The Office of the National Coordinator for Health Information Technology

Data Update: Hospital Adoption of Patient Engagement Functionalities

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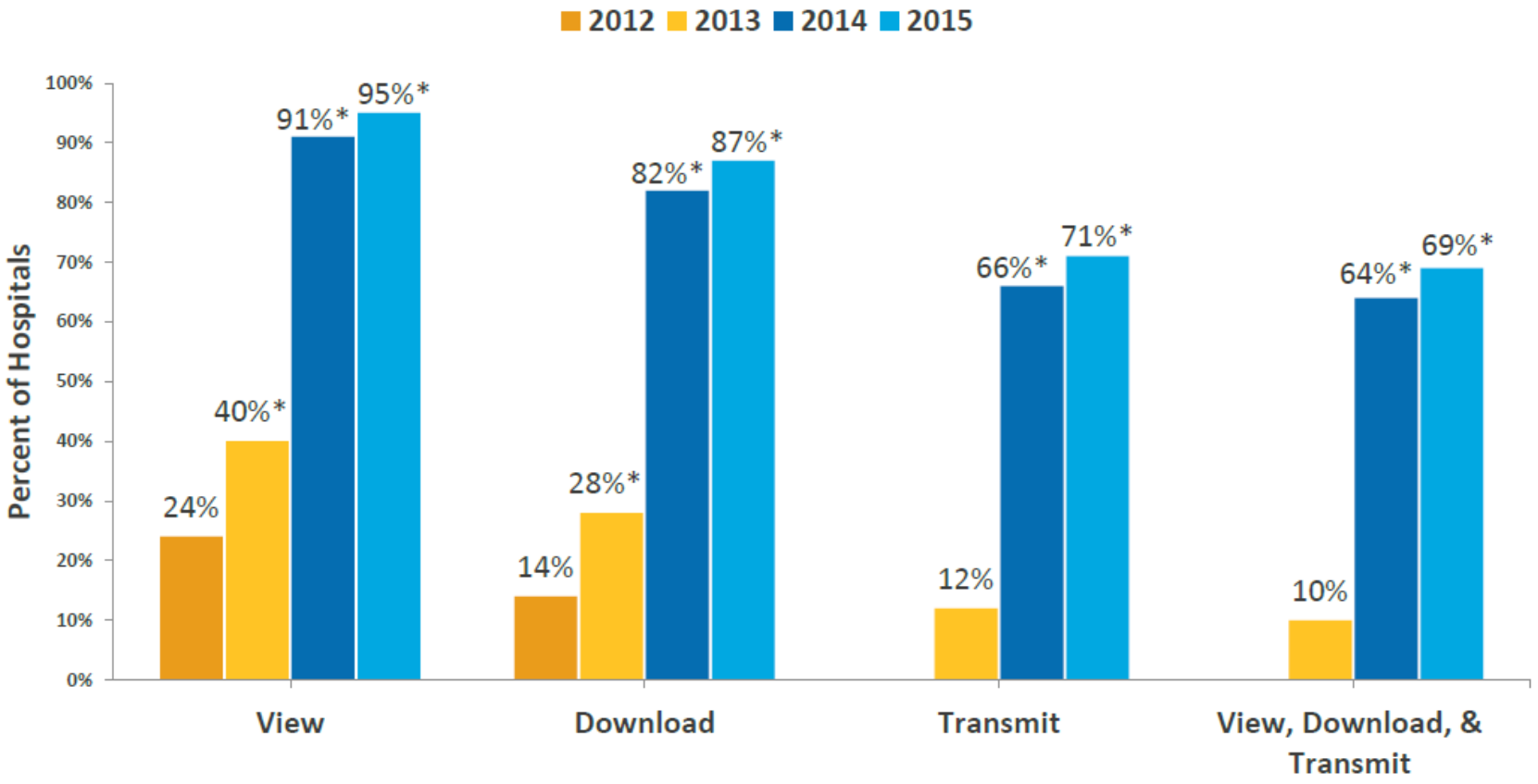
Today's Presentation

- Describe trends in hospital adoption of patient engagement functionalities
- Describe how hospital adoption of view, download, and transmit (VDT) capabilities varies by State and type of hospital
- Results presented today are based upon 2015 American Hospital Association Health IT Supplement Survey
  - Nationally representative survey of hospital CIOs
  - Estimates are weighted to adjust for non-response

