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State-Sponsored Health Information Exchange (HIE) Organizations' Consent Policies: Opt-In or Opt-Out[1]

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The *State-Sponsored Health Information Exchange (HIE) Organizations' Consent Policies: Opt-In or Opt-Out* table provides a comparative overview of the patient consent policies, enacted through legislation or agency guidance, that govern the state-sponsored health information exchanges (HIEs) operating in each of the 50 states plus the District of Columbia. The table below presents the following information:

Organization and Launch Date – This column identifies the organizations that serve as the state-sponsored and designated entity for HIE for each of the 50 states plus the District of Columbia. The launch date for when the HIE was functional and operational is included.

Type of Consent Policy – This column briefly describes the type of consent policy that the respective state-designated HIE has adopted. Broadly, these policies fall under two categories: opt-out – patients may be automatically enrolled in the HIE but are given the opportunity to opt out of having their information stored and/or disclosed by the HIE; and opt-in – patient consent is required in order for patient health information to be stored and/or disclosed by the HIE. However, some state policies fall outside of these two broad categories, in which case descriptions of the policies are included.

Details on Consent Policy – If available, this column provides a description of the depth of the consent policy for each respective state-designated HIE organization and how it works.

Patient Notification Methods – If available, this column includes information on the methods and materials used by the respective state-designated HIE organizations to notify patients/consumers of their consent and/or privacy and security policies.

Additional Information –This column includes information and materials that provide additional insight and understanding regarding each respective state-designated HIE, their consent policies, and/or privacy and security policies. Websites and any publicly available resources are also provided in this column.

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[1] This supplemental material accompanies the *State HIE Consent Policies: Opt-In or Opt-Out* research conducted by Clinovations and GWU HealthInfoLaw.org, Sept 2016

State	Organization / Launch Date	Type of Consent Policy	Details of Consent Policy	Patient Notification Methods	Additional Information / Websites and Publicly Available Resources
Alabama (AL)	One Health Record-® (OHR) Alabama (Alabama Health Information Exchange - AHIE) (2012)	OPT-OUT	Individuals may choose to not participate in the electronic sharing of his/her protected information. By opting-out, no information regarding the patient/consumer will be exchanged or made available from any Participant, unless required by law. Patient/consumer must provide notice of opt-out to provider in writing or in a manner/form determined by the provider. The provider will, within 2 business days, take the appropriate steps to ensure the individual's information is no longer available through AHIE and notify OHR to an individual's changed status. Each provider/participant must develop and implement the appropriate measures/mechanisms to ensure no information about an individual who has opted-out shall be included in or made available through AHIE. If the patient/consumer wants to opt back into the OHR, they must make a request in writing, or form determined by provider/participant, to make their information available through AHIE. Each provider/participant shall document and maintain documentation of all written Opt-Out requests or revoke Opt-Out decisions from individuals.	--	Alabama's One Health Record® connected with Georgia Health Information Network in October 2015. One Health Record® created the infrastructure for exchanging health information in Alabama through a grant awarded to Medicaid in 2009 by the Office of the National Coordinator (ONC). Under the guidance of the Alabama HIE Commission, Alabama has stood up an interoperable, two-way data exchange system between physicians, hospitals and others. One Health Record®, Alabama's statewide Health Information Exchange, is committed to connecting Alabama medical providers so that they can securely share patient information electronically. One Health Record® is a DirectTrust member and allows for both Direct and bi-directional exchange of information through their HIE that is supported by Truven Health Analytics. The state does not charge any provider to connect using the One Health Record® system. **Websites/Publicly Available Resources** http://onehealthrecord.alabama.gov/ http://onehealthrecord.alabama.gov/HIE%20Policies%20and%20Procedures.pdf http://www.gahin.org/media/press-release/georgia-completes-connection-alabama-support-state-state-exchange-health

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Alaska (AK)	Alaska eHealth Network (AeHN)	OPT-OUT	Patients/consumers have the option to completely or partially opt-out. If a patient partially opts-out, their health information can be accessed in an emergency situation. If patient completely opts-out, their information cannot be accessed at any time. At either opt-out level, it is legally required that the HIE contribute to public health reporting. Limited information available for both patients and providers. Consent and disclosure forms are available for patients to access with education on HIE.	--	Selected by the state of Alaska as the state's official HIE management entity. **Websites/Publicly Available Resources** http://www.ak-ehealth.org http://www.ak-ehealth.org/wp-content/uploads/2.100-Consumer-Opt-Out-Election-Policy.pdf http://www.himss.org/news/alaska-selects-alaska-ehealth-network-aehn-its-hie-network http://www.commonwealthnorth.org/index.cfm?section=about&page=What's-New&viewpost=2&ContentId=703
Arizona (AZ)	Arizona Health e-Connection - The Network (AzHeC) (2007)	OPT-OUT	Patients can make the choice to withhold consent and AzHeC will not allow access to that individual's clinical information to anybody other than emergency care providers.	Arizona law requires that once a provider begins to participate in an HIO, the provider must provide patients a copy of the Notice of Health Information Practices in each patient encounter and provide an Opt-Out Change Form (opt out) or Opt Back in Change Form (opt back in). The Network helps providers comply with Arizona law to have in place a patient notification and opt-out process.	The Network is the only statewide (PUBLIC) HIO in Arizona. **Websites/Publicly Available Resources** http://azhec.org/the-network/ https://azhec.org/information-center/health-info-exchange/ http://azhec.org/the-network/patient-rights/ http://hie.az.gov/docs/app_plans/AZHIE_082310_StrategyUpdate.pdf http://hie.az.gov/docs/app_plans/ARIZONA Response - PIN 003 - Privacy Security - 2013 Submission - Final - 05-29-2013.pdf

Commonly Used Acronyms:
HIE – Heath Information Exchange; HIN – Health Information Network; HIO – Heath Information Organization; PHI – Protected Health Information
(Note: State initial appearing before one of the above acronyms indicates the state name. For example: DHIN - Delaware Health Information Network.)

