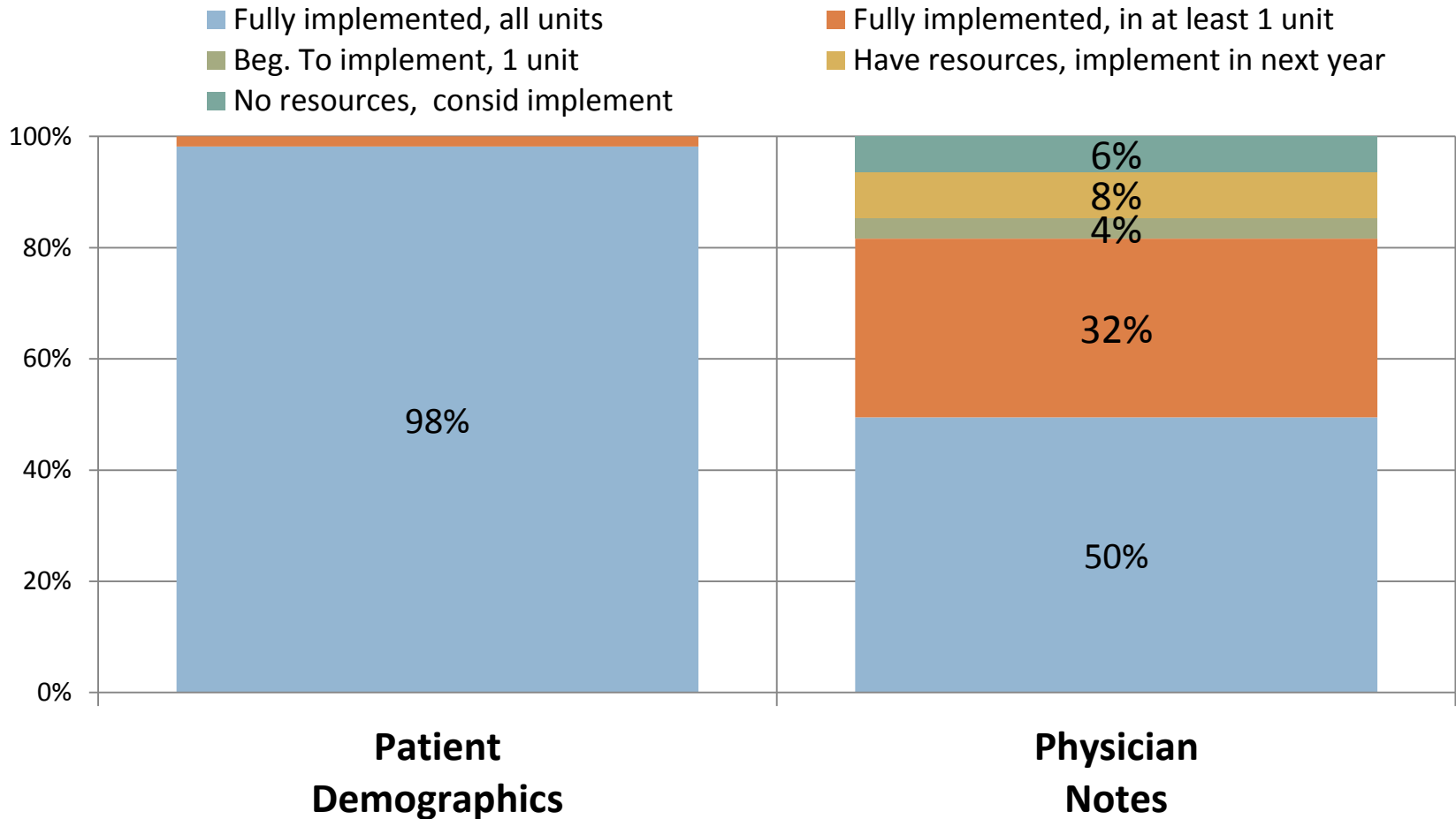
*April 2015*

# State E-Health Activities in 2014

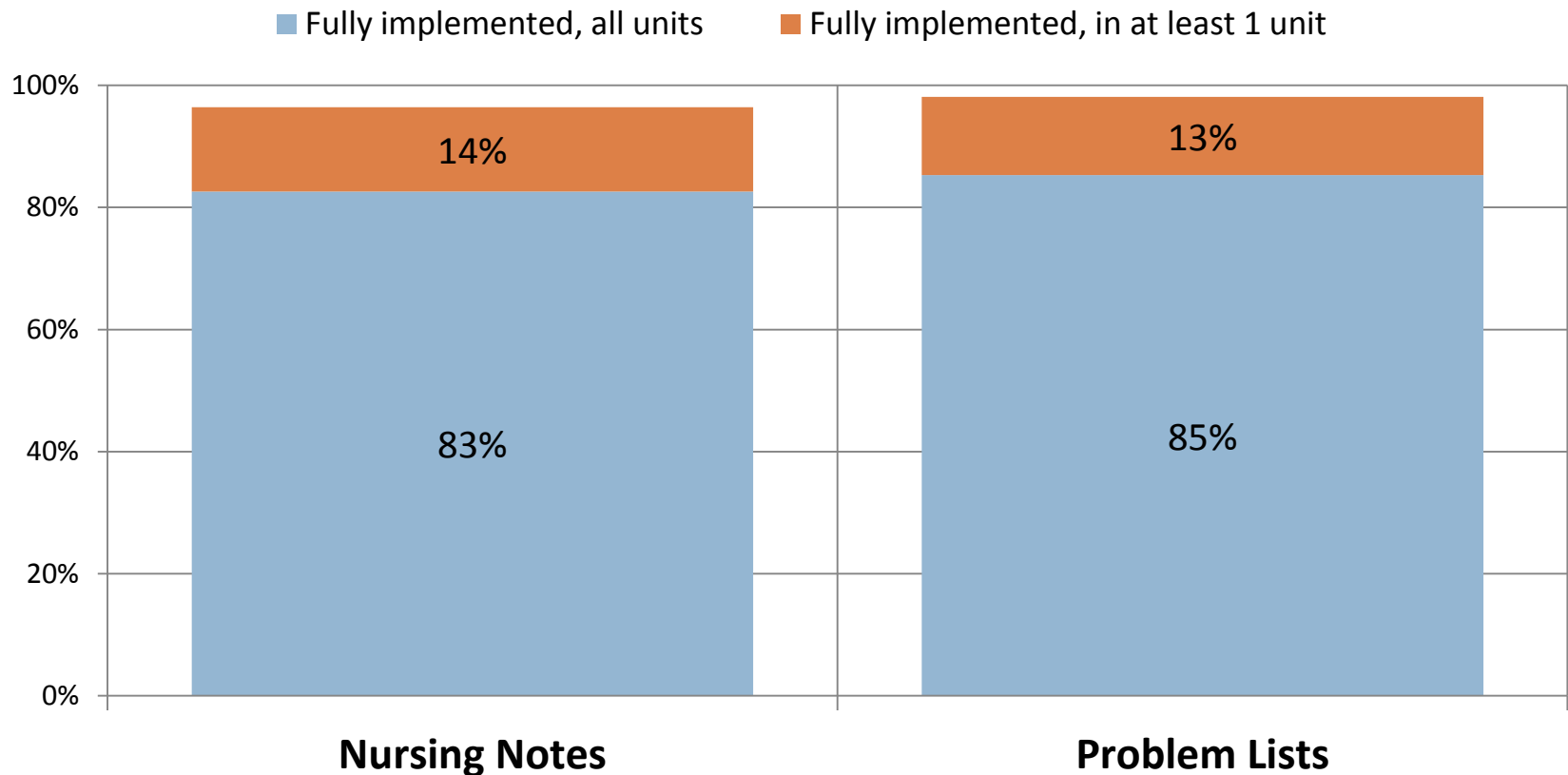
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- Hospitals and health systems across the state are continuing to advance their adoptions of information technology to support their providers with information sharing for high quality care delivery. Clinical quality reporting numbers increased in 2014.
- **The major changes in EHR vendors across the state signify the importance of interoperability, cost constraints, and increased attention to quality indicators.** Hospitals have learned the capabilities of EHRs in data sharing with providers and are moving forward or making major changes towards EHR's that will assist them in delivering high quality care to their communities.
- A transition from measuring quality of performance to delivering high quality performance is currently underway.
- Findings from this year's AHA HIT Survey demonstrate Pennsylvania hospitals' and health systems' commitment to progress in the implementation of health information technology across a broad range of functions.
- The complexity of health care systems and constantly changing certification and meaningful use requirements are forcing most hospitals to make major system changes very quickly. In 2013, seventeen percent (17%) of respondents indicated that they are changing vendors in the next 18 months. In 2014, that number more than doubled to thirty-five percent (35%) of respondents.

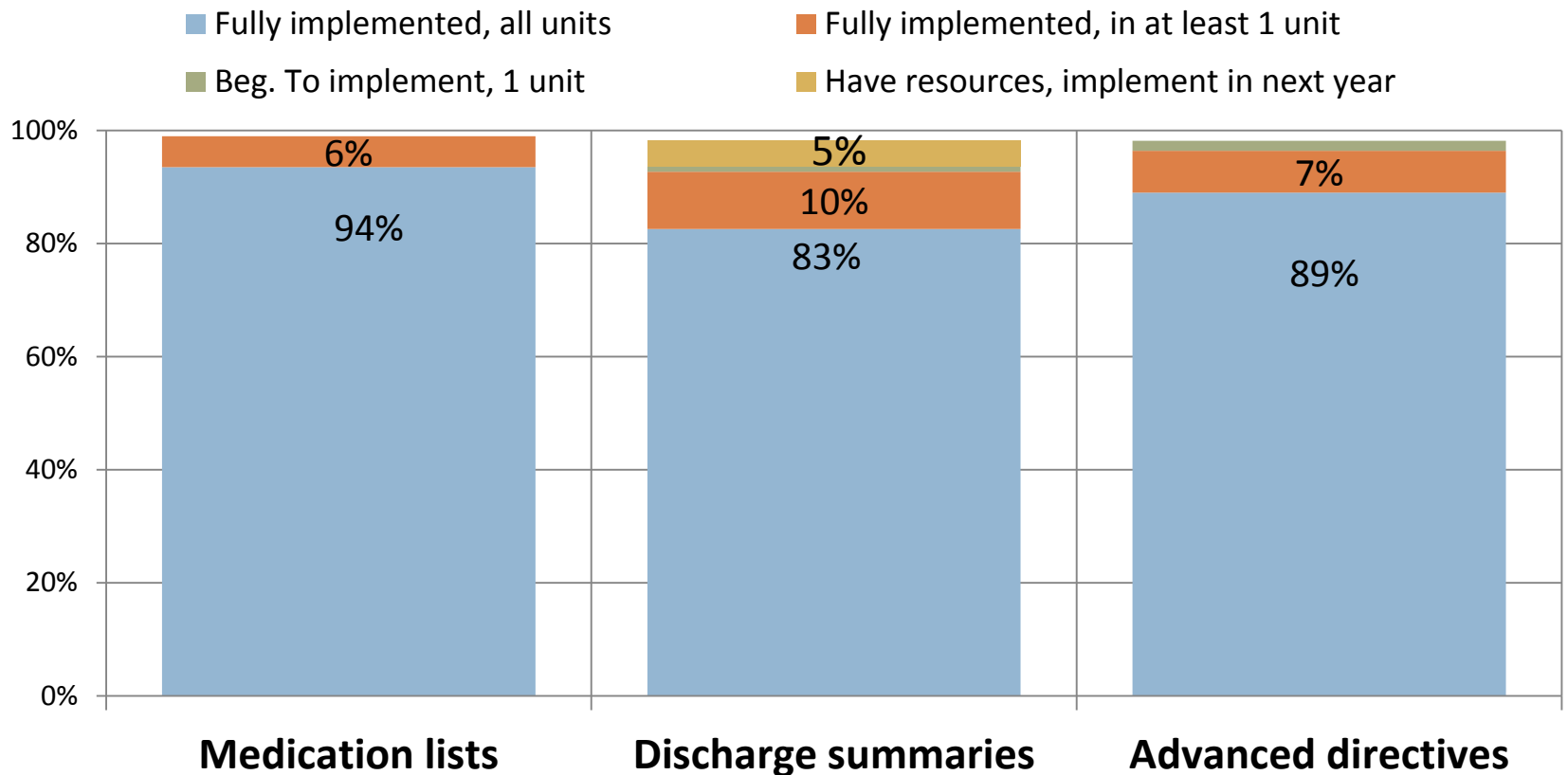
# Computerized Systems for Electronic Clinical Documentation



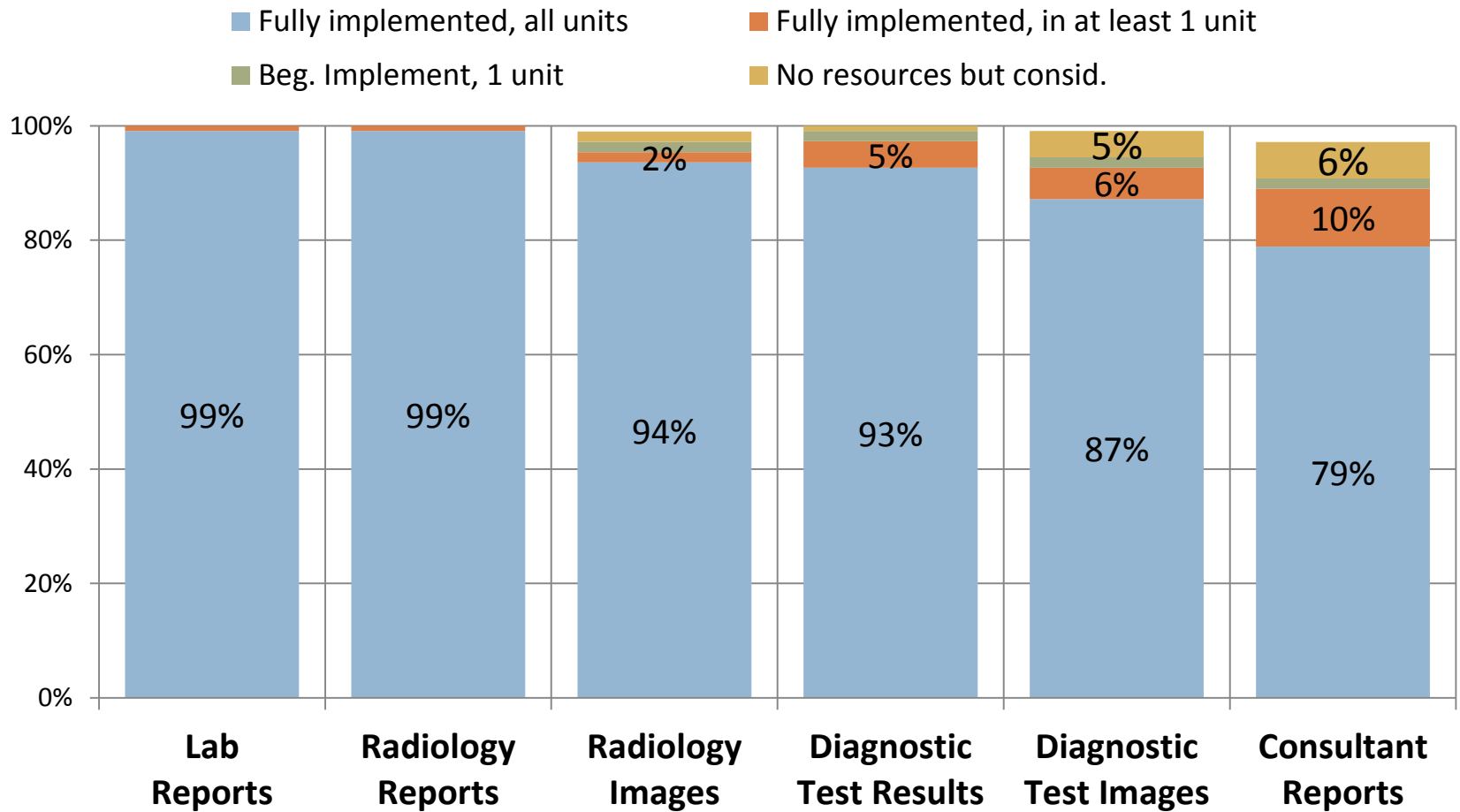
# Computerized Systems for Electronic Clinical Documentation