Hospital Adoption of Patient Engagement Functionalities

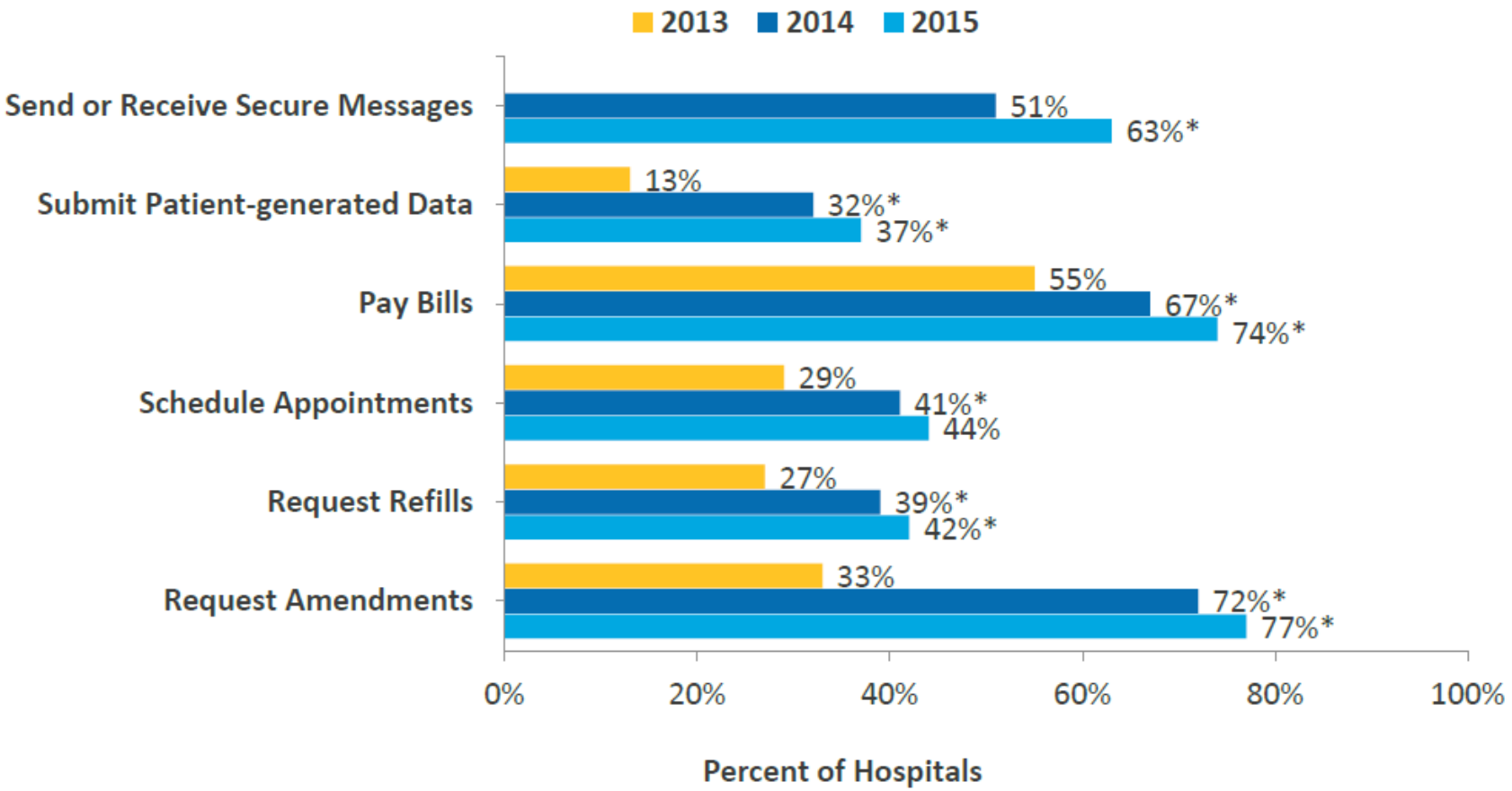
Functionality	Regulation
View, Download, and Transmit (VDT)	Medicare and Medicaid EHR Incentive Programs
Secure messaging	Medicare and Medicaid EHR Incentive Programs
Submit patient generated data	Medicare and Medicaid EHR Incentive Programs
Request amendment to medical record	HIPAA
Pay bills online	NA
Request refills for prescriptions online	NA
Schedule appointments online	NA