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Arkansas (AR)	Arkansas State Health Alliance for Records Exchange (SHARE) (2011)	OPT-OUT	Patients have the opportunity to opt-out, if they wish, at their first appointment after the facility activates SHARE, and periodically thereafter. Patients do not need to do anything, no boxes to check, or papers to sign.	Participating providers must provide patients with the opportunity to opt-out. A form is to be completed and returned to the healthcare provider. Patients can also opt-out their minor children using the same process.	**Websites/Publicly Available Resources** http://www.sharearkansas.com/resources/faq http://www.ohit.arkansas.gov/share
California (CA)	California HIE (CAHIE) (2013)	OPT-IN	In California, you must technically give specific permission for your medical information to be exchanged electronically. California's opt-in consent requirement applies only to sharing your medical records electronically. It does not supersede the HIPAA regulations or their presumption of consent for the use of your medical information for purposes of treatment, payment, and routine business operations. For more about consent, see PRC's California Medical Privacy Fact Sheet C2: Uses and Disclosures of Medical Information—With and Without Consent. There are some exceptions to the opt-in consent to HIE, including emergency situations, referred to as 'break the glass' when the patient/representative cannot give consent for electronic access to records. Mandatory public health reporting is also another exception. California regulations also allow you to revoke HIE consent - the revocation becomes effective on the date it is made and does not apply to health information already exchanged prior to the revocation.	--	Founded under the direction of the California Health and Human Services Agency, California Office of Health Information Integrity with seed funding from the federal ARRA grant. California policymakers determined that the statewide health information exchange would be developed through private non-profit initiatives rather than establishing a single state run organization. California includes several enterprise and community based health information organizations. **Websites/Publicly Available Resources** http://www.ca-hie.org https://www.privacyrights.org/fs/fsC6/CA-medical-HIE - required-consent

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Colorado (CO)	Colorado Regional Health Information Organization (CORHIO) (2007)	OPT-OUT	Patients have the opportunity to opt-out and will ensure that their information is not searchable in the HIE. Patient participation is voluntary. When a patient opts out, their information will not be searchable, but their provider can still use the CORHIO network to issue electronic orders for lab tests, prescriptions and other directed healthcare services. They may also receive lab results, x-rays, and other information sent directly to them electronically. The service is no different from provider using mail/fax to receive information. If provider is not participating in HIE, then their patient's information is not available in the HIE.	If healthcare provider is participating in the HIE, they are required to notify patient of their participation during the patient's visit or at the time of registration. Patients have the right to opt-out at this time or anytime thereafter.	CORHIO has built-in support for HIPAA and other privacy and security laws. Health information including mental health notes, substance abuse and genetic testing information are subject to additional legal protections. Protection includes a requirement that written consent be obtained for each release of protected information. Patients can request revisions and corrections to their health records by talking to the healthcare provider who is the owner/creator of the records. **Websites/Publicly Available Resources** http://www.corhio.org http://www.corhio.org/for-patients/faqs-for-patients https://www.healthit.gov/policy-researchers-implementers/state-health-information-exchange http://www.hieanswers.net/colorado-state-health-information-exchange/

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Connecticut (CT)	Health Information Technology Exchange of Connecticut (HITE-CT) (2010 – 2014)	OPT-OUT	Participation was voluntary and patients/consumers could choose whether they wanted their health information included. Opting-out restricted access of health information to emergency room doctors or other health care providers.	Healthcare providers were required to tell consumers/patients if they were participating in the Health Information Technology Exchange of CT (HITE-CT). Providers needed to provide a notice, which could accompany the provider's HIPAA privacy notification.	HITE was a quasi-governmental agency of the State of Connecticut whose purpose was to create, maintain and make available information exchange technology to enrolled healthcare participants located in the State of Connecticut. HITE-CT HIE closed down effective 7/1/14 - after using $4.3 million in federal grants. **Websites/Publicly Available Resources** http://www.fiercehealthcare.com/ehr/after-wasting-4-3-million-connecticut-shutters-state-hie http://www.ct.gov/hitect/cwp/view.asp?a=4277&q=502942&hitectNav=| http://medcitynews.com/2014/12/Connecticut-health-information-exchange-dissolved-forced-start/?rf=1 http://www.healthcare-informatics.com/article/connecticut-legislature-considers-giving-statewide-hie-another-try http://www.ctnewsjunkie.com/upload/2014/12/Health_Information_Technology_Exchange_of_Connecticut_20141107_FY2012-2013.pdf

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Delaware (DE)	Delaware Health Information Network (DHIN) (2007)	OPT-OUT	No Consent: (Delivery Function) Opt-Out: (Patient Query Function) DHIN maintains a hybrid opt-out policy for patient participation. Patients may opt-out of the query functionality, but cannot opt-out of the results delivery functionality. Non-participation will result in personally identifiable health information not being available to users (including emergency personnel). Their data remains in the system and is continually collected by results delivery function - but providers are blocked from viewing the data. Break the glass provisions are included for DHIN. Patients/consumers may decide to not participate in DHIN at any point and can choose to join again at any point. No requirements for how often consent is to be discussed/revisited. Theoretically, a provider could discuss consent once (if at all) with a patient, then never again. Currently, no granular consent for DHIN - patients are all in or all out. DHIN currently working with the technology vendor MEDICITY on developing more granular opt-out options rather than the current purely binary (in-out) approach. This option will be critical to expanding DHIN services to include more mental/behavioral health organizations, State administrative oversight organizations, and a patient portal which will foster consumer engagement. (Reference: AHRQ report on DHIN)	At the point-of-care, providers must educate the patient on DHIN and on the opt-out procedure. DHIN offers talking points and forms to help providers educate patients. Providers and data senders include a disclosure in their HIPAA-required privacy policies that the patient's clinical data is sent to the DHIN - at this time they also offer the patient the choice to opt-out. Non-Participation Request Cover Letter and Form is available for patients to review and complete (must be notarized by pubic notary or signed by provider to validate the patient's identity). A Cancellation Request form is available to patients if they wish to participate in the future.	Conduit of Health Information; facilitates movement and delivery of patient health information. First state-wide HIE and enacted by the Delaware General Assembly. **Websites/Publicly Available Resources** http://dhin.org/resources http://dhin.org/wp-content/uploads/2015/06/3-DHIN-Access-to-Info-Policy-3.17.11-Final-new-logo-added-4-10-12.pdf https://healthit.ahrq.gov/sites/default/files/docs/citation/state-regional-demonstration-hit-de-final-report.pdf http://www.pillsburylaw.com/siteFiles/Events/NewPatientPrivacyandConsentStandardsforaConnectedWorld.pdf http://www.hieanswers.net/delaware-state-health-information-exchange/