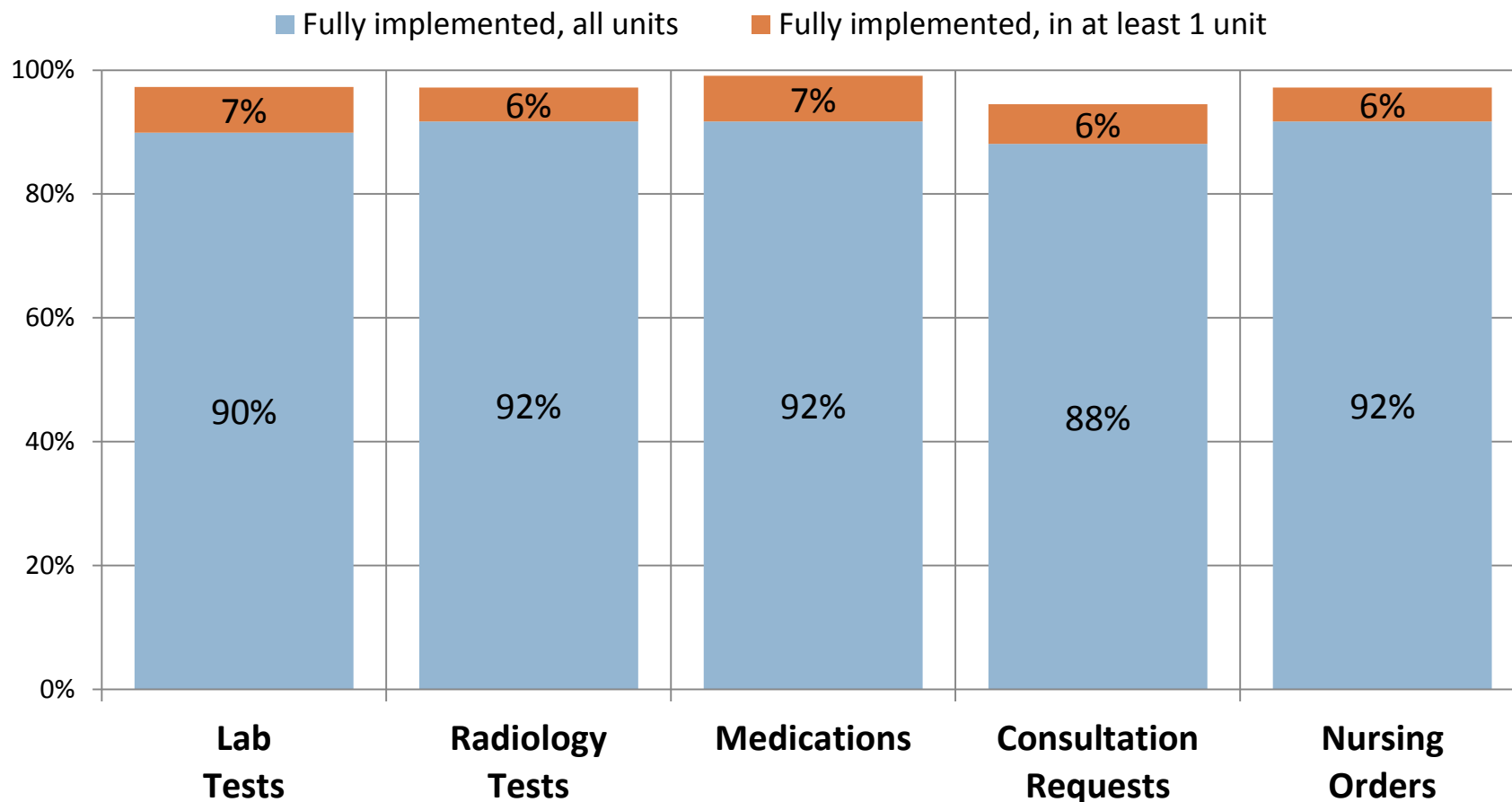
# Computerized Systems for Electronic Clinical Documentation



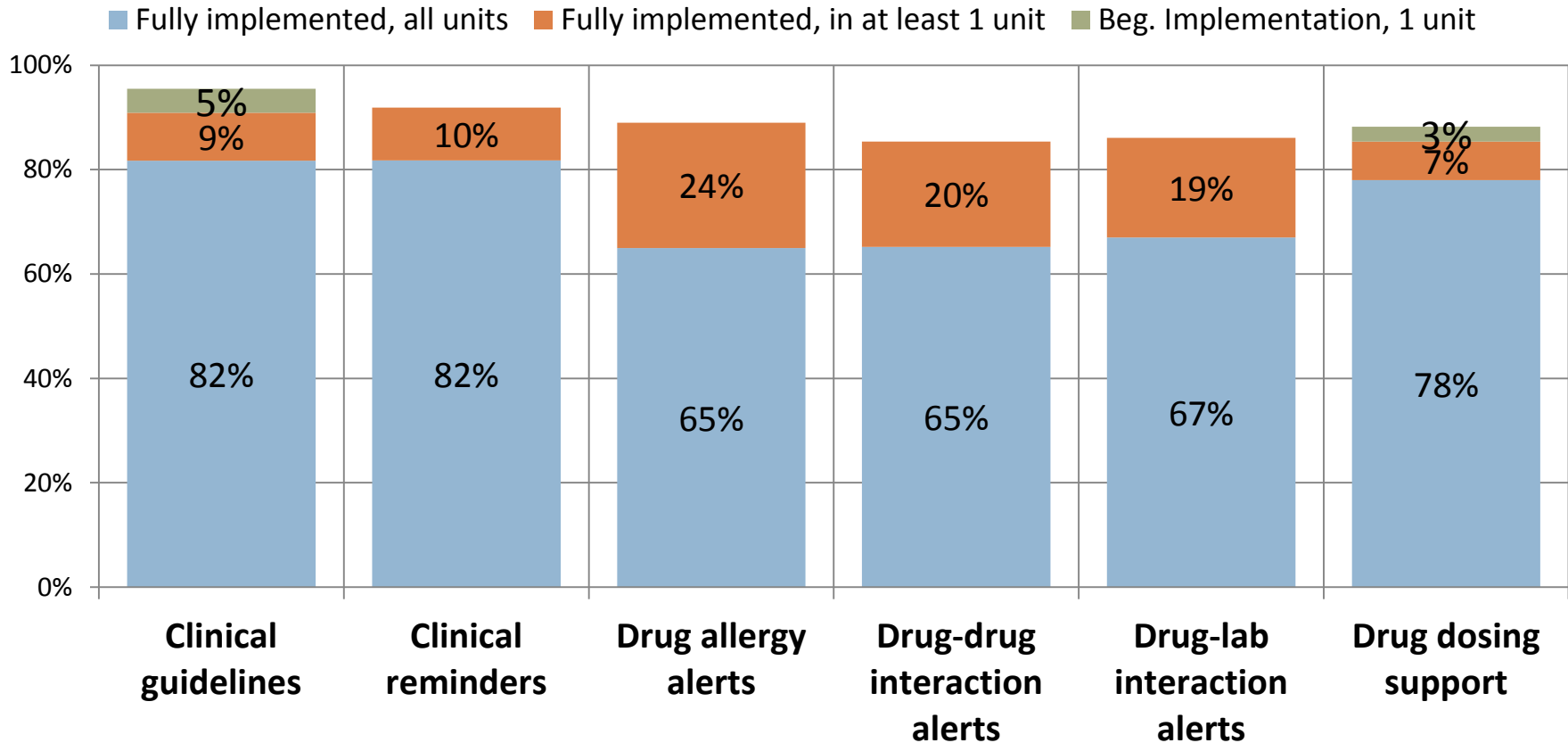
# Computerized Systems for Results Viewing



