

**“Overcoming Barriers to Expanded Health Information Exchange (HIE) Participation in Indiana”**

AHRQ, through its contractor, the Regenstrief Institute at Indiana University, proposes to assess the barriers to participation in health information exchange (HIE) in Indiana. The Regenstrief Institute will use its experience to date working with a variety of organizations to establish specific barriers to engagement in HIE cited by stakeholders, define the barriers and evaluate them.

**The Regenstrief Institute will develop and implement a questionnaire and survey process to identify barriers that may exist throughout the State of Indiana to participation in the Indiana Network of Patient Care (INPC).** The INPC is a local health information infrastructure that includes information from five major hospital systems (fifteen separate hospitals), the county and State public health departments, and Indiana Medicaid and RxHub. The INPC began operation seven years ago and is one of the first examples of a local health information infrastructure. This research will elicit and aggregate feedback from large and small physician groups, as well as hospitals, throughout the State of Indiana.

**The goal is to identify the gaps in understanding, barriers and disconnects that may exist with providers’ adoption of, and membership in, the INPC.** The relationship between the stakeholders involved in the Indiana HIE is governed by a contract between the participants. The Regenstrief Institute, acting on behalf of the participants, created and operates the exchange, including serving as the custodian of the data. The Regenstrief Institute will survey three key stakeholder groups in the State of Indiana: small hospitals, small physician practices (less than 5 providers) and large physician practices (greater than 20 providers) to identify barriers for each of these groups to participate in a HIE in general, and specifically the INPC. It is difficult to predict the barriers that will be identified, but based on their experience to date, **anecdotal evidence suggests that the cost of interfaces and the management attention needed to participate will be the two major barriers.** The findings will be used to create approaches to engage specific entities to participate in their statewide HIE.

This project is being conducted pursuant to AHRQ’s statutory mandates to conduct and support research, evaluations and initiatives to advance information systems for health care improvement and to promote innovations in evidence-based health care practices and technologies by conducting and supporting research on the development, diffusion, and use of health care technology.

## **Phone Interview Guide**

- When discussing HIE, it will be used as a noun for an organization (i.e., IHIE)
- Review the reason for the survey. Grant to determine barriers to implementation and how to overcome them.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Form Approved: OMB Number 0935-XXXX Exp. Date xx/xx/20xx. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

## Blue Text: notes for Interviewer

Form Approved  
OMB No. 0935-XXXX  
Exp. Date XX/XX/20XX

- Reassure interviewee that this survey is not a marketing ploy and they will not receive a call from anyone.
- If a physician, ask for hospital affiliation.
- **Review the results of the Web-Based Survey responses regarding the participation types and vendors.**
  - a. If unfamiliar with HIE, review the email/information sent and answer any questions
  - b. Hit the high points and anything that stands out.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Form Approved: OMB Number 0935-XXXX Exp. Date xx/xx/20xx. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

**Blue Text: notes for Interviewer**

**• If your organization were to authorize participation in a health information exchange who would be involved?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

**a. Has this always been the case (not the people, but the title - who's involved)?**

- Yes
- No

**▪ Decision making?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

**▪ Selection process?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

**▪ Implementation process?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

**▪ Financial Approval?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

**▪ Legal Contracting?**

- |                              |                                                 |                                             |                                              |
|------------------------------|-------------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CIO | <input type="checkbox"/> Director of Technology | <input type="checkbox"/> Practice Manager   | <input type="checkbox"/> Administrative Team |
| <input type="checkbox"/> CFO | <input type="checkbox"/> IT Manager             | <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> CMO | <input type="checkbox"/> IT Team                | <input type="checkbox"/> Physicians         | _____                                        |

Comments:

**HIE Participants**

- **Were you directly or indirectly involved in the decision to participate in the health information exchange that your organization currently participates in?**

- Yes (how?)
- No (why not?)