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District of Columbia (DC)	Chesapeake Regional Information System for our Patients (CRISP)	OPT-OUT	All patients are notified about the existence of CRISP and will be included in the exchange unless they opt-out of exchange participation. Opt-out option by patient is kept confidential and not shared; all are prevented from accessing patient information. Patients may revoke participation in the exchange at any time and can alter status in either direction. Information can be shared, in accordance with the law, for public health reporting, even if the patient decides to opt-out. Information including name, address and date of birth are kept in the system (separate data repository used for master patient index) to ensure records are blocked. The existing data will remain in the exchange, but sequestered from further circulation unless required by law. No 'break the glass' provisions are available for a non-participant. Limited situations exist where for legal reasons CRISP is required to share limited data about patients who have opted-out - medical information communicated by public health officials by Maryland law. CRISP does not recommend granular control for exclusion by data type/provider organization. But, hospitals/providers may allow patients greater control over what is published to the exchange; Health Record Banks and PHRs will be an exception to the all-in or all-out principal.	Patients can choose to opt-out via the secure website, phone, fax and mail Patients are also notified on the web of the consequences of opting-out.	Regional HIE that serves Maryland and DC **Websites/Publicly Available Resources** https://crisphealth.org https://crisphealth.org/FOR-PATIENTS/Opt-Out-Information https://www.healthit.gov/sites/default/files/privacy-security/appendix-a-state-model-table.pdf

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Florida (FL)	Florida Health Information Exchange (FHIE)	OPT-IN	Florida requires patient authorization for the disclosure of health information. A 'Full Disclosure Authorization Form' allows a patient to choose which providers may access their health information. This form or its equivalent must be used by providers participating in the Florida HIE.	--	**Websites/Publicly Available Resources** http://www.fhin.net/privacyRegulations/index.shtml http://fhin.net/privacyRegulations/docs/ForPatients.pdf https://www.florida-hie.net/patients/index.html http://medicaleconomics.modernmedicine.com/medical-economics/content/tags/health-information-exchange/health-information-exchanges-introduce-pa?page=full
Georgia (GA)	Georgia Health Information Network (GaHIN) (2015)	OPT-OUT	Providers are required to notify patients of their participation at the time of registration or at their appointment. Patients have the right to opt-out at any time and can do so by filling out a form with their provider. If a patient opts-out, no healthcare provider can share their health records with other providers through the GaHIN network. Patients can also opt back in at any time.	--	The Georgia Health Information Network (GaHIN) serves with the Georgia Department of Community Health (DCH) and the Georgia Health Information Technology Regional Extension Center (GA-HITEC) in a public-private collaborative to establish Georgia's statewide health information exchange, to connect Service Area HIEs, large integrated health systems, payers, wellness partners and other health care stakeholders. Approved by CMS in September of 2015 to be the designated entity for the State of Georgia Health Information Exchange. **Websites/Publicly Available Resources** http://www.gahin.org/patient-participate.html http://www.gahin.org/patient-privacy-security.html http://healthitinteroperability.com/news/gahin-named-georgia-entity-for-health-information-exchange

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Hawaii (HI)	Hawaii Health Information Exchange (HHIE) (2006)	OPT-OUT	Forms for opting-out and opting back in are available on the website for patients/consumers.	--	2009 Designated by HI as the statewide HIE. The Hawaii Health Information Exchange launched its 2015 General Workforce Security Awareness Training available to physicians and their staff members throughout Hawaii. **Websites/Publicly Available Resources** https://hawaiihie.org https://hawaiihie.org/sites/default/files/sites/default/files/New%20Opt%20Out%20II.pdf https://hawaiihie.org/sites/default/files/sites/default/files/PDFs/HIE FILES/Request to Resume Individual Participation %28Opt-Back In%29 Form.pdf
Idaho (ID)	Idaho Health Data Exchange (IHDE) (2008)	OPT-OUT	Patients may opt-out or request to restrict disclosure of health information.	--	Patients are encouraged to read the '*patient's benefits*' page to ensure they understand the benefits of having patient information available through the IHDE. The forms are available to download, print, complete and mail/fax to the IHDE (address/fax is listed on the form). It will take 7-10 business days to process. Patients can use the same process to opt back in or request to rescind. All forms must be notarized to ensure identity. **Websites/Publicly Available Resources** http://www.idahohde.org http://www.idahohde.org/opt-out-or-opt-back-in/ http://gov.idaho.gov/pdf/HCC_health_data_exchange.pdf http://www.healthandwelfare.idaho.gov/Portals/0/Medical/MedicaidCHIP/IHDEAnnualReportHQPC.pdf

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Illinois (IL)	Illinois Health Information Exchange (ILHIE) (2014)	OPT-OUT	Patients/consumers can choose to opt-out of the ILHIE Connect, including the sharing of mental health information. Health records will not include HIV/AIDS information, genetic testing information, and/or sexual assault information through ILHIE unless consented. To be included in the HIE, patients do not need to do anything, unless the provider removes them from participation.	An ILHIE Connect Signage must be displayed by the doctor if he/she is an ILHIE Connect User ILHIE Connect website contains a Patient Participation Video/PowerPoint	Resources including the Data Sharing Agreement; ILHIE Connect Flyer; ILHIE Connect Demonstration are all included on the website. **Websites/Publicly Available Resources** http://www.illinois.gov/sites/ilhie/Pages/default.aspx http://www.illinois.gov/sites/ilhie/Pages/patientconsumer.aspx http://www.illinois.gov/sites/ilhie/Pages/ILHIEPatientParticipation.aspx