# Computerized System for Provider Order Entry (CPOE)

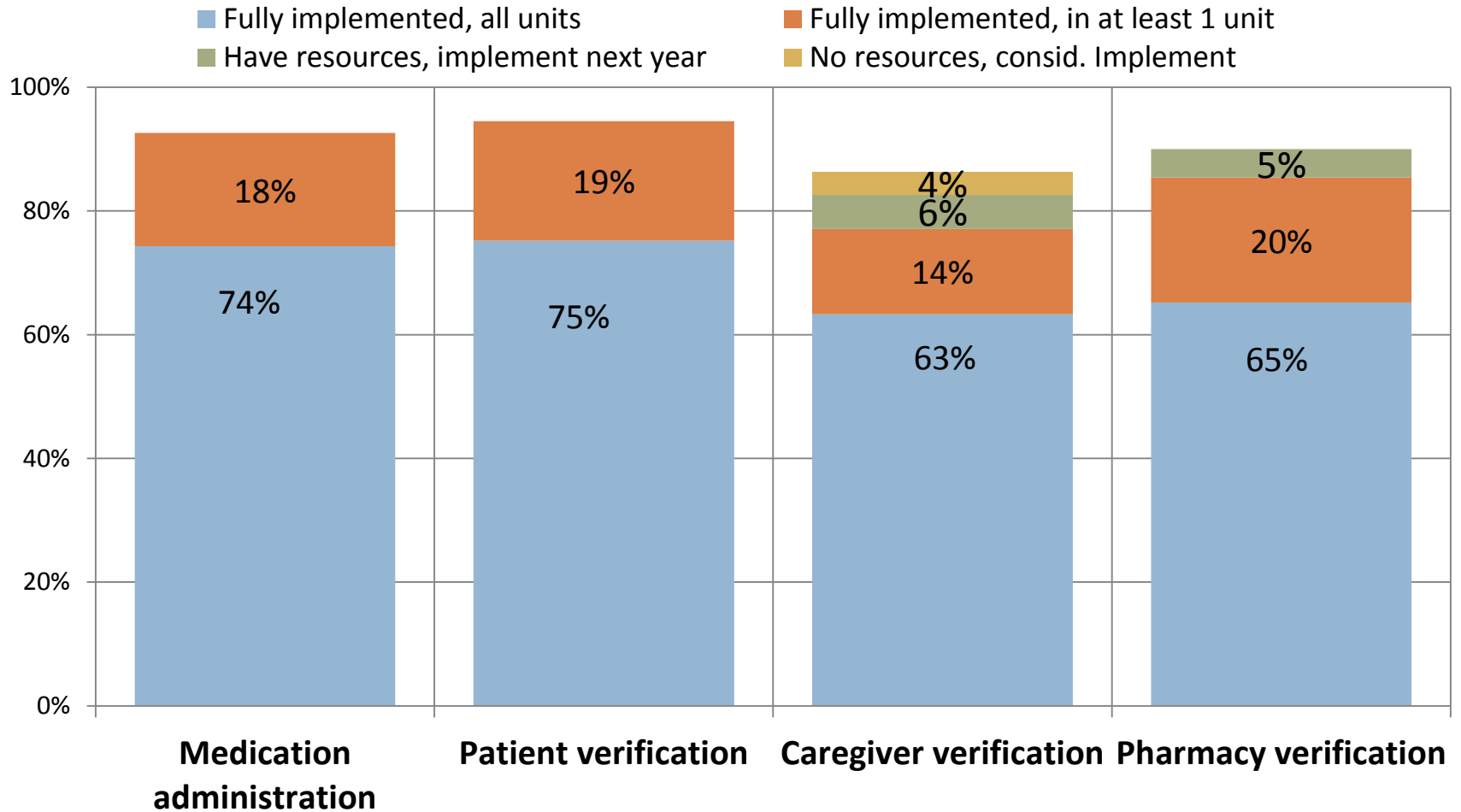


# Computer Systems for Decision Support

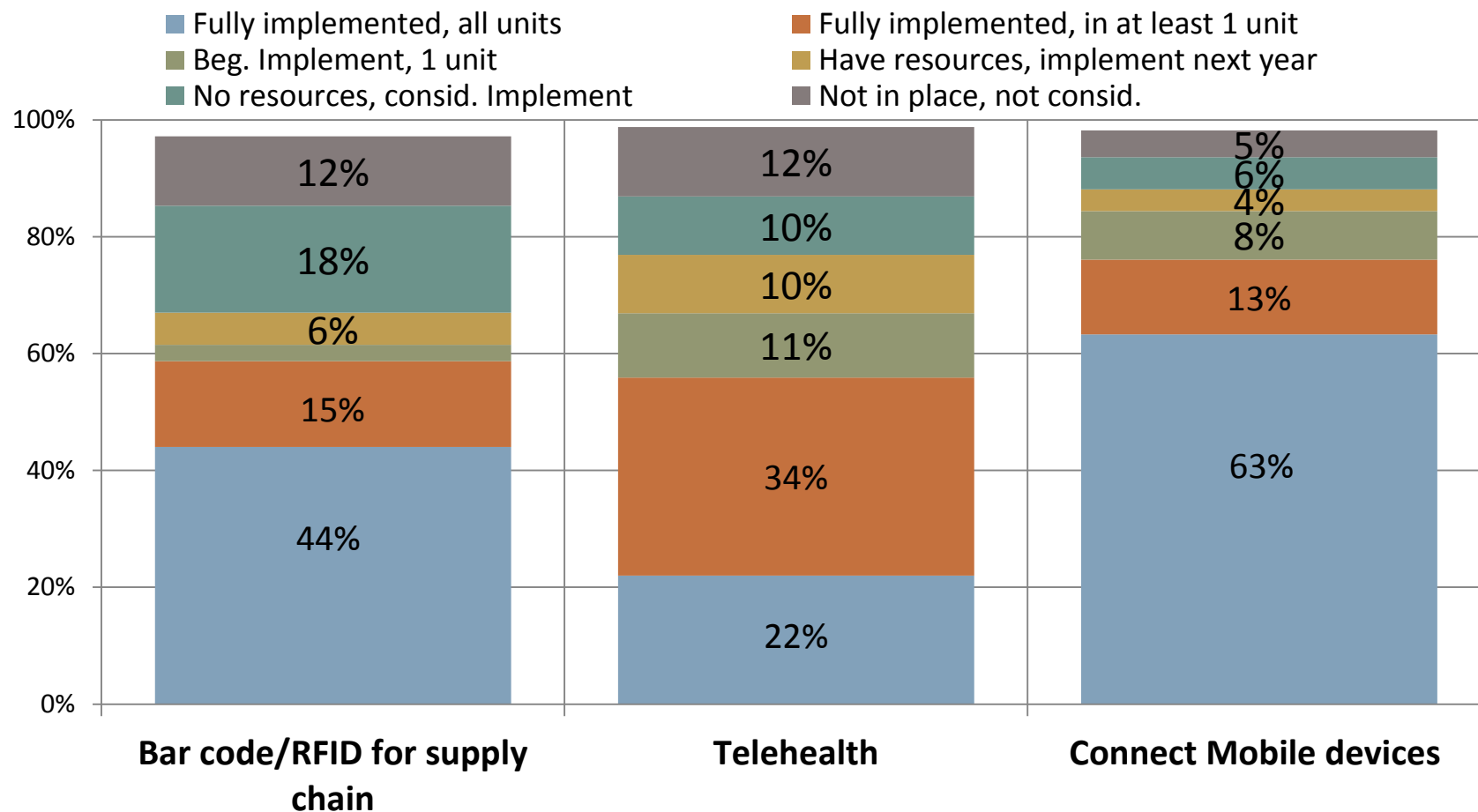




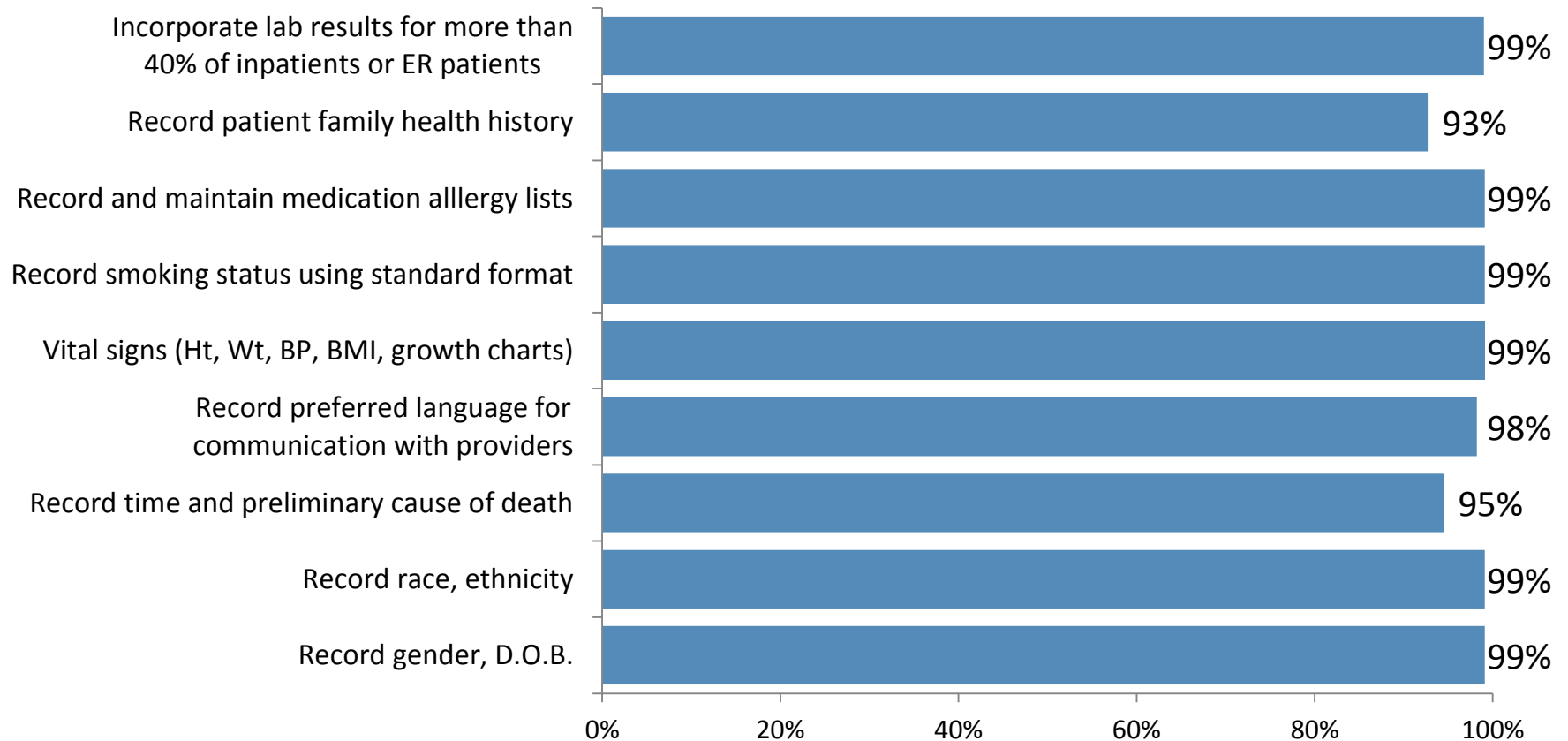
# Computerized System for Barcoding or RFID