Almost seven-fold increase in hospital adoption of VDT capabilities since 2013



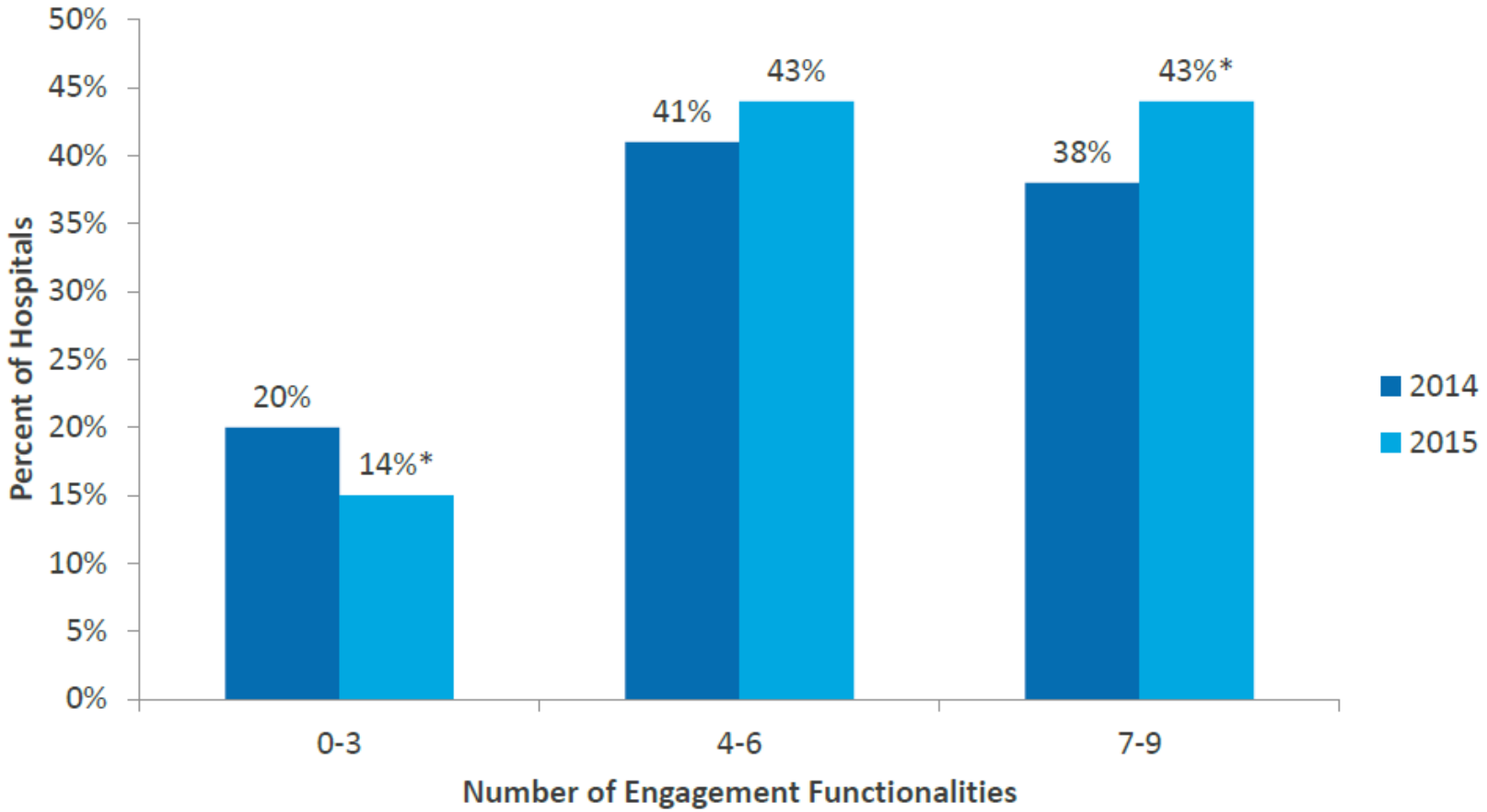
SOURCE: ONC/American Hospital Association (AHA), AHA Annual Survey Information Technology Supplement: 2013 – 2015.
NOTE: *Significantly different from previous year ($p < 0.05$). Data regarding "View, Download, and Transmit" were not collected in 2012.

Significant annual increases in hospital adoption of other electronic patient engagement capabilities