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Indiana (IN)	Indiana Health Information Exchange (IHIE) (2004)	OPT-OUT	Information on Consent Model is limited One site lists Indiana as an opt-out state as of 2014. http://medicaleconomics.modernmedicine.com/medical-economics/content/tags/health-information-exchange/health-information-exchanges-introduce-pa?page=full Another resource states that in Indiana health care providers manage the consent (opt-out) processes. Indiana follows HIPAA regarding consent. (Information from the State Consent Policy listing document). The HIMSS11 presentation lists IHIE as a No Consent State (Consent from patients is not required for participation in the HIE). No Consent - also federally funded substance abuse treatment programs do not provide data to HIO. Data is only used for purposes allowed under HIPAA. Patient's data is maintained in separate 'vaults' or clinical data repositories by the institution until one of the allowed uses is triggered. Then patient's data are merged virtually. Triggers are highly specific and tightly controlled.	--	Non-profit organization that was designated by the state to receive the State HIE Cooperative Agreement to support and oversee implementation of the State Plan. Grantee pursuing market-based or capacity-building approach (NORC report). Based on the HIE Strategic and Operational Plan Profile - Indiana has five (5) major health information organizations (HIOs) that operate in the state including (Healthbridge, HealthLINC, Indiana HIE, Med-web, and Michiana Health Info Network) Website is limited with information for patients/consumers. Directed to providers primarily. **Websites/Publicly Available Resources** http://www.pillsburylaw.com/siteFiles/Events/NewPatientPrivacyandConsentStandardsforaConnectedWorld.pdf http://www.ihie.org http://medicaleconomics.modernmedicine.com/medical-economics/content/tags/health-information-exchange/health-information-exchanges-introduce-pa?page=full https://www.healthit.gov/sites/default/files/in_state_hie_profile.pdf

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Iowa (IA)	Iowa Health Information Network (IHIN)	OPT-OUT	Health information will be available to providers without having to take action. Patients can opt-out of having their information available and if this option is elected, providers will not be able to search the IHIN for health records - even in the case of an emergency. Patients can opt back-in with an opt-in form.	--	Iowa e-Health will first connect Iowa providers and then will continue to be made to other states and Regional Health Information Networks (RHINs). Connected to networks in Missouri, Illinois and Kansas. Connections are being developed for Minnesota, South Dakota, and Wisconsin. Will eventually interconnect into the Nationwide Health Information Network (NHIN). **Websites/Publicly Available Resources** http://www.iowaehealth.org/provider/ http://www.iowaehealth.org/provider/privacy-security/opt-out/ http://www.iowaehealth.org/provider/what-is-ihin/
Kansas (KS)	Kansas Health Information Network (KHIN) (2011)	OPT-OUT	The KHIN website provides a form for 'Patient Consent and Authorization Form for Point-of-Care Disclosures'. This form states that by signing, patients authorize KHIN to disclose health information to a particular provider through KHIN. An Opt-Out form is available for sharing information on Substance Abuse. Opt-out forms are available for patients to submit electronically and via a paper form through the mail.	--	Website does not offer much information for consent policy. **Websites/Publicly Available Resources** http://khinonline.org http://khinonline.org/for-patients2/patients http://khinonline.org/for-providers/document-downloads http://www.kanhit.org/participate.htm http://www.kdheks.gov/news/web_archives/2012/05232012.htm https://khap.kdhe.state.ks.us/public/hie/ https://ehrintelligence.com/news/muddled-kansas-hie-situation-serves-as-warning/

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Kentucky (KY)	Kentucky Health Information Exchange (KHIE)	No Information Available	No information could be found on the KHIE website regarding the consent model in place for patients/consumers.	--	**Websites/Publicly Available Resources** http://khie.ky.gov/Pages/index.aspx
Louisiana (LA)	Louisiana Health Information Exchange (LaHIE) (2011)	OPT-IN	Louisiana is considered an "opt-in" state. A patient's consent is required for his/her information to be accessed via LaHIE. If the consent has not been obtained and the patient presents in an emergency situation, his/her information may be accessed in LaHIE for emergency treatment purposes. If a patient explicitly opts out of LaHIE, his/her information cannot be accessed for any reason.	LaHIE providers/hospitals should include language in their privacy policies that references the exchange of health information through LaHIE	**Websites/Publicly Available Resources** https://www.lhcqf.org/for-providers/lahie http://lhcqf.org/lapost-old/faq
Maine (ME)	HealthInfoNet (HIN)/Maine's Regional Extension Center (MEREC) (2009)	OPT-OUT	Each time a patient visits a new participating medical provider, they are required to let the patient know they are participating in the HIE and to provide information on HealthInfoNet. Opt-in for mental health/HIV - If patient chooses to also share information related to HIV/mental health care, they will need to fill out a consent form. Patients can also opt back in at their choosing by filling out a form available online on their website.	Information on HealthInfoNet is also included in the provider's HIPAA privacy notice.	Maine-based independent nonprofit designated by the State of Maine to operate Maine's statewide eHealth information network. **Websites/Publicly Available Resources** http://hinfonet.org https://secure.hinfonet.org/PatientOptions/optin https://secure.hinfonet.org/PatientOptions/optout http://hinfonet.org/patients/your-choices/ http://www.maine.gov/dhhs/oms/HIT/hie.htm

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Maryland (MD)	Chesapeake Regional Information System for our Patients (CRISP) (2010)	OPT-OUT	See DC for CRISP Consent Policy details.	Patients can choose to opt-out via the secure website, phone, fax and mail. Patients are also notified on the web of the consequences of opting-out.	CRISP is a Regional HIE that serves Maryland and DC. Formally designated by the Maryland Health Care Commission as Maryland's statewide health information exchange. **Websites/Publicly Available Resources** https://crisphealth.org https://crisphealth.org/FOR-PATIENTS/Opt-Out-Information https://www.healthit.gov/sites/default/files/privacy-security/appendix-a-state-model-table.pdf