# Computerized System for Other Functionalities

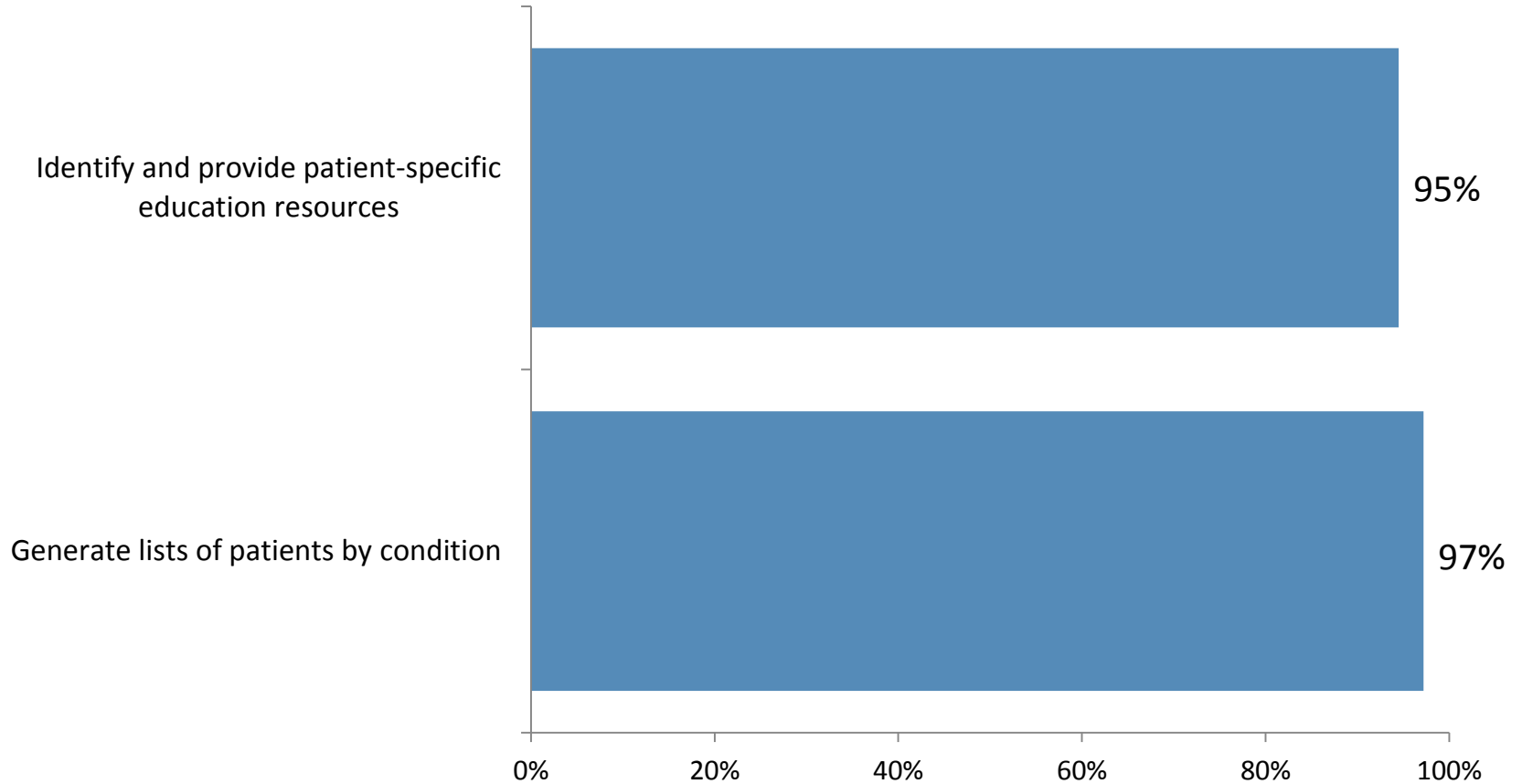


# Respondents with electronic systems that allow the following: Electronic Clinical Documentation

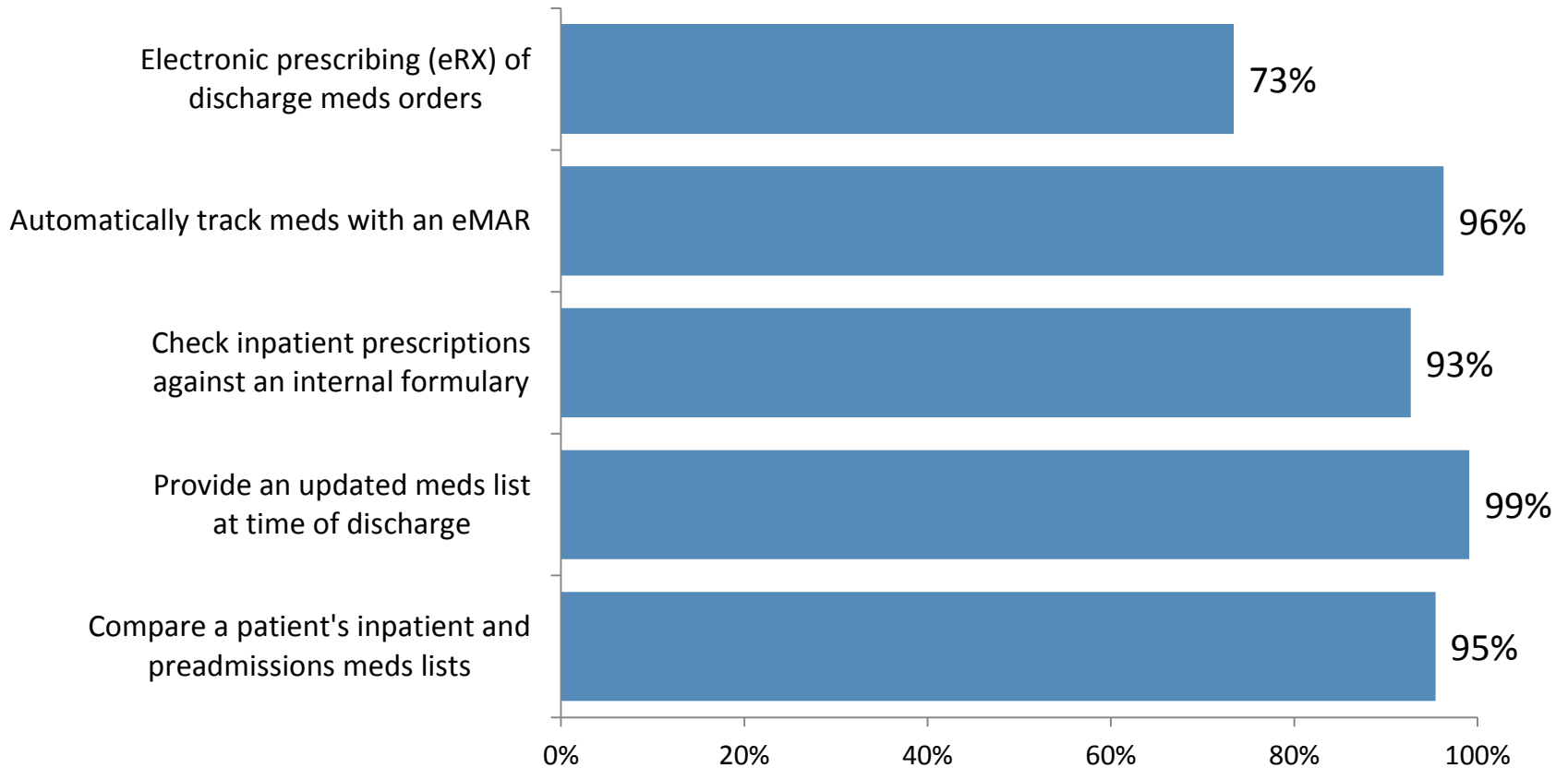


# Respondents with electronic systems that allow the following: Population Health Management

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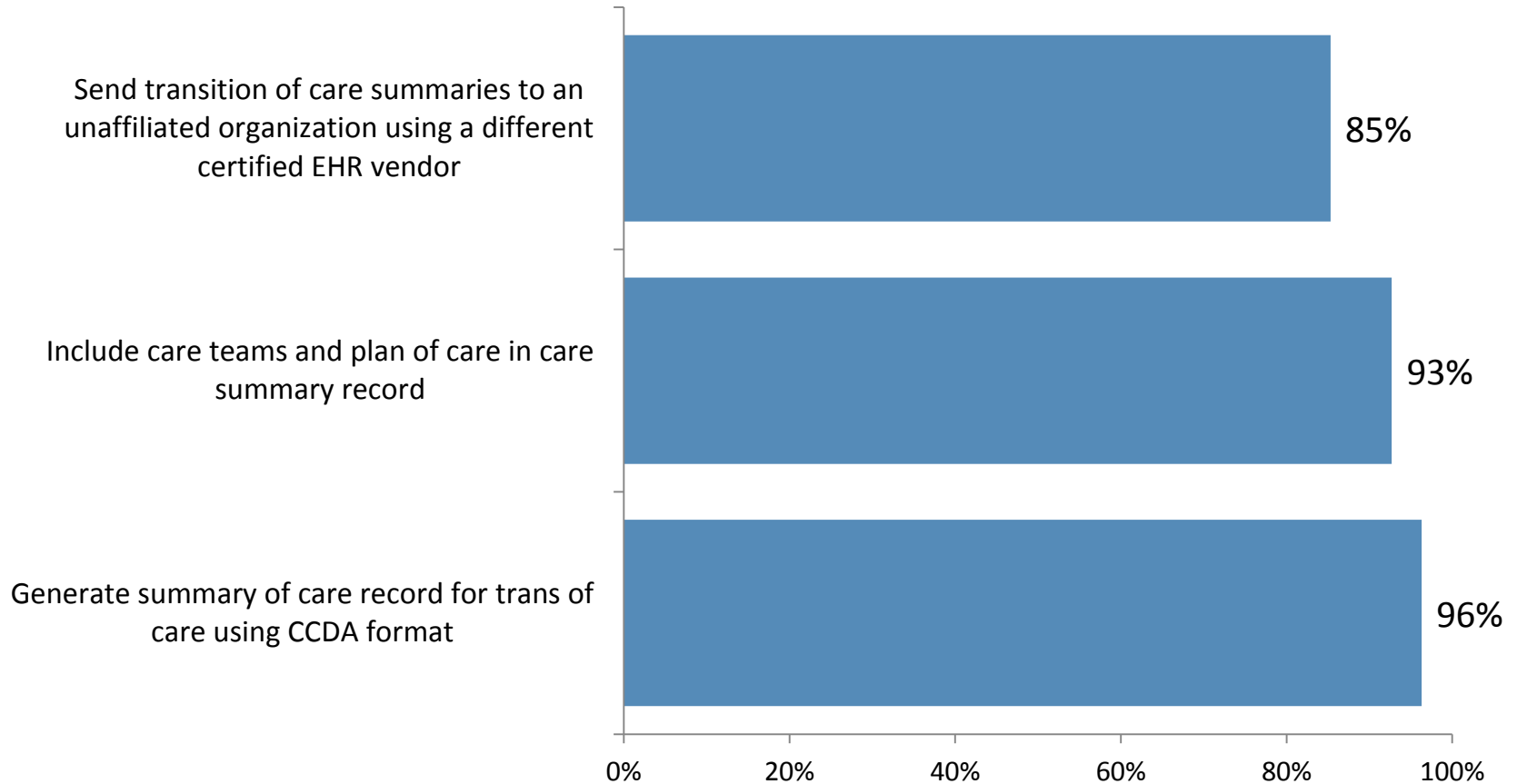


# Respondents with electronic systems that allow the following: Medication Management

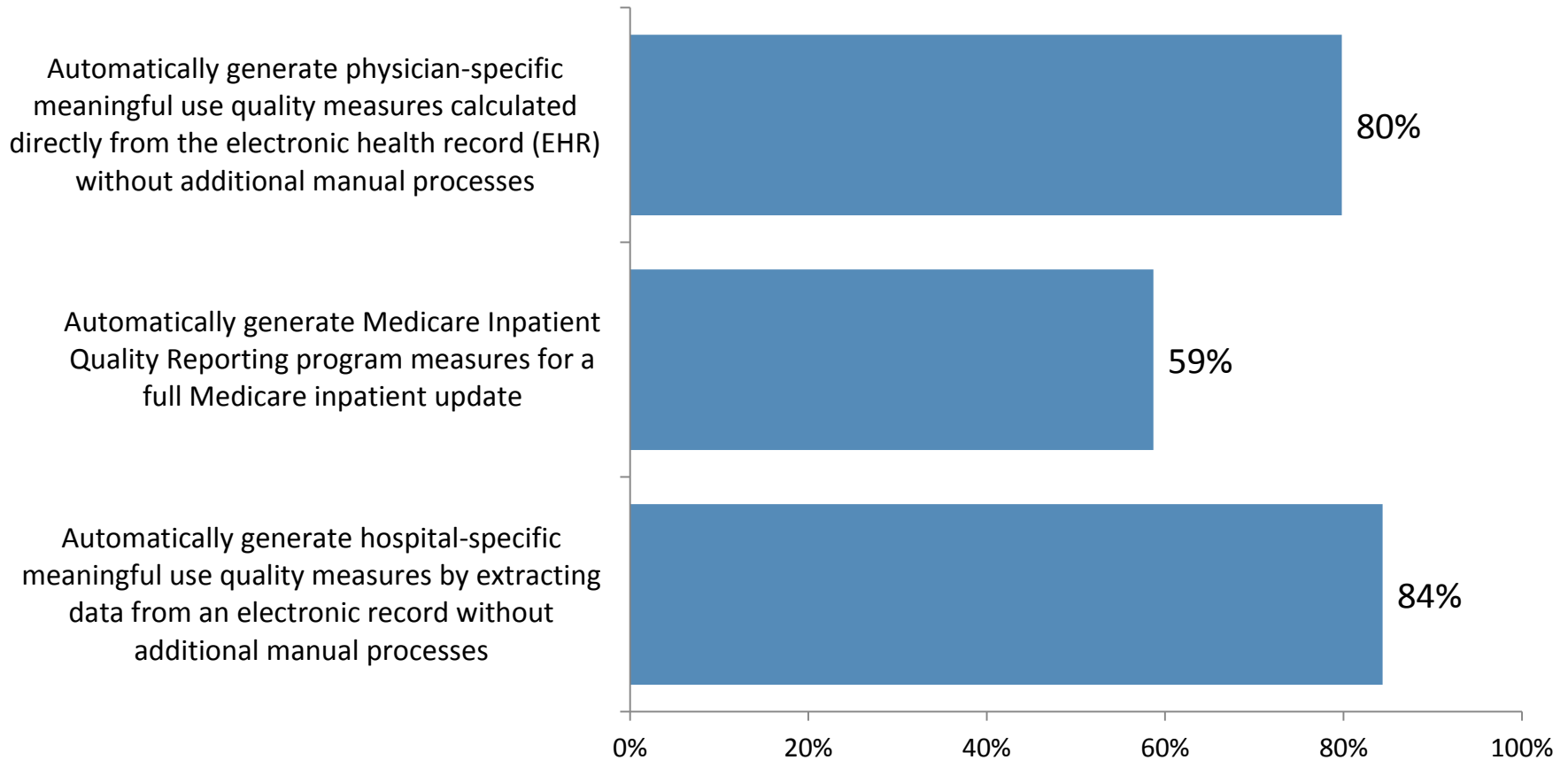


# Respondents with electronic systems that allow the following: Care Summary Documents

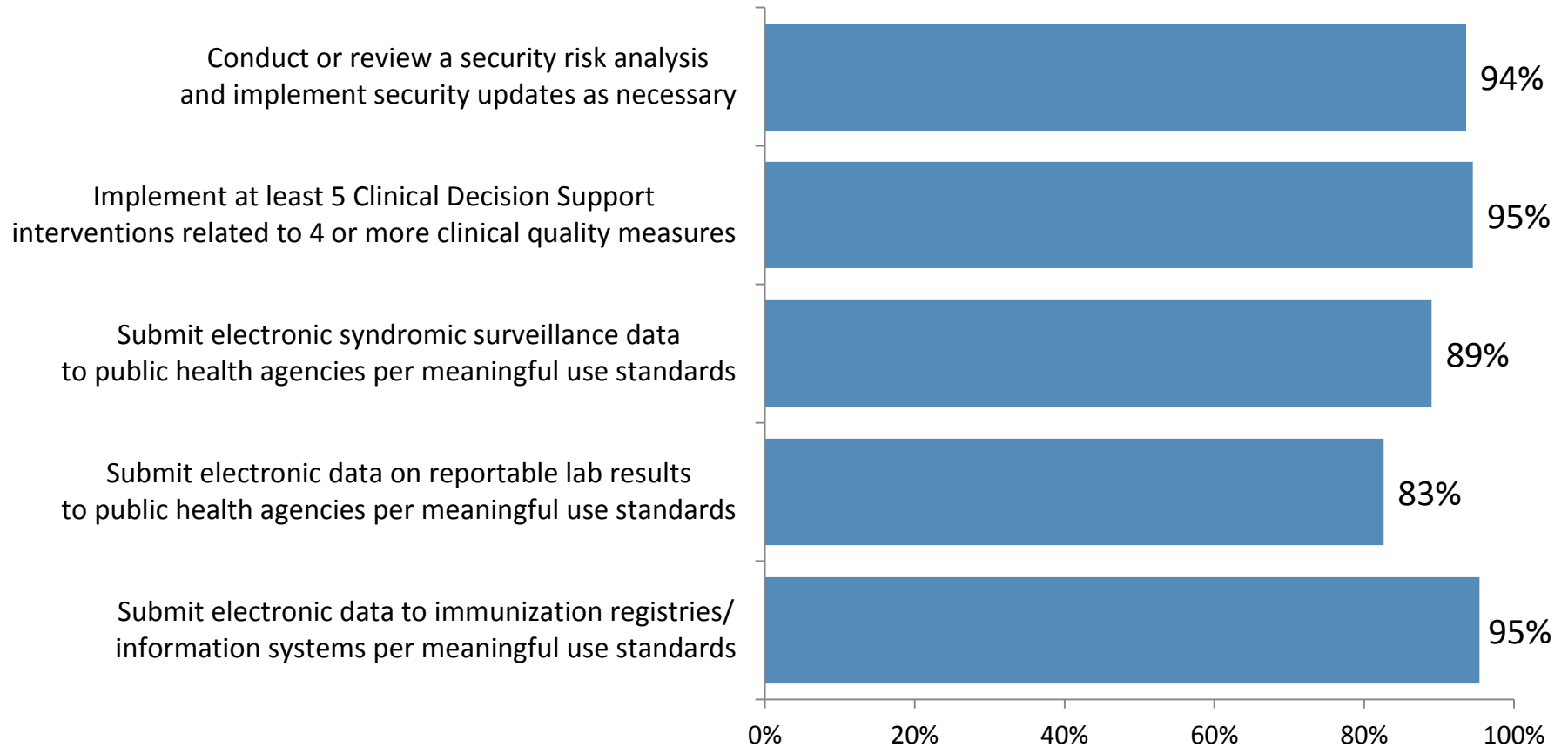
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# Respondents with electronic systems that allow the following: Automated Quality Reporting



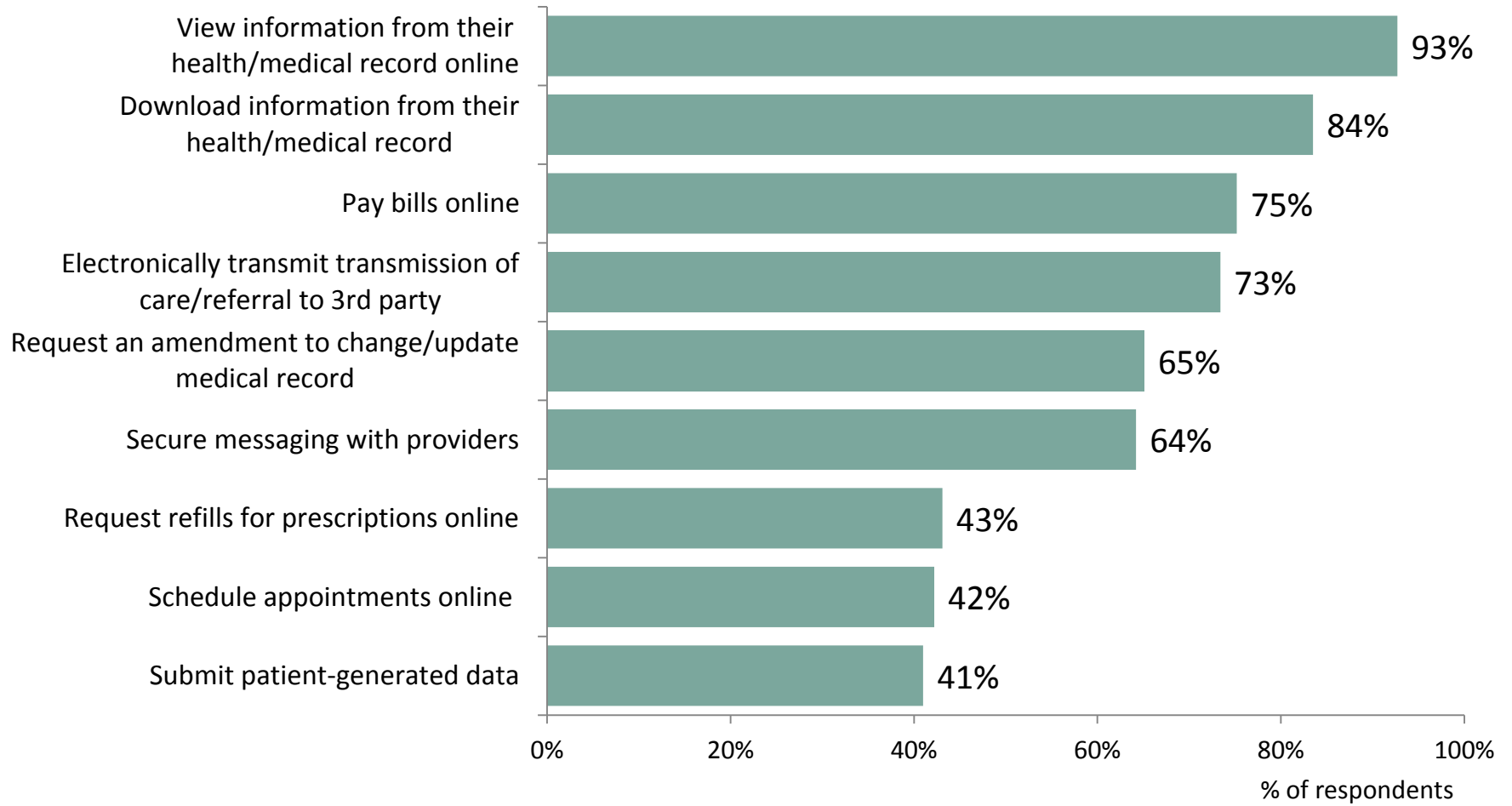
# Respondents with electronic systems that allow the following: Public Health Reporting & Other Functions