Comments:

- **How long has your organization been participating in a health information exchange?**

Type of HIE	Vendor/Role (participant/user, contributor/member, both)	Years	Months

Ask about any upcoming plans and timelines for additional participation.

- **Would you recommend to peers in similar organizations that they participate in a health information exchange? If so, what type of services?**

- Yes
- No

Comments:

a. Do you have an avenue to speak with your peers (advisory group, etc.)? If so, what?

b. Would the exchange better fit a smaller or larger organization?

- Smaller Organization
- Larger Organization

Comments:

- **Would you make modifications to the healthcare information exchange that you participate in?**

(if there were no financial limitations, current participating services)

**Blue Text: notes for Interviewer**

- Yes
- No

Comments: (If yes, what modifications would you make? If no, why not?):

- **Would you like other types of services to be offered from a health information exchange?**

(if there were no financial limitations, services with no access)

- Yes
- No

Comments:

- **If you had the opportunity, would you recommend to your organization to participate in a health information exchange again and why?**

- Yes
- No

Why?

Comments:

a. Was the selection and implementation process smooth?

- Yes
- No

Comments:

b. Do you feel your vendor worked well with your organization?

- Yes
- No

Comments:

c. Do the services meet your needs, and those of your organization?

- Yes
- No

Comments:

**Blue Text: notes for Interviewer**

## HIE Non-Participants

- **Do you think there could be benefits or value to participating in a health information exchange for your organization? (do not pry or “promote”)**

- Yes
- No

Comments:

- **If yes, what benefits do you think there could be from a healthcare information exchange for your organization?**

- |                                                |                                            |                                                    |                                 |
|------------------------------------------------|--------------------------------------------|----------------------------------------------------|---------------------------------|
| <input type="checkbox"/> Access to Pt. Records | <input type="checkbox"/> Reduced Delays    | <input type="checkbox"/> Increased Quality of Care | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Access to Lab Results | <input type="checkbox"/> Reduced Costs     | <input type="checkbox"/> Increased Efficiency      | <input type="checkbox"/>        |
| <input type="checkbox"/> Streamline Processes  | <input type="checkbox"/> Reduce Admin Time | <input type="checkbox"/> Reduce Malpractice        |                                 |

- **For your staff and their daily job activities?**

- |                                                |                                            |                                                    |                                 |
|------------------------------------------------|--------------------------------------------|----------------------------------------------------|---------------------------------|
| <input type="checkbox"/> Access to Pt. Records | <input type="checkbox"/> Reduced Delays    | <input type="checkbox"/> Increased Quality of Care | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Access to Lab Results | <input type="checkbox"/> Reduced Costs     | <input type="checkbox"/> Increased Efficiency      | <input type="checkbox"/>        |
| <input type="checkbox"/> Streamline Processes  | <input type="checkbox"/> Reduce Admin Time | <input type="checkbox"/> Reduce Malpractice        |                                 |

- **Would you recommend that your organization participate in a health information exchange?**

- Yes
- No

Why/Why Not?

Comments:

If they previously made such a recommendation and been rejected, find out why.

- **What are some of the barriers that you feel would (or have) prohibit(ed) your organization from participating in a health information exchange? (provide a list?)**

- |                                              |                                                 |                                                   |
|----------------------------------------------|-------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Investment Costs    | <input type="checkbox"/> Personal Time          | <input type="checkbox"/> Staff Not Accepting      |
| <input type="checkbox"/> Bandwidth Capacity  | <input type="checkbox"/> Privacy/HIPAA Concerns | <input type="checkbox"/> Physicians Not Accepting |
| <input type="checkbox"/> Leadership Turnover | <input type="checkbox"/> IT Support             | <input type="checkbox"/> Implementation           |

**Blue Text: notes for Interviewer**

No ROI

Awareness of  
Availability

Not Strategically  
Important

Not Practical with  
Practice

Knowledge

Other:

Other:

Get list and then prioritize the top 3.