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Massachusetts (MA)	Massachusetts Health Information HIway (Mass HIway) (2012)	OPT-IN	Patient must opt-in before HIE participant can use the Mass HIway. Consent requirements apply only to Mass HIway and do not apply for mandatory reporting, including public health. Consent forms and language can be determined by participants of the HIE (providers) in accordance with local processes and patient needs. A Consent Policy Statement (available online) provides information to providers. Participants are required to allow patients to change their consent preferences and the participants are responsible for updating consent preferences with the Mass HIway. Participants are also required to provide an accounting of disclosures to patients as required under HIPAA. Patient is given option to participate when they visit a clinical entity for care - here they may opt-in all clinical data from each entity. Patient chooses which entity's records to make available to the network - and pre-defined data are then sent to the central server. A signed patient consent form is required for a patient's clinical data to be uploaded from their physician's office EHR to the exchange community's database.	A Consent Policy Statement is available online for HIE participant review - participant is responsible for obtaining patient permission to share information over the HIE. Patient permission is requested for direct messaging functionality as well as consent for query and retrieve. Participants are accountable for educating their patients about consent. Education is also available including YouTube videos, slideshare and PDF.	No specific consent forms or language is prescribed by Mass HIway and HIE participants have flexibility in designing the consent processes in accordance with their local processes and patient needs. Templates are available to assist the HIE Participants (providers) with the development of their policies, processes, and materials. First state to receive approval for federal funding from CMS through the Medicaid agency to create a statewide HIE (Mass HIway). **Websites/Publicly Available Resources** http://www.mass.gov/eohhs/gov/commissions-and-initiatives/masshiway/ http://www.masshiway.net/HPP/Resources/ConsentforMassHIway/index.htm http://www.masshiway.net/HPP/PatientsandFamilies/AboutYourConsent/index.htm http://www.masshiway.net/HPP/cs/groups/hpp/documents/document/c3rh/dgvt/~edisp/consent_policy_statement.pdf http://www.masshiway.net/HPP/cs/groups/hpp/documents/document/zxzj/mdaw/~edisp/orion-mao-devc000439.pdf

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Michigan (MI)	Michigan Health Information Network (MiHIN)	OPT-OUT	Michigan established and implemented an 'Informed Opt-out' policy as the method of consumer control for protected health information in an HIE.	--	**Websites/Publicly Available Resources** http://mihin.org/exchanges/ http://mihin.org/about-mihin/faqs/ http://mihin.org/exchanges/other-state-exchanges/ http://www.michigan.gov/documents/mdhhs/HIT_Commission_2015_Annual_Report_Final_Version_513877_7.pdf
Minnesota (MN)	See Additional Information Column	OPT-OUT	Minnesota has a standard consent form available on the MDH website. Patients can opt-out of having their information shared between providers.	Minnesota Notice of Privacy Practices (NPP) is provided on the following website: http://www.health.state.mn.us/e-health/privacy/ps102114npp.pdf	Minnesota includes State-Certified Health Information Exchange Service Providers including Health Information Organizations (HIOs) and Health Data Intermediary (HDI) **Websites/Publicly Available Resources** http://www.health.state.mn.us/divs/hpsc/ohit/certified.html http://www.health.state.mn.us/e-health/hitimp/2015mandatefaq.pdf http://www.health.state.mn.us/e-health/privacy/index.html

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Mississippi (MS)	Mississippi Health Information Network (MS-HIN) (2010)	OPT-OUT	If a patient decides they do not want their health information shared, the patient can complete a MS-HIN opt-out form and request to be opted-out from each care provider. The patient will follow the instructions on the MS-HIN Non-Participation Request Form and return to the MS-HIN Office. This disables the patient's information from being accessible in the MS-HIN Community Health Record System. If a patient wants his or her health information to be private, he or she must inform each healthcare provider to make the health information "confidential" and also complete the MS-HIN "Opt-Out" form. A patient may reinstate their participation at any time. To cancel Opt Out, patients are to complete the MS-HIN Reinstatement Form and return to the MS-HIN Office.	MS-HIN health care providers are responsible for letting patients know they participate in MS-HIN.	By completing the MS-HIN opt-out form patients are telling MS-HIN not to allow their information to be "searchable" within the Community Health Record. However, there are organizations that utilize MS-HIN for required transmission of medical records such as Mississippi Public Health, insurance providers, accountable care organizations and home health agencies that are exempt from the MS-HIN Opt-Out system. This is due to a patient's existing agreements and/or state and federal laws requiring the exchange of clinical data. **Websites/Publicly Available Resources** http://www.ms-hin.ms.gov/Pages/default.aspx http://www.ms-hin.ms.gov/Sub/Pages/FAQ.aspx http://www.ms-hin.ms.gov/Sub/MSHIN Documents/non-participation_requests_procedure6-2012.pdf
Missouri (MO)	Missouri Health Connection (2009)	OPT-OUT	Patients can opt out by completing and notarizing a form, and then sending it to MHC. Patients can opt-in at any time.	--	Non-profit organization that serves as Missouri's statewide health information network. **Websites/Publicly Available Resources** http://www.missourihealthconnection.org/downloads/MHC%20FACT%20PATIENT%20SHEET%2001282015.pdf http://www.missourihealthconnection.org/opt-out http://www.missourihealthconnection.org/about-us
Montana (MT)	HealthShare Montana	No Information Available	--	--	Montana's Designated Health Information Exchange Organization

Commonly Used Acronyms:
HIE – Heath Information Exchange; HIN – Health Information Network; HIO – Heath Information Organization; PHI – Protected Health Information
(Note: State initial appearing before one of the above acronyms indicates the state name. For example: DHIN - Delaware Health Information Network.)

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Nebraska (NE)	Nebraska Health Information Initiative (NeHII)	OPT-OUT	Participation in NeHII is completely free. If any of healthcare providers are participating in the NeHII system, patients are automatically enrolled in the system. If patients decide to opt out of NeHII, providers will not have access to patient healthcare records. If patients choose to opt out, they can opt back into the system at any time.	--	**Websites/Publicly Available Resources** https://www.connectnebraska.net/index.php?option=com_content&view=article&id=121&Itemid=165ß http://50.63.36.155
Nevada (NV)	Nevada Health Information Exchange (NV-HIE) (2012) (Operations ceased in 2014)	No Information Available	--	--	Established in September 2012 as a non-profit Nevada corporation and ceased operations by 2014. **Websites/Publicly Available Resources** http://www.healthcare-informatics.com/article/what-caused-fall-nevada-hie
	HealtHIE Nevada HIE	OPT-IN	Patients can opt-in and participate by signing up at their provider or clinic. Patients have the right to participate and they have three choices on the consent form including: (1) I consent; (2) I consent only in case of emergency; (3) I do not consent. Patients must give their permission for health care provider to view their health information in the HIE. Consent can be changed at any time.	--	Private, not-for-profit statewide health Information exchange The only HIE open throughout Nevada. **Websites/Publicly Available Resources** http://healthienevada.org/how-do-i-sign-up/ http://healthienevada.org http://healthienevada.org/patients/patient-faqs/