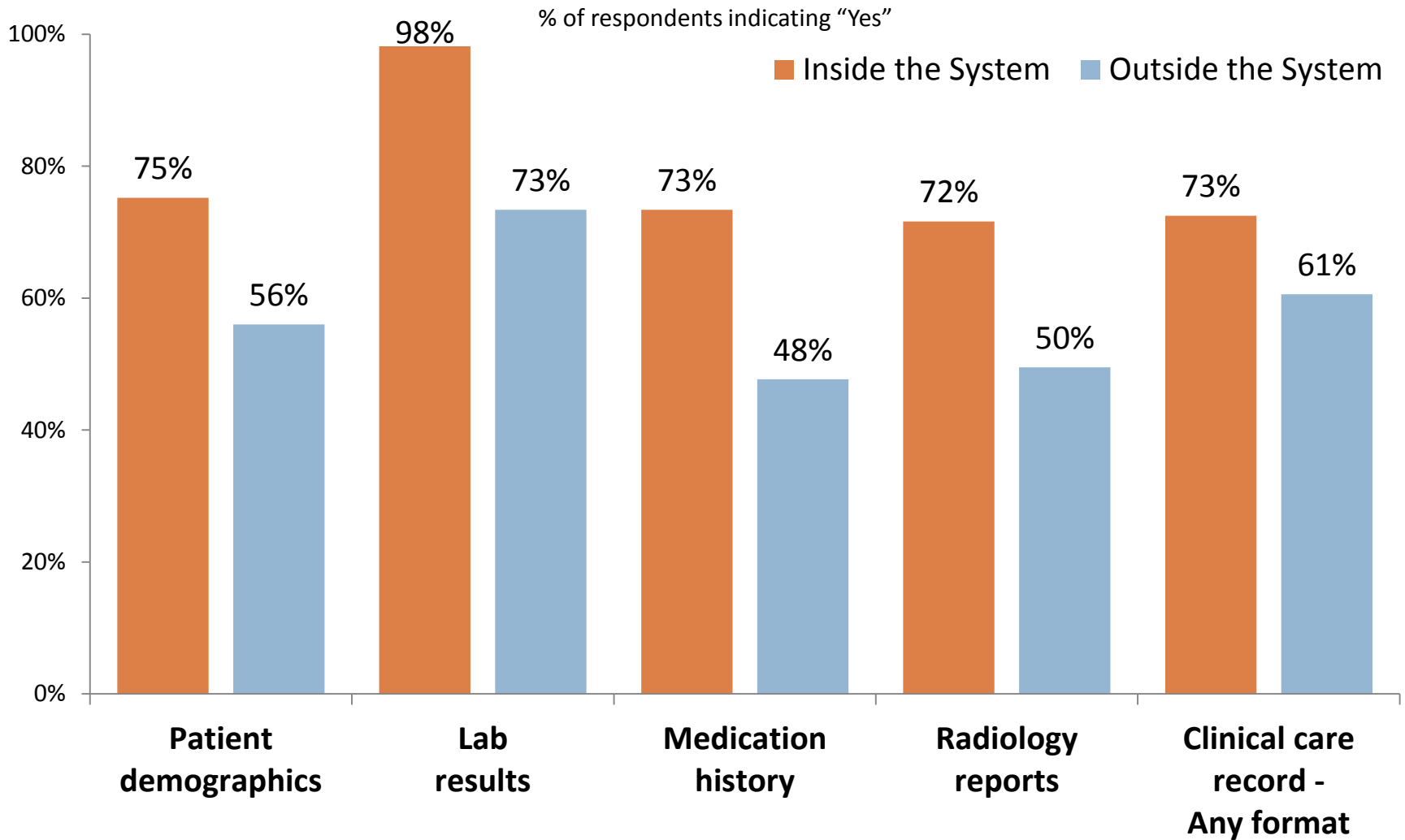


# Patient Engagement Functions

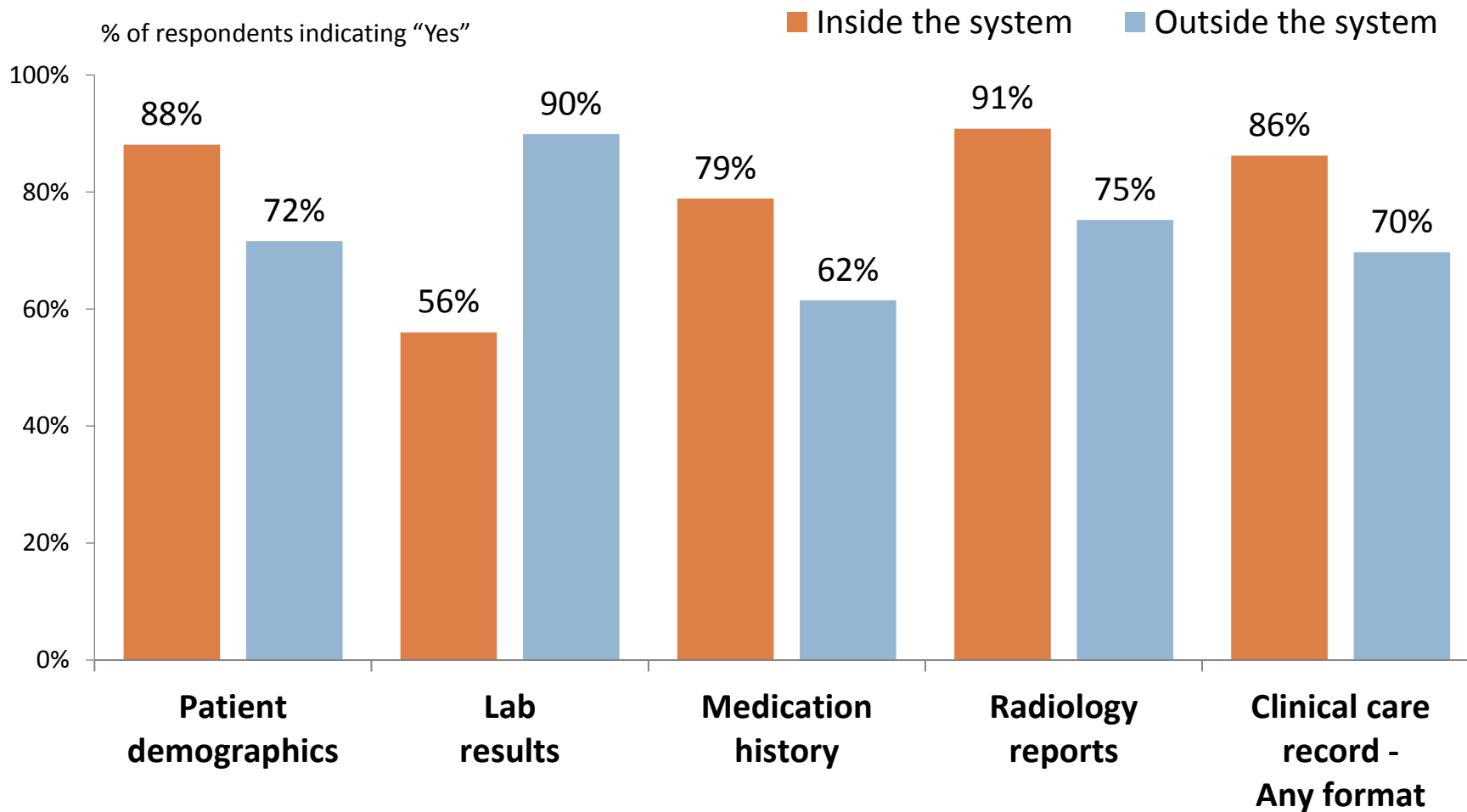
Are patients able to do any of the following regarding their medical records?



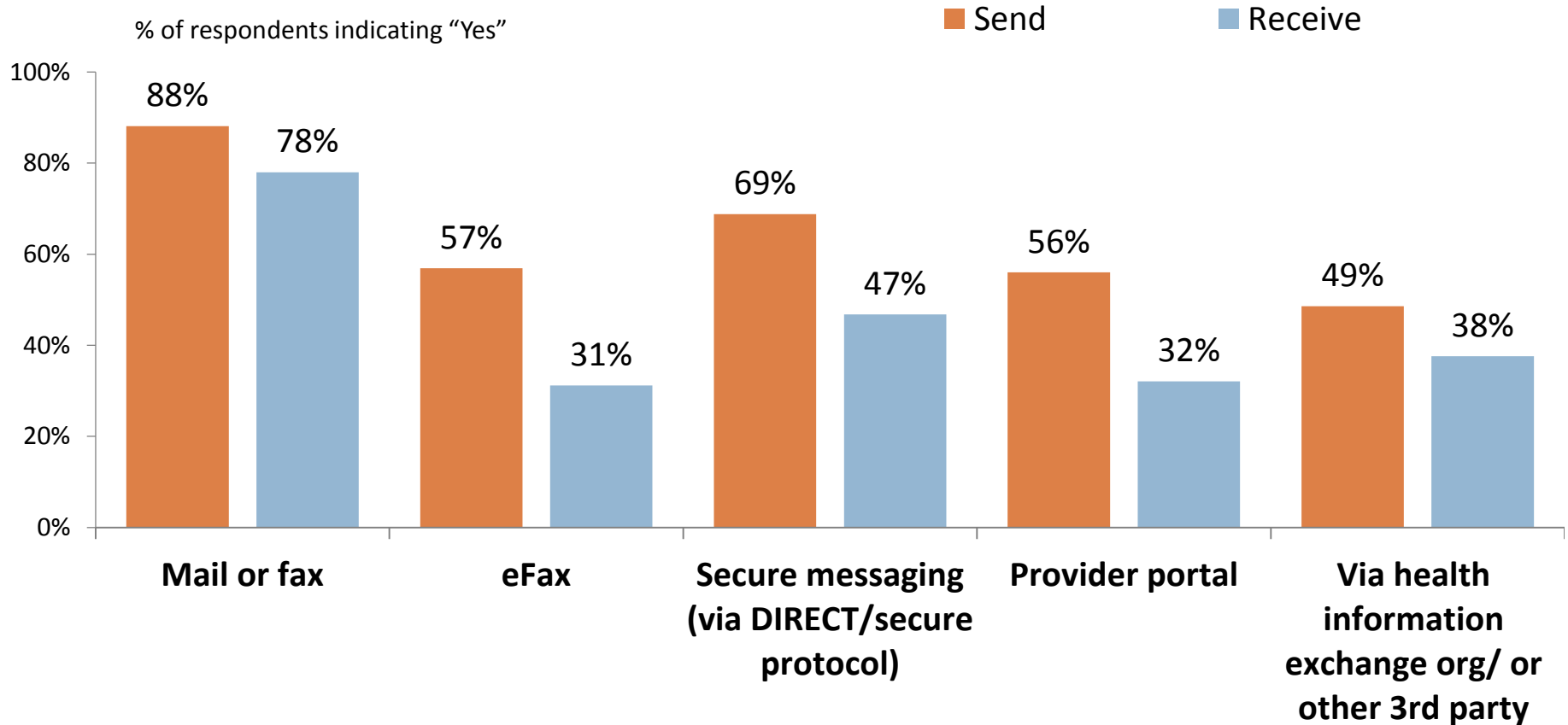
# Electronic Data Exchange with Hospitals (Check all that apply)



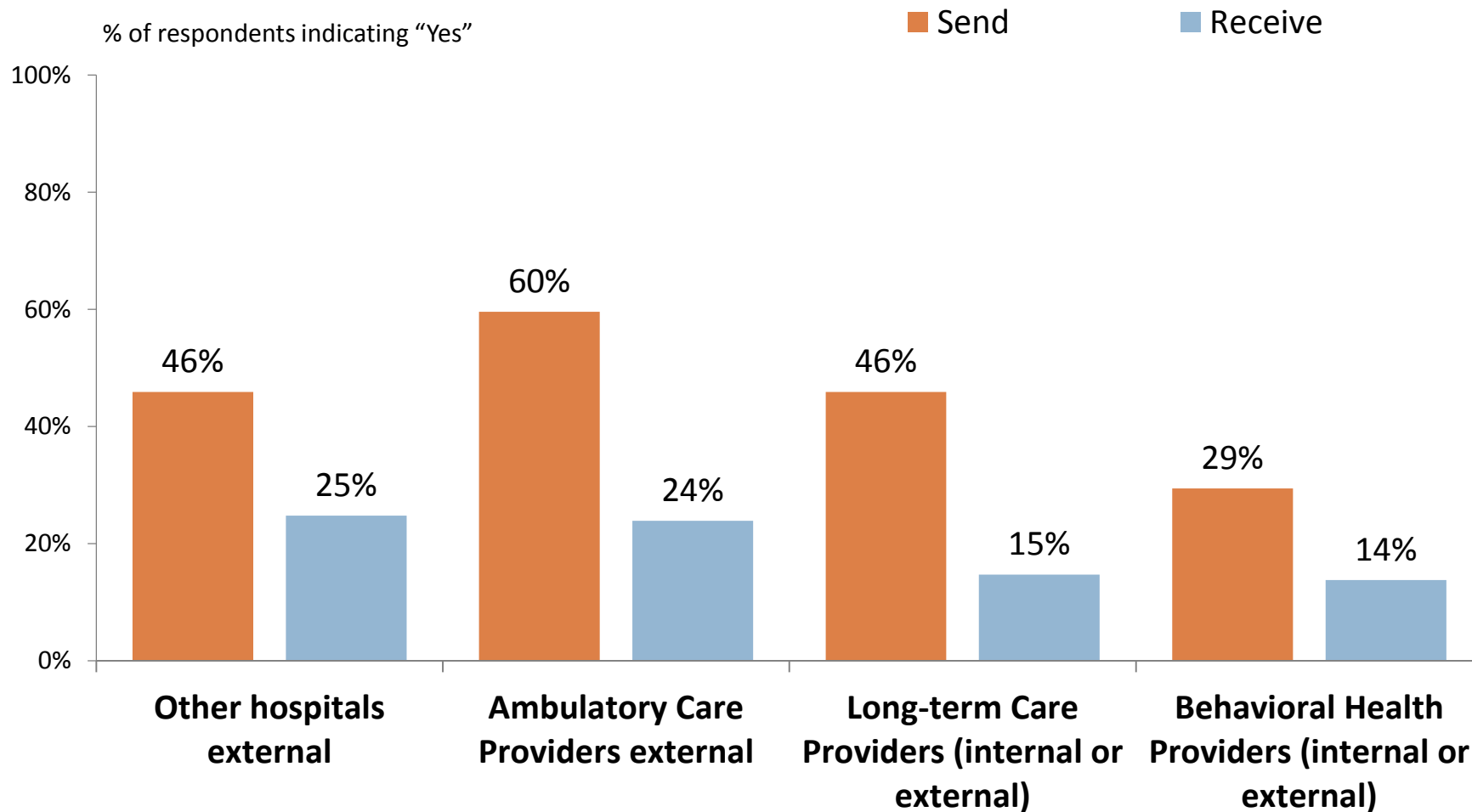
# Electronic Data Exchange with Ambulatory Providers (Check all that apply)