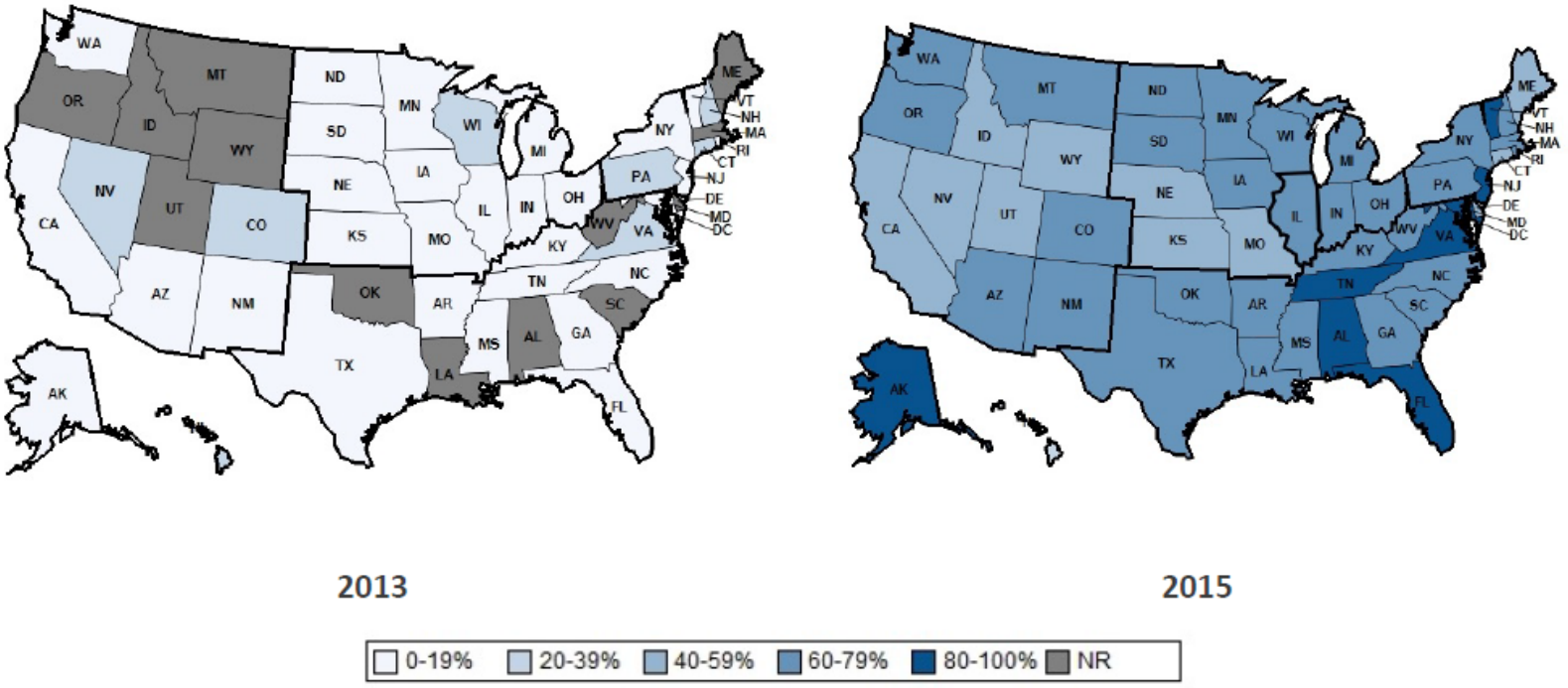
SOURCE: ONC/AHA, AHA Annual Survey Information Technology Supplements: 2013-2015.
NOTES: Questions regarding secure messaging were not asked in 2013.
*Significantly different from previous year ($p < 0.05$).

Significant increase in hospitals' adopting a greater number of patient engagement capabilities between 2014 and 2015