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New Hampshire (NH)	New Hampshire Health Information Organization (NHHIO) (2011)	OPT-OUT	Little information could be found aside from the legislative FAQs with information on patient opt-out.	--	Non-profit organization - NHHIO reports that their membership has grown to over 65 participants, continuing their positive trend towards full financial sustainability. Over 340,000 public health transactions are being sent through the NHHIO monthly, and over 10,000 are occurring directly between providers for better patient care. **Websites/Publicly Available Resources** http://nhhio.org/about-us/faqs http://nhhio.org/about-us/overview http://www.hieanswers.net/new-hampshire-state-health-information-exchange/
New Jersey (NJ)	New Jersey Health Information Network (NJHIN) (2014)	OPT-OUT	Information available separately for each of the 6 regional HIOs that are associated with the NJHIN.	--	Data is exchanged among 6 regional HIOs: Camden HIE; Highlander; Jersey Health Connect; NJSHINE; Trenton HIE; Virtua HIE Information is also exchanged with the Department of Health's Immunization Information System NJHIN is also the primary vehicle for New Jersey to exchange health information nationally with the eHealth Exchange. **Websites/Publicly Available Resources** http://www.healthcare-informatics.com/news-item/nj-launches-statewide-hie http://www.state.nj.us/health/njhit/network/ http://www.njhitec.org/index.php/services/hie/nj/

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New Mexico (NM)	New Mexico Health Information Collaborative (NMHIC) (2013)	OPT-OUT	New Mexico law states that patients must give consent before authorized users may view and share information in the patient's NMHIC electronic medical record. If a patient chooses not to participate in the NMHIC, then a consent form is required. The patient's care team will not be able to access their personal health information in the NMHIC HIE. However, in the event of a life threatening situation where the patient is unable to give consent, a provider can "*Break the Seal*" and locate the patient's electronic medical record. *Break the Seal* access has a time-limit and is audited. Patients may request an "Opt Out – Opt Back In" form by contacting NMHIC.	Patients may choose to Opt Out of participating in the system entirely, meaning no one can view their name or electronic medical record in a NMHIC search, not even in an emergency situation. The Opt Out decision by a patient may possibly cause delays in treatment or require the patient to have repeat lab tests and x-rays if the needed information is not readily accessible through other methods.	Public Health Reporting – NMHIC has been authorized to provide hospitals' Reportable Lab Results reporting and Syndromic Surveillance reporting to NM Department of Health. In addition, NMHIC is working with other HIEs along the New Mexico state lines. **Websites/Publicly Available Resources** http://www.nmhic.org/sites/default/files/patient-consent-form.pdf http://www.nmhic.org/node/3
New York (NY)	New York eHealth Collaborative (NYeC) (2006)	OPT-IN	NY refers to this as an 'affirmative consent model'. Consent is considered all or nothing - all data contributed to the exchange can be made available. State level policies are broad and allow for variation by region / HIO. Two approaches for obtaining/gaining consent - provider organizations can obtain consent at the point of service. Also, the RHIO can obtain consent through a RHIO multi-provider consent form, which can be accessed either at the point of service or online via the RHIO website. Patients have the ability to revoke their participation in the exchange at any time. In this case, existing data in the exchange will remain, but will be requested from further circulation unless required by law.	Patient Consent Policies and Procedures are defined within the NY Policies and Procedures document available online.	**Websites/Publicly Available Resources** http://www.nyehealth.org/
North Carolina (NC)	North Carolina HIE Network (2016)	OPT-OUT	Patients have the right to opt-out of the NC HIE any time. Patients who have opted out have the right to opt back in any time. A downloadable form is available for patients to complete and mail to the NCHIA. The opt-out form is available in English and in Spanish.	--	**Websites/Publicly Available Resources** http://hiea.nc.gov/patients

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North Dakota (ND)	North Dakota Health Information Network (NDHIN)	OPT-OUT	Patients have the right to opt out of participation in the NDHIN. Opt-out is when an individual provides a written decision that their protected health information cannot be shared through the HIE, except in the situation where required by law or authorized by the individual in an emergency. By default, an individuals' protected health information can be searched for through the NDHIN, per North Dakota Senate Bill 2250. Opt Out means an individual has made a written decision that their protected health information cannot be searched for through the health information network, except as required by law or as authorized by the individual in an emergency. The NDHIN offers many benefits to patients, but participation is voluntary. A patient can choose to opt out of participation in the NDHIN and will be required to sign the Opt Out/Revoke Opt Out form, either electronically or on paper.	Notice of Privacy Policies are available online Forms can either be filled out and sent in or submitted online - both are available to download online. Additional information is also available to patients/consumers regarding FAQs and information to read before electing to opt-out.	**Websites/Publicly Available Resources** https://www.nd.gov/itd/statewide-alliances/ndhin/consumers/opt-out-participation https://www.nd.gov/itd/statewide-alliances/ndhin/consumers/faqs#16 https://www.nd.gov/itd/statewide-alliances/ndhin/about-us/policies https://www.nd.gov/itd/statewide-alliances/ndhin/about-us/policies/notice-privacy-practices