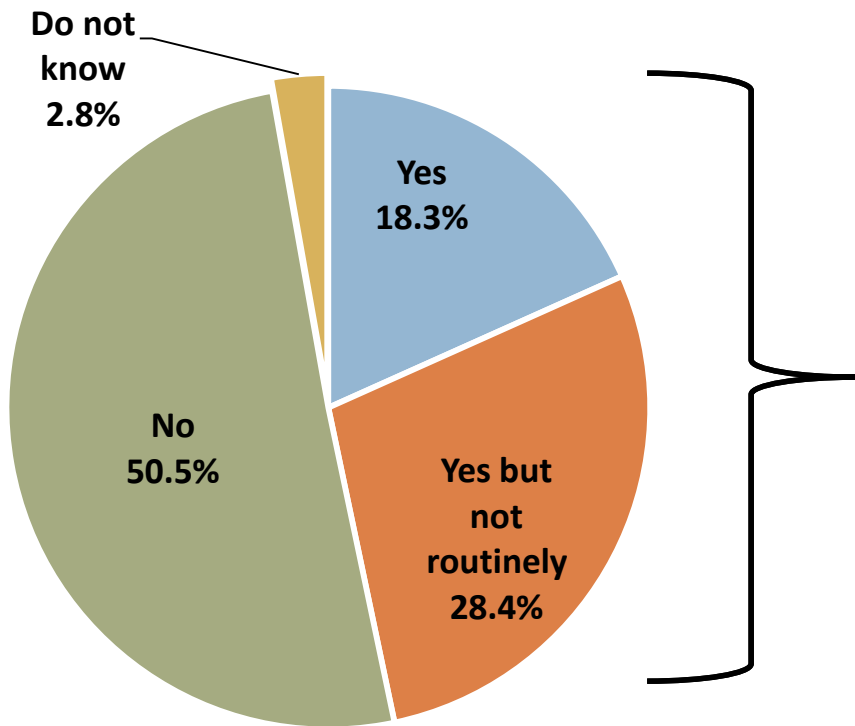
# With Patient transitions, how do you routinely send/receive summary of care record? (Check all that apply)



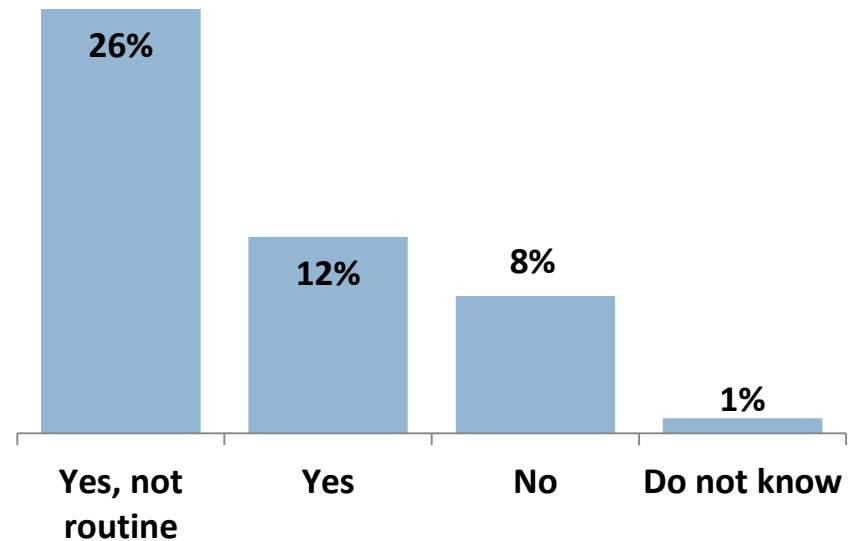
# When a patient transitions, does hospital routinely electronically send/receive (no eFax) summary of care with providers? (Check all that apply)



# Does EHR integrate any type of clinical information received electronically (not eFax) from providers or sources outside your hospital system/org without the need for manual entry?

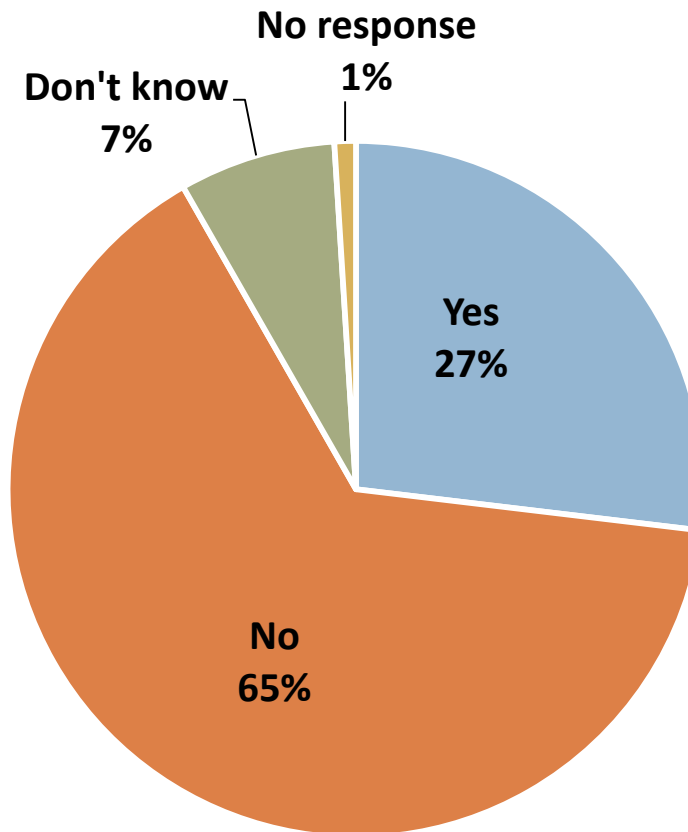


## 8. If yes, does EHR integrate info contained in summary of care records w/out manual entry?



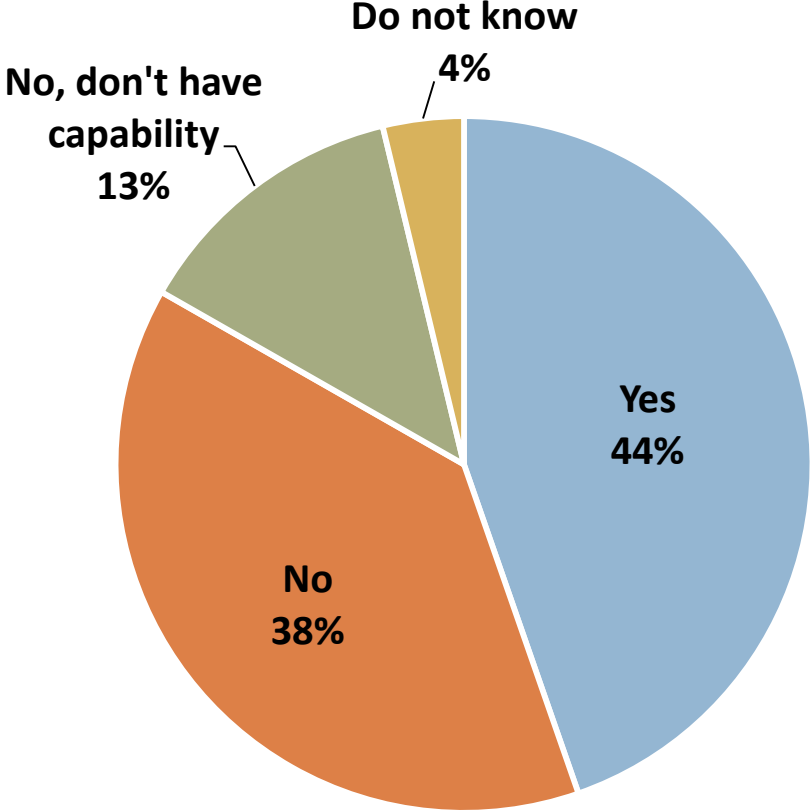
# Do providers at your hospital routinely have necessary clinical information available electronically from outside providers or sources when treating a patient that was seen by another health provider/setting?

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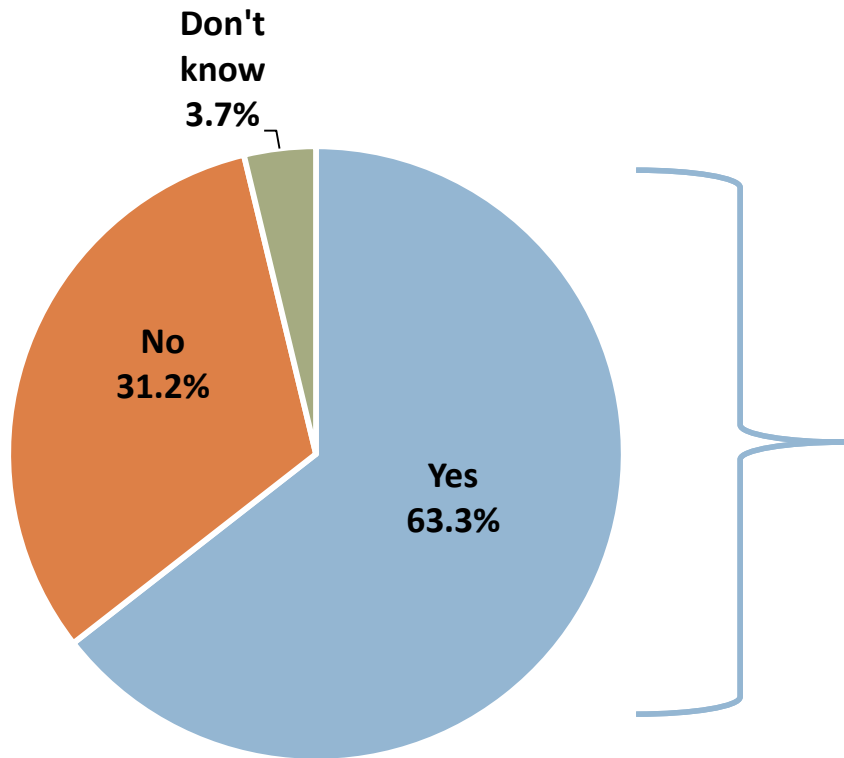
# Are providers at your hospital able to query electronically for a patient's health information from sources outside of your organization or system?

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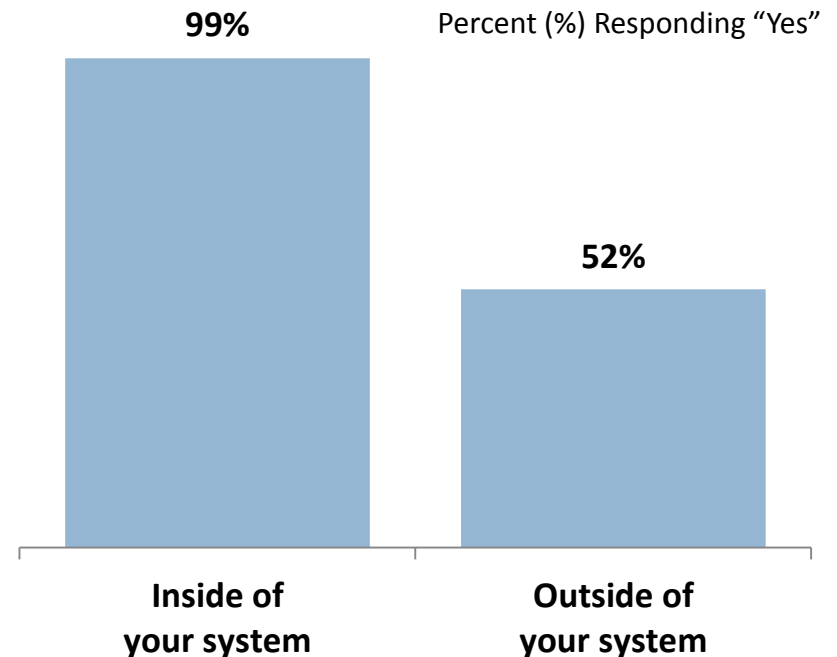




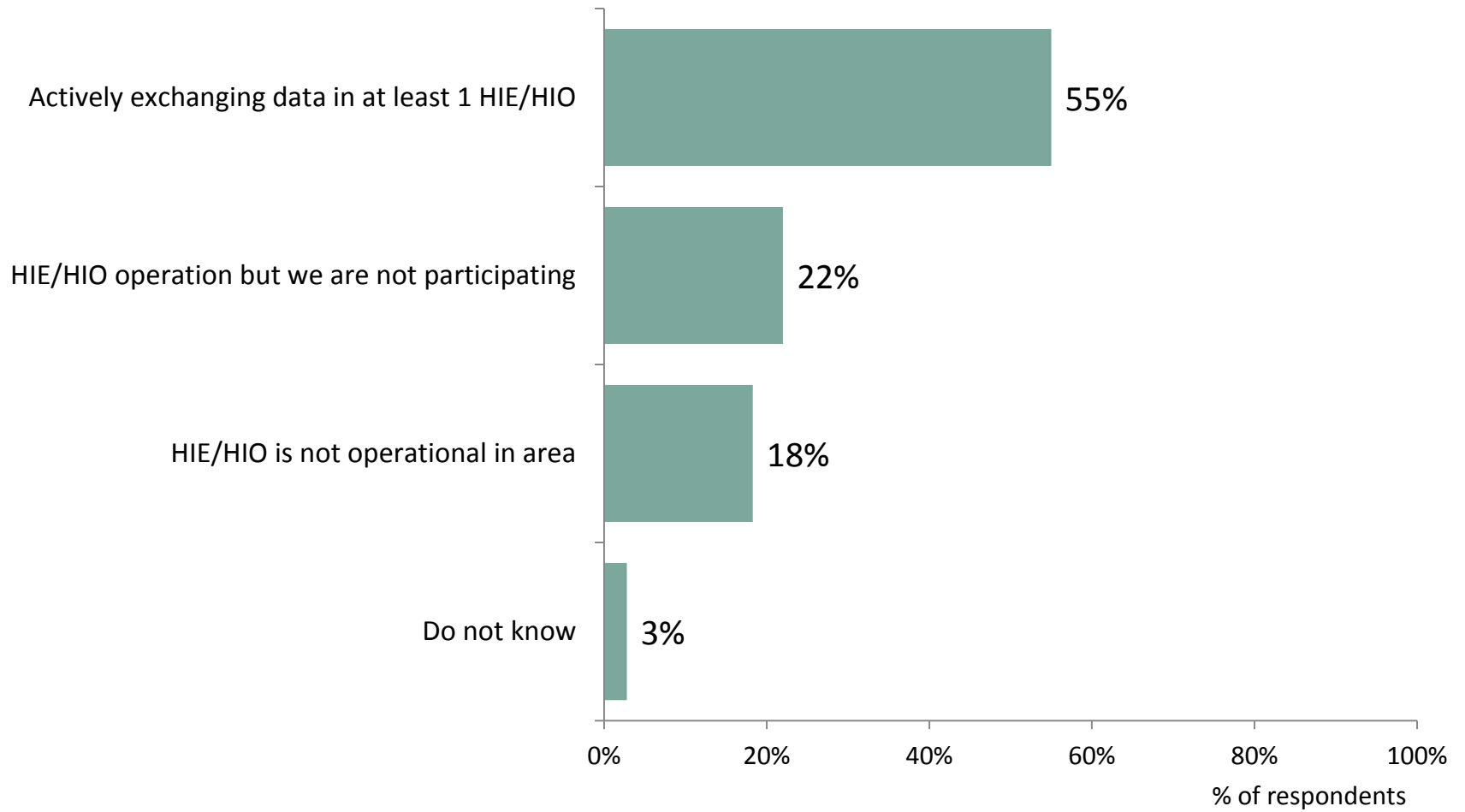
# When a patient visits your Emergency Department, do you routinely provide electronic notification to the patient's primary care physician?