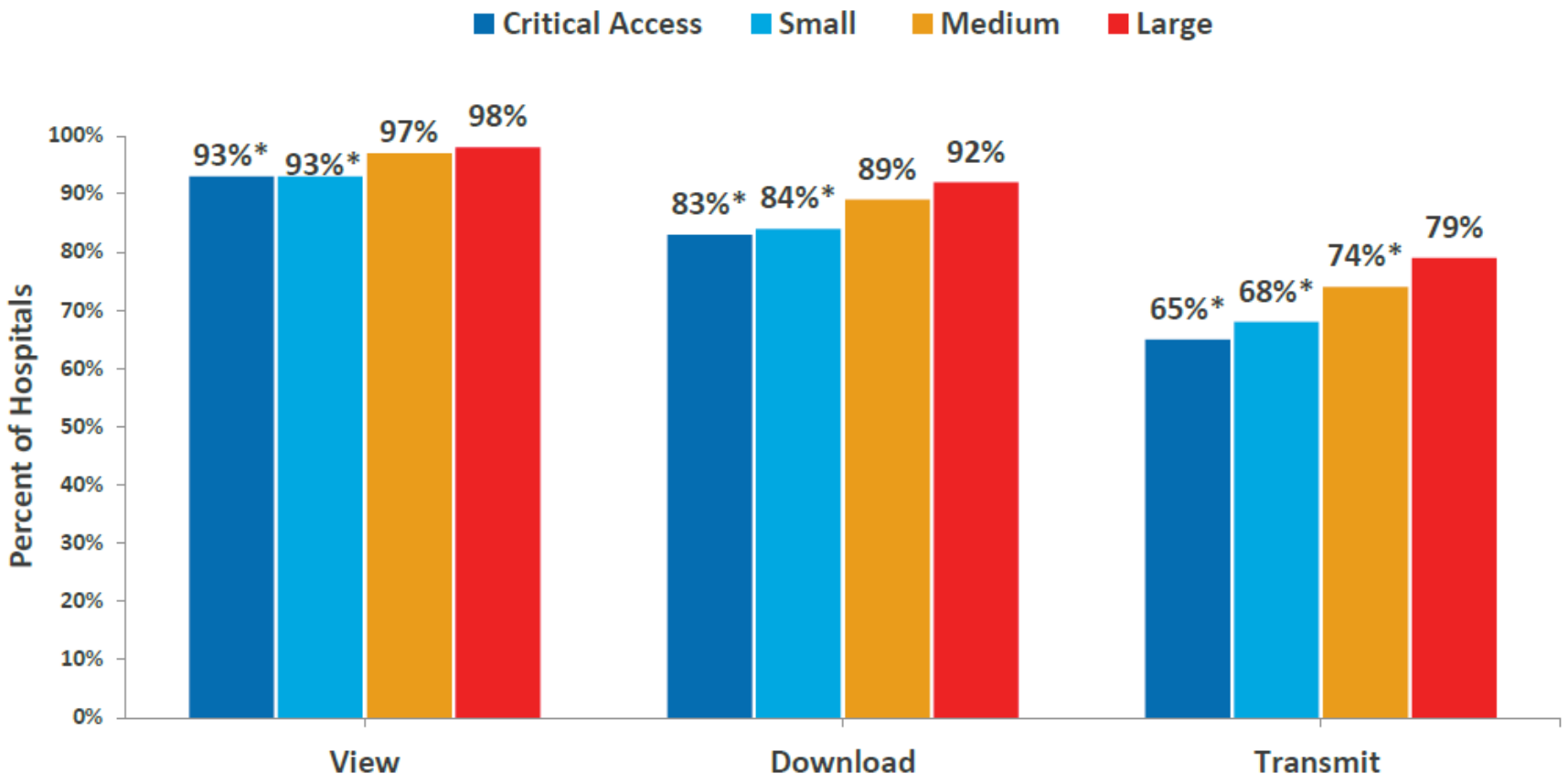
SOURCE: ONC/AHA, AHA Annual Survey Information Technology Supplement: 2015.
NOTES: Patient engagement activities include: view, download, transmit, request amend, request refill, schedule appointment, pay bills, submit patient data, and send secure messages.
*Significantly different from previous year ($p < 0.05$).

At the State-level, the percent of hospitals with VDT capability has spread nationwide between 2013 and 2015



SOURCE: ONC/AHA, AHA Annual Survey Information Technology Supplement: 2013-2015.
NOTES: Estimates for states shaded gray did not meet the standards for reliability (NR=not reliable).

Compared to larger hospitals, CAHs and small hospitals lag behind in adoption of VDT capabilities



SOURCE: ONC/AHA, AHA Annual Survey Information Technology Supplement: 2015.
NOTES: *Significantly different from large hospitals ($p < 0.05$). Hospital size is based on the number of beds: large=400 or more; medium=between 399 and 100; and small=less than 100. Critical Access is a special designation for certain small hospitals by the CMS.

Key Takeaways

- Nationally, hospital adoption of patient engagement capabilities significantly increased.
- The number of States where a majority of hospitals possess view, download, and transmit capabilities dramatically increased since 2013.
- Critical Access Hospitals and small hospitals lag behind large hospitals in possessing VDT capabilities.

Policy Implications

- Growth in hospitals' adoption of VDT capabilities is likely associated with Medicare and Medicaid EHR Incentive Programs and adoption of certified EHR technology.
- Rural and smaller hospitals' lower rates of VDT capabilities reflect lower rates of certified EHR technology adoption, and will require continued monitoring.
- To increase usage of these capabilities, it will be important to make it easy for individuals to access, aggregate, and subsequently use their health information. Examples of relevant ONC initiatives include:
  - **Patient Engagement Playbook**
  - **Consumer Health Data Aggregator Challenge**
  - **Blue Button Connector**

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Questions/comments?

Health IT Dashboard, data brief #38 http://dashboard.healthit.gov/, for more details.

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