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Ohio (OH)	CliniSync (2009)	OPT-OUT	As of December 2015, it is not required to affirmatively obtain a patient's consent prior to accessing the patient's information. Patients may opt-out at any time by notifying the Health Information Management Services/Medical Records Department or office administrator. CliniSync policy requires that an organization have a mechanism for a patient to opt-out. If they opt-out, then this decision must be communicated to the Partnership as soon as possible and no later than 3 days after receipt of request.	The policy does not dictate language that needs to be used for the Notice of Privacy Practices (NPP).	Patients can opt out by 4 methods: 1. Organization sends CliniSync a flag in its ADT message 2. Organization's staff is trained on CliniSync Consent tool in the CliniSync web portal and uses it to change consent status 3. Organization sends CliniSync a support ticket requesting the patient to be opted-out 4. Patient contacts CliniSync directly and mails a completed and notarized opt-out form that is available on the CliniSync website under Member Resources, Policies and Documents **Websites/Publicly Available Resources** http://www.clinisync.org http://www.clinisync.org/fact-sheets-faqs http://www.clinisync.org/member-resources/policies-documents http://www.healthcare-informatics.com/article/ohio-s-statewide-hie-success-strategy-and-services
Oklahoma (OK)	Oklahoma Health Information Exchange Trust (OHIET)	OPT-OUT	In Oklahoma, health information is protected and patients must provide authorization. Patients are may opt-out of their health records being accessed or exchanged.	--	**Websites/Publicly Available Resources** http://www.healthsciences.okstate.edu/ruralhealth/documents/SchottOOA0112.pdf http://www.himss.org/oklahoma-health-information-exchange-trust-overview http://law.justia.com/codes/oklahoma/2014/title-63/section-63-1-132 http://www.healthsciences.okstate.edu/ruralhealth/documents/SchottOOA0312.pdf

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Oregon (OR)	Care Accord (Oregon's State Information Exchange)	No Information Available	Patient consent must be obtained before transmitting information in all situations as is required by state/federal law.	--	No further information can be found on the website regarding the consent model or policy for Care Accord Oregon **Websites/Publicly Available Resources** https://www.careaccord.org/hie-in-oregon/overview.shtml
Pennsylvania (PA)	Pennsylvania Patient & Provider Network (P3N) (2016)	OPT-OUT	If a patient's healthcare provider is connected to the P3N (Pennsylvania Patient & Provider Network) through a certified HIO, that patient's information is automatically available to other P3N-connected providers. A patient may opt-out of sharing his/her information in the P3N by completing the P3N opt-out form. A P3N Opt-Out Registry is maintained by the Pennsylvania eHealth Partnership Authority	Forms, brochures are available for patients, healthcare providers and HIOs regarding P3N.	Additional educational information is provided via a consumer media campaign by the Pennsylvania eHealth Partnership Authority about electronic Health Information Exchange (eHIE). **Websites/Publicly Available Resources** http://www.paehealth.org/consent http://www.paehealth.org/images/P3N_Opt-Out_Form_Fillable_PDF_December_2014.pdf http://www.paehealth.org/health-care-professionals?id=246

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Rhode Island (RI)	Rhode Island Quality Institute (CurrentCare) (2001)	OPT-IN	Consent for exchange participation is all or nothing. There is no granularity of choice with respect to the type of data that can flow though the exchange. Once enrolled - the options for participation include: 1. All providers permitted access to information 2. Only certain provider organizations (as selected by patient) are authorized to access information 3. Default setting - providers have temporary access to information only in emergency or unanticipated event Patients have the ability to revoke their participation in the exchange at any time. If they do revoke participation, the existing data will remain but will be sequestered from circulation, unless required by law.	Patients must be walked through the consent process. To enroll, a patient is to complete an enrollment and authorization form for the exchange or they can enroll directly on the website. Patients need to call the designated hotline to indicate their provider preferences. There is an online enrollment option on the website for CurrentCare Rhode Island along with information on benefits for patients, physicians, hospitals, labs, insurers.	Rhode Island passed the Health Information Exchange Act of 2008, a law designed to provide privacy protections. The law also ensures that participation in the HIE is voluntary for consumers and provider and places restrictions on the use of data. Consumers must consent to enroll in the statewide HIE and can stipulate who has access to their health information. Participation is voluntary and free for both patients and healthcare providers. Health information may only be available in CurrentCare with the consent of the patient. Information may only be released from CurrentCare with the consent of the patient: in an emergency - to a provider in order to provide treatment, or for purposes of public health. **Websites/Publicly Available Resources** http://www.riqi.org/matriarch/MultiPiecePage-8.html http://www.currentcareri.org http://www.commonwealthfund.org/~/media/Files/Publications/Case Study/2010/Dec/1465_Chase_Rhode_Island_quality_inst_case_study.pdf
South Carolina (SC)	South Carolina Health Information Exchange (SCHIEx) (2008)	OPT-OUT	Participation is voluntary. Physicians are to provide patients the option to opt-out of the exchange.	--	Forms are available to complete if patients wish to file a complaint. **Websites/Publicly Available Resources** http://schiex.org http://schiex.org/privacy.php

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South Dakota (SD)	South Dakota Health Link	No Information Available	Information is limited and website is inaccessible.	--	--
Tennessee (TN)	CareSpark (2005-2011)	OPT-OUT	No data is collected for the exchange until the patient is at least minimally educated about the exchange. The board also allowed individual provider organizations to adopt an opt-in protocol where providers can choose to require affirmative consent.	--	Dissolved in 2011 - Tennessee is working to develop a statewide network for health information exchange (HIE) **Websites/Publicly Available Resources** https://www.cgi.com/sites/default/files/pdf/cgi_federal_CareSpark_Mean_Health_Info_Exchange.pdf https://www.healthit.gov/sites/default/files/tennessee_state_hie_profile.pdf
	MidSouth eHealth Alliance (MSeHA) (2004)	OPT-OUT	Patients can opt out at the institutional level. According to a 2012 Healthcare IT News article citing an AMIA evaluation study, 'patients were allowed to opt out of participation in the HIE when they presented at participating hospitals and clinics. The opt-out percentage ranged from 1 percent to 3 percent across all sites over the study period.' Patients have the right to not share their health information in the Alliance, also known as "Opting Out." However, if they choose to opt out, health care providers may not have access to health information that may be important and useful in making choices about their medical care.	A Notice of Privacy Practices is provided to patients by their health care provider. A Fact Sheet is also provided to patients for educational purposes only. Operations of the Alliance and the content of the Fact Sheet may be changed by the Alliance from time to time without notice.	Non-profit initiative focused on the Mid-South region Receives funding from AHRQ and the State of Tennessee with grants totaling $12.5 million. Community-wide information system **Websites/Publicly Available Resources** http://midsoutheha.org http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2656027/ http://www.mfrisse.com/research/midsouth-ehealth-alliance http://www.midsoutheha.org/faq.php http://www.healthcareitnews.com/news/vanderbilt-u-2-million-just-beginning-hie-savings