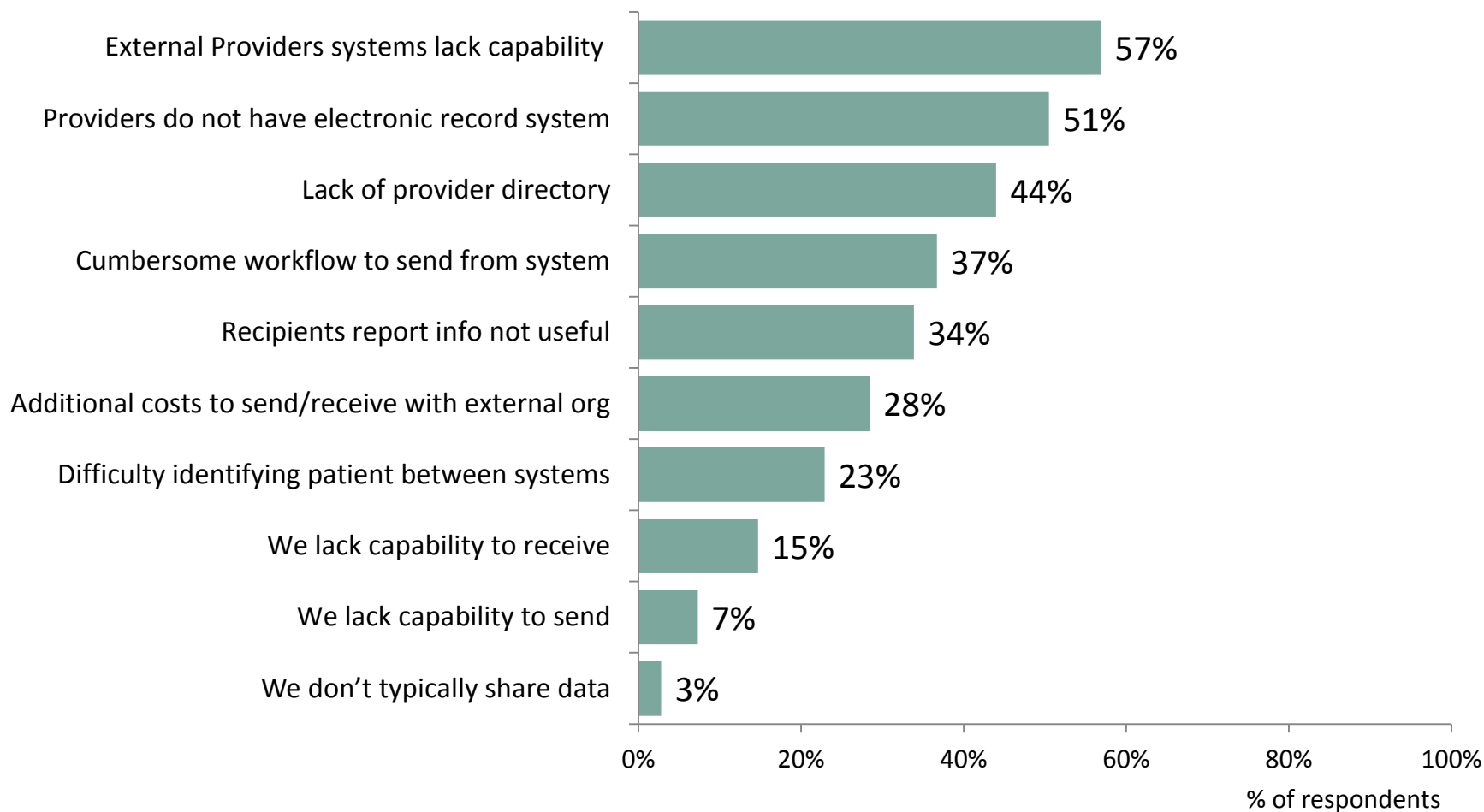
10b. If YES, are electronic notifications provided to primary care physicians, as follows? (Check all that apply)



# What is your level of participation with HIE's or HIO's?

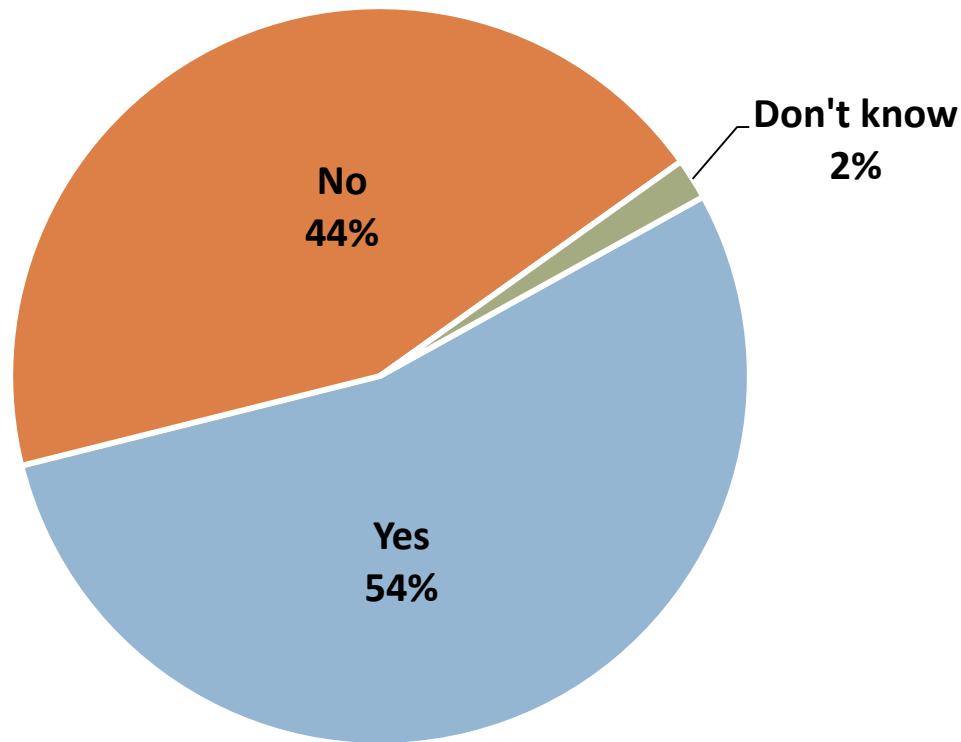


# What issues are being experienced sending/receiving patient health info to/from organizations? (Check all that apply)



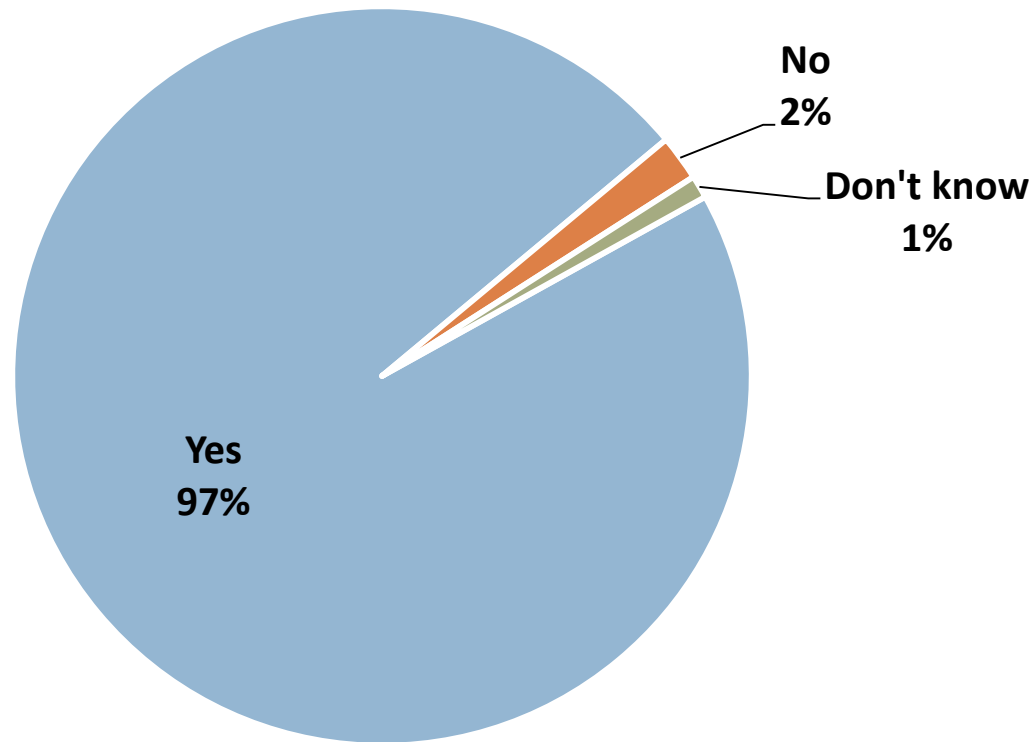
# Does your IT department currently support an infrastructure for two factor authentication (e.g., tokens or biometrics)?

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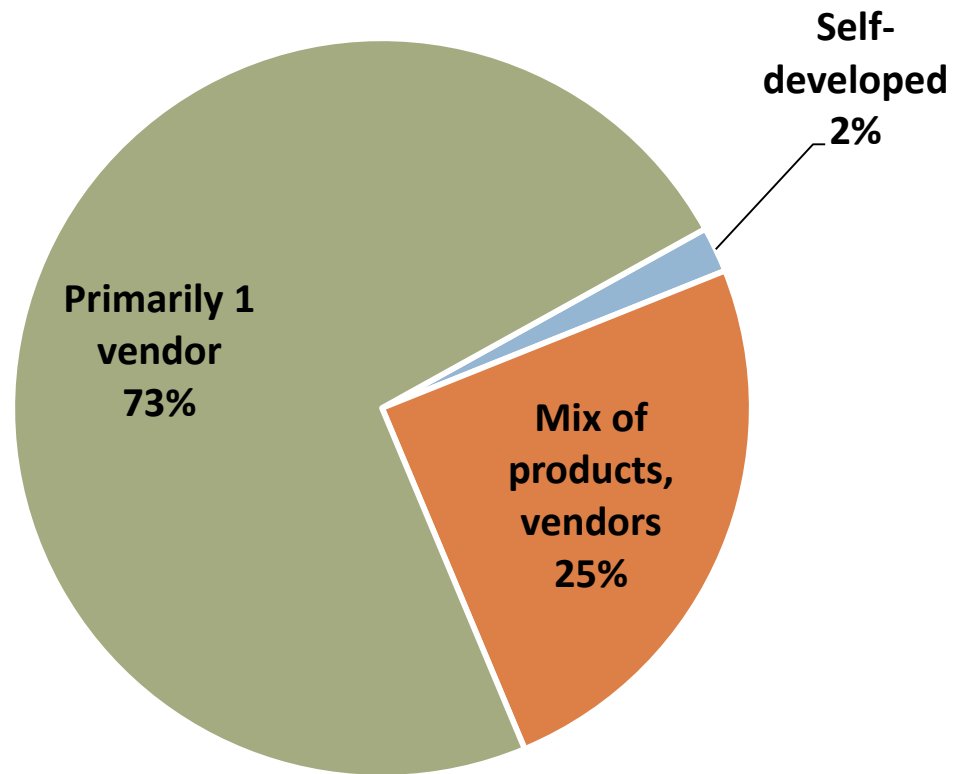
# Do you possess an EHR system that has been certified as meeting federal requirements for the hospital objectives of Meaningful Use?

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# On the whole, how would you describe your EMR/EHR system?

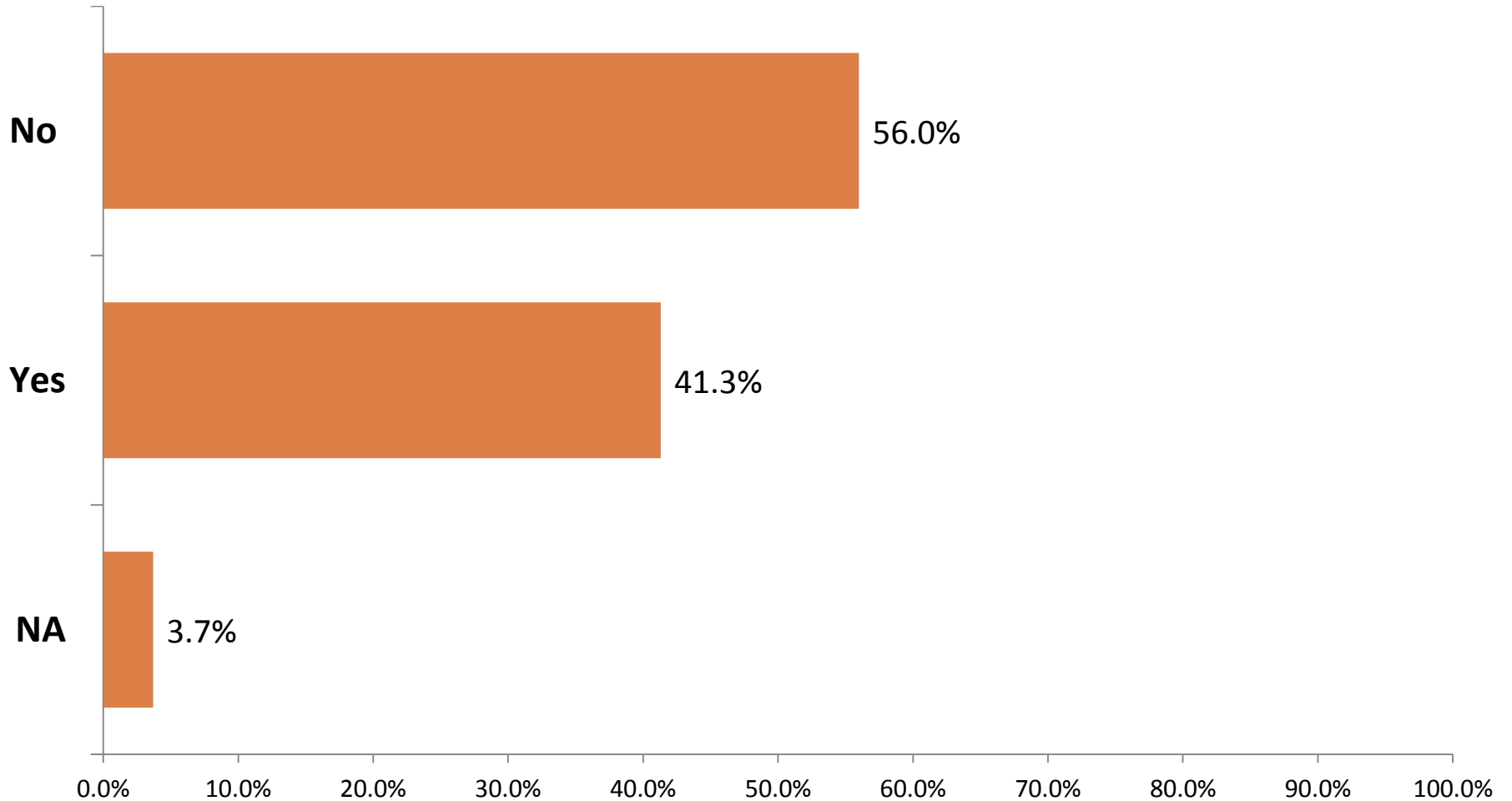
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# Primary Inpatient EMR/EHR System to Pennsylvania Hospitals

