**Attachment A**

Changes to 2018-2020 NHAMCS Electronic Health Record (EHR) Questions

Modifications are in red. Each row represents a change proposed for 2019-2020.

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| --- | --- | --- |
| **Modification Number** | **Modification Type** | **2019-2020** |
|  | Modified from being a sub-question to a stand-alone questions | **RECSHARE: Does your hospital share its electronic health records system with any other hospital?**  1=’Yes’  2=’No’  3=’Unknown’ |
|  | Added | **NUMSHARE: If yes, how many other hospitals <specify number>** |
|  | Removed | **EBILLRECE: Now I would like to ask you some questions about your ED.**  **If ESAs within the ED vary with respect to their use of the EHR/EMR systems, then ask these questions of the ESA with the largest number of expected visits during the reporting period.**  **Does your ED submit any CLAIMS electronically (electronic billing)?**  1=’Yes’  2=’No’  3=’Unknown’ |
|  | Removed | **EDEMOGE: Indicate whether your ED has each of the following computerized capabilities and how often these capabilities are used - Recording patient history and demographic information?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EPROLSTE: Does this include a patient problem list?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EPNOTESE: Recording clinical notes?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EMEDALGE: Recording patient's medications and allergies?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EMEDIDE: Reconciling lists of patient’s medications to identify the most accurate list?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EREMINDE: Providing reminders for guideline-based interventions or screening tests?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ECPOEE: Ordering prescriptions?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ESCRIPE: Are prescriptions sent electronically to the pharmacy?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EWARNE: Are warnings of drug interactions or contraindications provided?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ECONTRBUE: Do you prescribe controlled substances?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ECONTRSUBSE: Are prescriptions for controlled substances sent electronically to the pharmacy?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ECTOEE: Ordering lab tests?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ERESULTE: Viewing lab results?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ERADIE: Ordering radiology tests?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EIMGRESE: Viewing imaging results?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EIDPTE: Identifying patients due for preventive or follow-up care in order to send patients reminders?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EGENLISTE: Generating list of patients with particular health conditions?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EDATAREPE: Providing data to create reports on clinical care measures for patients with specific chronic conditions (e.g., HbA1C for diabetics)**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ESUME: Providing patients with clinical summaries for each visit?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EMSGE: Exchanging secure messages with patients?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ESHAREE: Does your hospital share any patient health information electronically?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ESHARESE: Do you electronically send patient health information to another provider whose EHR system is different from your own?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **ESHARERE: Do you electronically receive patient health information to another provider whose EHR system is different from your own?**  1='Yes'  2='No'  3='Unknown' |
|  | Removed | **EDISCHSRE: Do you electronically send or receive hospital discharge summaries to or from providers outside of your medical organization? *Mark all that apply***  1=’Send electronically’  2=’Receive electronically’  3=’Do not send electronically’ |
|  | Removed | **EEDSRE: Do you electronically send or receive dept. notifications to or from providers outside of your medical organization? *Mark all that apply***  1=’Send electronically’  2=’Receive electronically’  3=’Do not send electronically’ |
|  | Removed | **ESUMCSRE: Do you electronically send or receive summary of care records for transitions of care or referrals to and from providers outside of your medical organization? *Mark all that apply***  1=’Send electronically’  2=’Receive electronically’  3=’Do not send electronically’ |
|  | Removed | **PTONLINEE: Can patients seen at the reporting location do the following online activities? *Mark all that apply***  1=’View their medical records online’  2=’Download and transmit health information from the electronic medical record to their personal files’  3=’Request corrections to their electronic medical record’  4=’Enter their health information online (e.g., weight, symptoms)’  5=’Upload their data from self-monitoring devices (e.g., blood glucose readings)’  6=’None of the above’ |