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Texas (TX)	HIETexas (2013)	Variety of models	HIEs in Texas offer different consent models - ranging from opt-in models to opt-out models and hybrid models. Regardless patients have the ability to opt-out of sharing information via HIE.	--	HIETexas enables HIE infrastructure for the state. Statewide Network, coordinated by the Texas Health Services Authority, to enable HIE-to-HIE connectivity between authorized HIEs in Texas and across the country. **Websites/Publicly Available Resources** http://www.hietexas.org/frequently-asked-questions/faqs http://www.hietexas.org/patients
Utah (UT)	Utah Health Information Network (UHIN) Clinical Health Information Exchange (cHIE)	OPT-OUT	Patients can choose to opt-out of participation in the cHIE. If patients do not participate, the cHIE will not have their current or past medical information. If they have opted out and later decide to have their information included again, they will need to complete a new participation form, and the medical information in the cHIE will only contain health information created after the date of participation.	--	**Websites/Publicly Available Resources** http://www.mychie.org/patients/consent/ http://www.mychie.org/patients/ https://www.uhin.org http://www.deseretnews.com/article/705374661/Utah-rolls-out-first-statewide-health-information-exchange-seeking-patient-consent.html?pg=all

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Vermont (VT)	Vermont Information Technology Leaders (VITL) Vermont Health Information Exchange	OPT-IN	Patients need to sign a consent form to opt-in. If a patient changes their mind they can sign a revocation form. **Vermont is recently considering altering policy for patient consent from opt-in to opt-out. More information at:** http://www.healthcare-informatics.com/blogs/rajiv-leventhal/hie/Vermont-opt-versus-opt-out-hie-debate	When the patient visits his/her health care provider, s/he may be asked to give consent to allow the providers involved in their care access to the Vermont Health Information Exchange. A consent form must be signed. Patient Consent Policy and Links are listed on the website for patients to review. https://www.vitl.net/learn/what-is-patient-consent Vermont lists all privacy and security information on their website as listed: https://www.vitl.net/learn/privacy-and-security	Patients may also request an audit of access of their health information. Information is also listed for providers and how to ask for consent. Scripts are included as well as information on workflow. **Websites/Publicly Available Resources** https://www.vitl.net/asking-patients-consent https://www.vitl.net http://www.healthcare-informatics.com/blogs/rajiv-leventhal/hie/vermont-opt-versus-opt-out-hie-debate
Virginia (VA)	Connect Virginia (2012)	OPT-IN	Information is limited and the website does not connect. Limited information indicates that ConnectVirginia holds an opt-in policy.	--	--

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Washington (WA)	Washington State Health Information Exchange (OneHealthPort) (2012)	No Information Available on Website	Secondary research required	--	OneHealthPort HIE is designated by the State of Washington as the statewide health information exchange. Consortium of founders include: The Everett Clinic, First Choice Health Network, Group Health Cooperative, Premera Blue Cross, Regence BlueShield, The Sisters of Providence and Swedish Hospital OneHealthPort is also responsible for attracting public and private sector stakeholders to invest and participate in the HIE. Oversight and governance is handled by a public-private sector organization. OneHealthPort is a secure portal that opens the door to valuable business and clinical solutions with a single way to sign on to local healthcare sites and online services for healthcare professionals. Created by a coalition of health plans, physicians, and hospitals that joined together to build a community where information could be shared securely and simply. **Websites/Publicly Available Resources** http://www.onehealthport.com/hie http://www.onehealthport.com/Hie_Participants http://www.onehealthport.com/sites/default/files/hie/OneHealthPort_HIE_Background_2016_0.pdf

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West Virginia (WV)	West Virginia Health Information Network (WVHIN) (2012)	OPT-OUT	Participation is automatic and patients become member when they are provided a Patient Notice informing them of their participation. Participation is voluntary and all patients have the right to NOT participate. Patients can opt out by simply stating they do not want their information exchanged through the WVHIN's HIE. Providers will still be able to exchange paper medical records by fax, mail or secure email.	If a patient opts-out but then want to re-enroll, participating health care providers can enroll patients back into the system. Patients must ask their health care provider to give them the WVHIN "Request to Reverse Opt-Out Form". Once they have completed the form and returned it to their health care provider, they will be able to share their health information electronically through the WVHIN's HIE.	WVHIN connects doctors, hospitals, clinics, labs, pharmacies and other health care providers across the State. **Websites/Publicly Available Resources** http://www.wvhin.org/ http://www.wvhin.org/patients/faq/default.aspx#_Toc313604276
Wisconsin (WI)	Wisconsin Statewide Health Information Network (WISHIN) (2010)	OPT-OUT	Patients can choose not to participate, but participation is automatic. To opt out, patients must complete and submit a Patient Choice Form. There are also Opt Out Stipulations to read before filling out the form to understand what will happen if a patient chooses to opt out. It will take up to 3 business days after the opt-out request is received to process.	--	Wisconsin's state-designated entity for HIE. WISHIN is a not-for-profit (Chapter 181) organization appointed as the state-designated entity for governance and implementation of a statewide health information exchange in Wisconsin (2009 Wisconsin Act 274). Founded by four organizations - Wisconsin Hospital Association; Wisconsin Medical Society; Wisconsin Collaborative for Healthcare Quality; Wisconsin Health Information Organization. **Websites/Publicly Available Resources** http://www.wishin.org/ForPatients/PatientChoice.aspx http://www.wishin.org/NewSite/ProductsOLD/WISHINPulse.aspx http://www.wishin.org/Portals/0/Policy/Patient Choice Form.pdf

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Wyoming (WY)	Wyoming e-Health Partnership (2011)	No Information Available	--	--	Non-profit entity designated by the Governor of Wyoming to carry out the strategic and operational plans of the Wyoming HIE. Could not get to the website via Google search or via the link provided by the Wyoming Department of Enterprise Technology Services site listed below: http://ets.wyo.gov/office-of-enterprise-architecture/health-it-enterprise-architecture