Top Vendors – Inpatient Systems		
1	HMS	22.0%
2	Epic	21.1%
3	NextGen	17.4%
4	Cerner	10.1%
5	Siemens	8.3%
6	Allscripts/Eclipsys	6.4%
7	Meditech	3.7%
8	CPSI	2.8%
9	GE	1.8%
9	eClinicalWorks	1.8%
9	Vitera/Greenway	1.8%
10	McKesson	0.9%
10	Self-Developed	0.9%

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





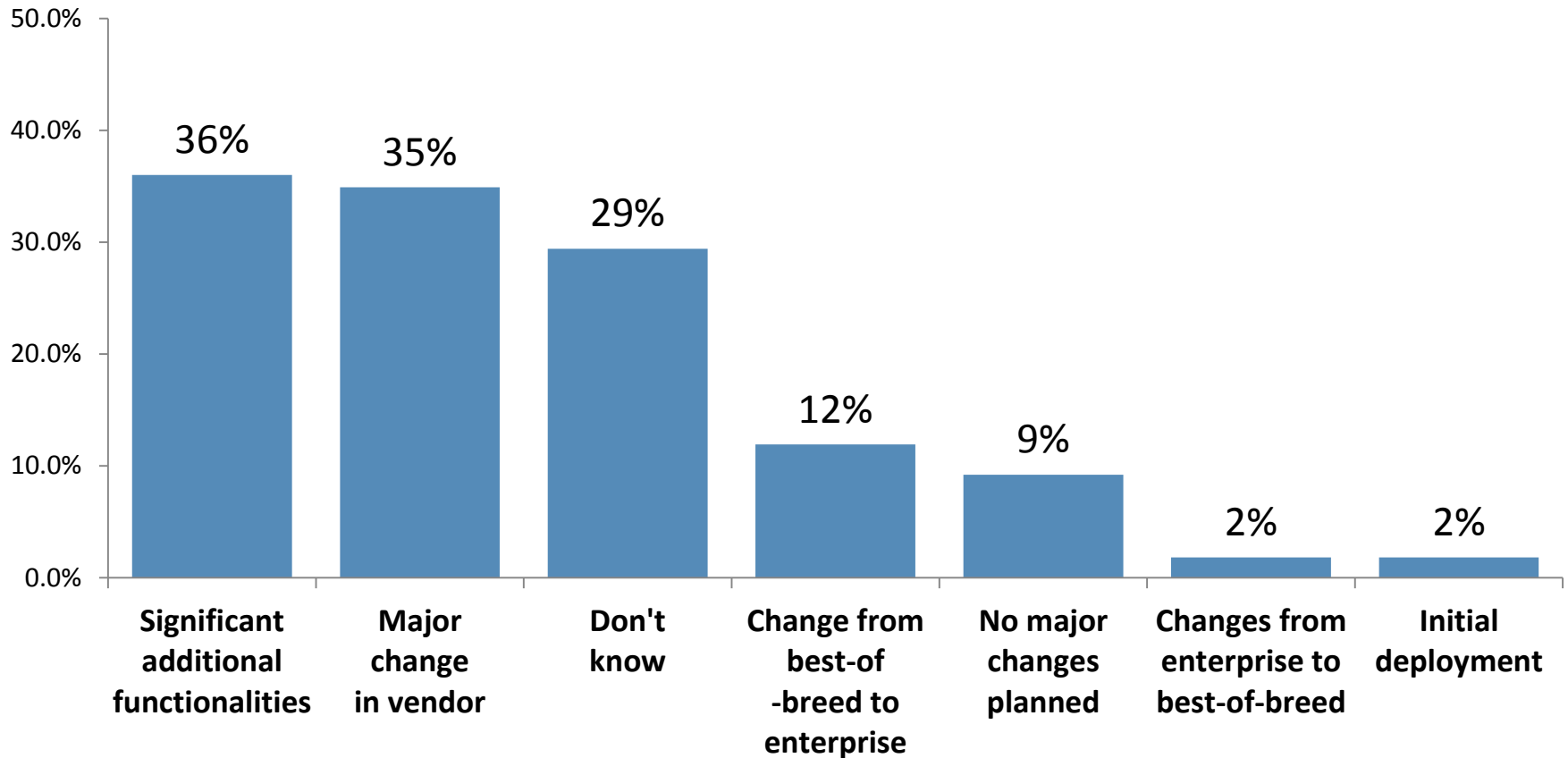
# Vendor systems used to exchange patient health information

Top Vendors – OUTPATIENT Systems		
1	My primary Inpatient EMR	45.0%
2	Surescripts	23.9%
3	Relay Health	11.9%
4	Mirth	10.1%
5	Orion Health	8.3%
6	Medicity	6.4%
7	Do not exchange data	5.5%
8	Clinical Connect	4.6%
8	Secure Exchange Solutions	4.6%
8	MobileMD	4.6%
9	Microsoft	3.7%
10	Alare	2.8%
10	MedAllies	2.8%

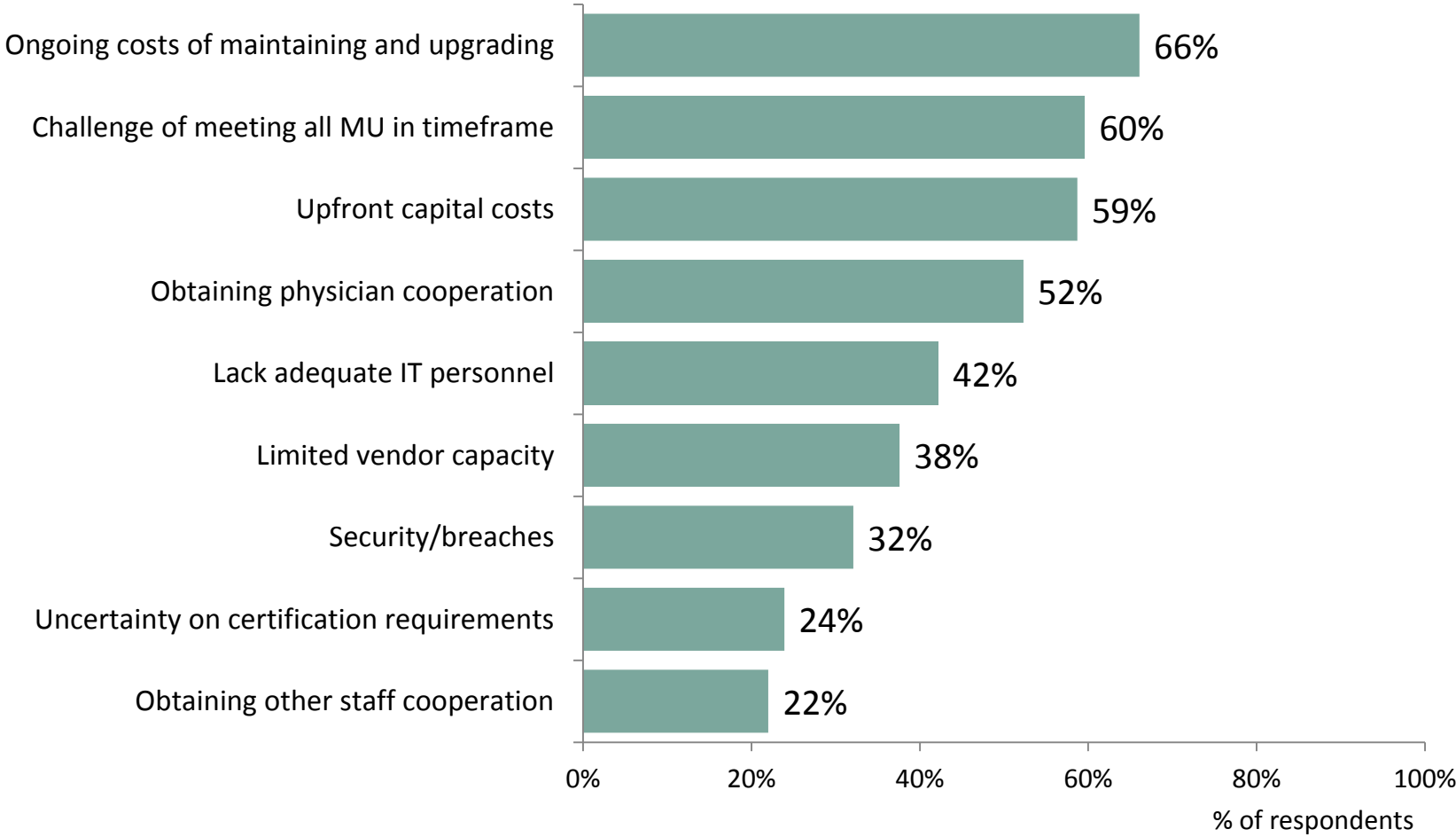
**\*Other:**

- Openlink
- IBM
- Truven Analytics
- Care Evolution
- Certify Data Systems
- Optom/Axolotl
- ICA
- Caradigm
- DrFirst
- HSX
- Iatric
- Infor
- KeyHIE
- Medhost
- PAR80

# What changes, if any, are you planning for your EHR system within the next 18 months? (Check all that apply)

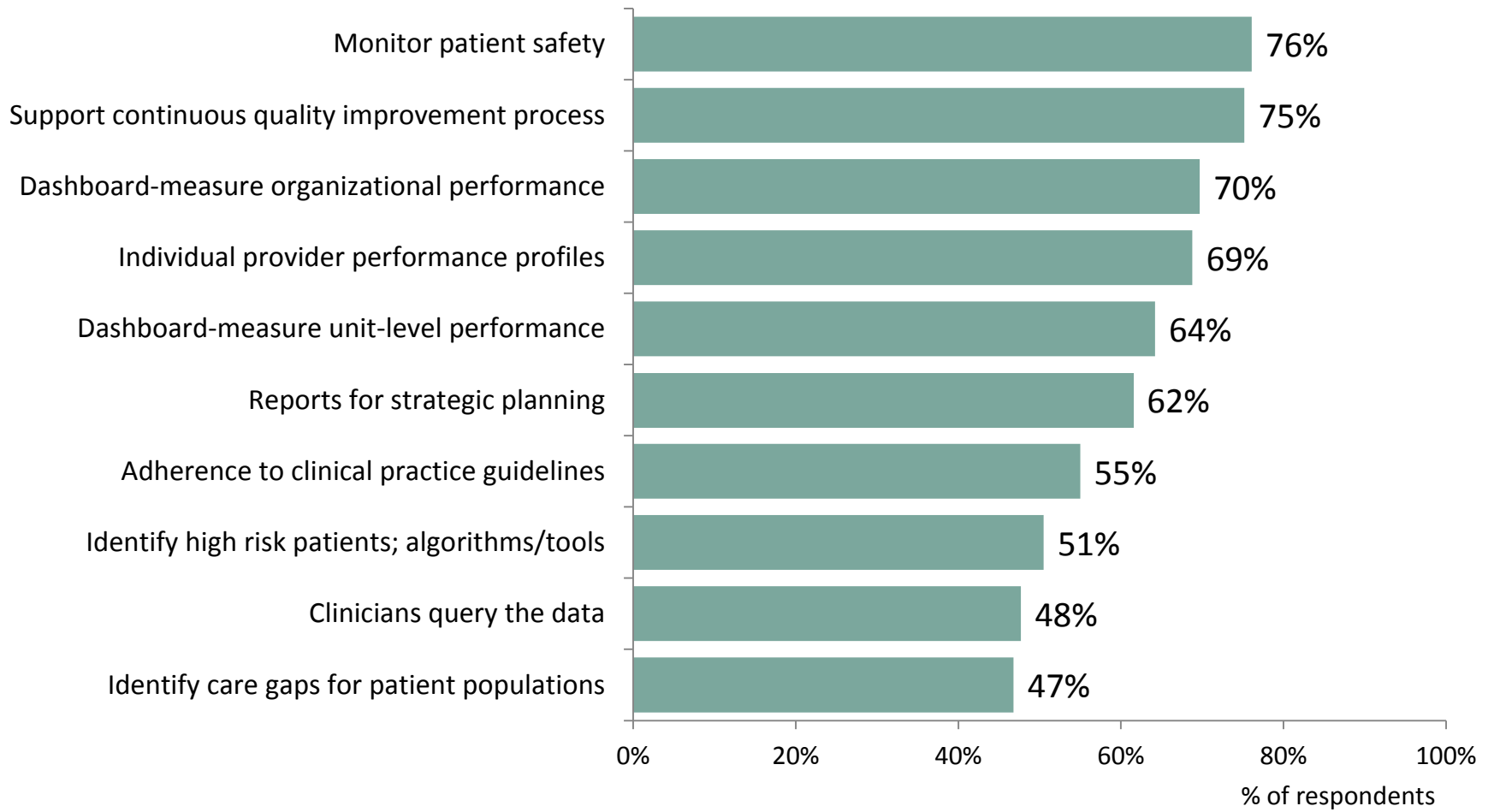


# Primary Challenges in implementing EMR/EHR system that meets MU federal requirements? (Check all that apply)



Source: 2014 AHA HIT Surveys, Results for Pennsylvania acute care hospitals, April 2015

# Do you use electronic clinical data from EHR/EMR system to do the following? (Check all that apply)



# Data Source

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- **The AHA's Annual HIT survey** was fielded to more than six-thousand hospitals nationwide in Winter 2014.
  - ✓ In **Pennsylvania**, 109 general acute care (GAC) hospitals responded to the survey (69% response rate).
  - ✓ Sample is broadly representative of all Pennsylvania-licensed general acute care hospitals.
  - ✓ An additional 22 non-acute, specialty, and Veterans' Affairs hospitals in Pennsylvania also participated in the survey; however, for the purposes of this analysis, their responses have been excluded.

# Distribution of Pennsylvania Hospital Respondents

		2014 Respondents	Total Acute Hospitals
<b>N (#)</b>		<b>109</b>	<b>159</b>
<b>Bed Size</b>	Less than 100	30%	33%
	101 to 250	38%	38%
	251-400	12%	13%
	400+	20%	15%
<b>Ownership</b>	Unaffiliated	26%	26%
	System-Owned	74%	74%
<b>Pennsylvania Region</b>	West	35%	38%
	Central	20%	19%
	Northeast	17%	18%
	Southeast	28%	25%
<b>TOTAL PA</b>		<b>69%</b>	<b>100%</b>



**The Hospital & Healthsystem Association of Pennsylvania**  
April 2015