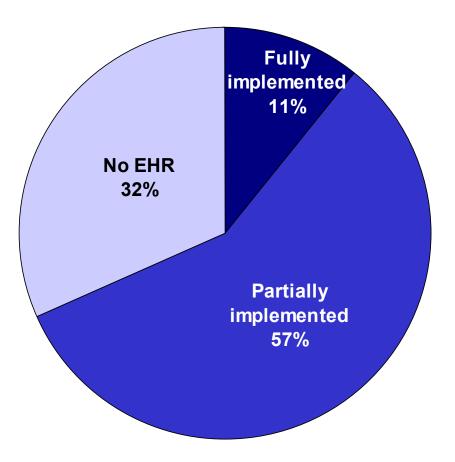
More than two-thirds of hospitals had fully or partially implemented EHRs

Percent of hospitals reporting EHRs*, 2006



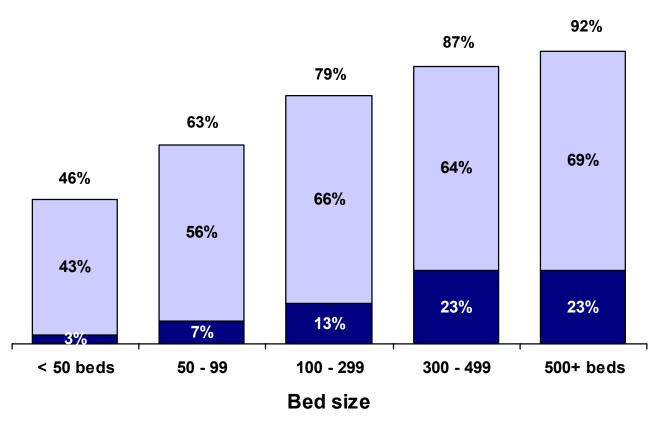
An EHR integrates electronically originated and maintained patient-level clinical health information, derived from multiple sources, into one point of access. An EHR replaces the paper medical record as the primary source of patient information.



*Note: This question was first asked in 2006. No trend data are available.

Larger hospitals more likely to have EHRs than smaller hospitals

Percent of hospitals reporting EHRs by bed size, 2006

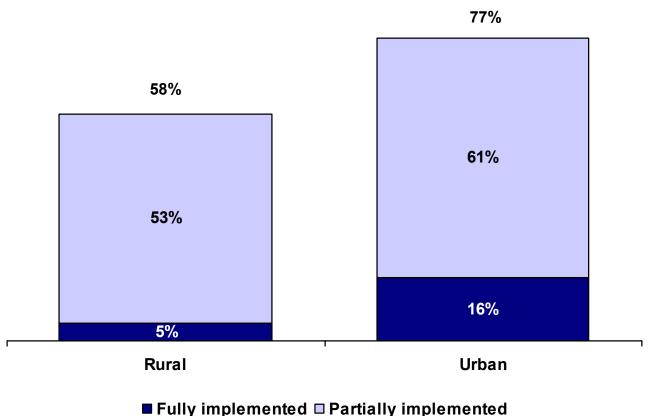


■ Fully implemented □ Partially implemented



Urban hospitals more likely to have EHRs than their rural counterparts

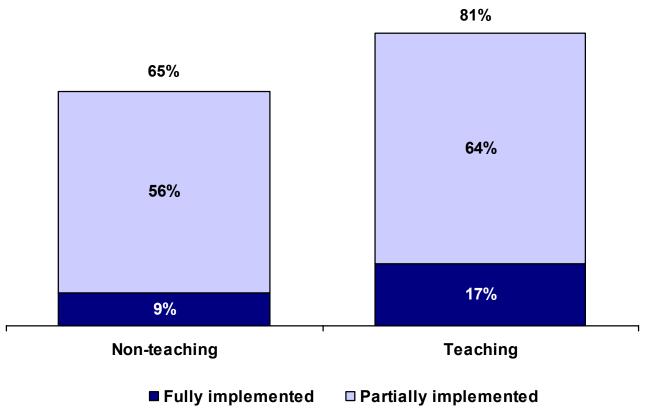
Percent of hospitals reporting EHRs by location, 2006





Teaching hospitals more likely to have EHRs than their non-teaching counterparts

Percent of hospitals reporting EHRs by teaching status, 2006

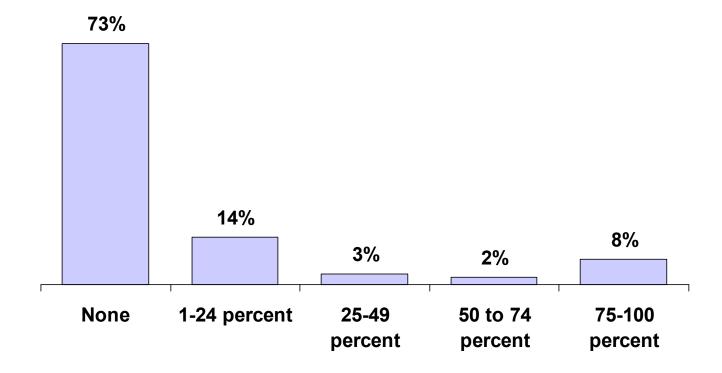




In 10 percent of hospitals, more than half of treating physicians routinely ordered medications electronically

Share of physicians ordering medications electronically, 2006

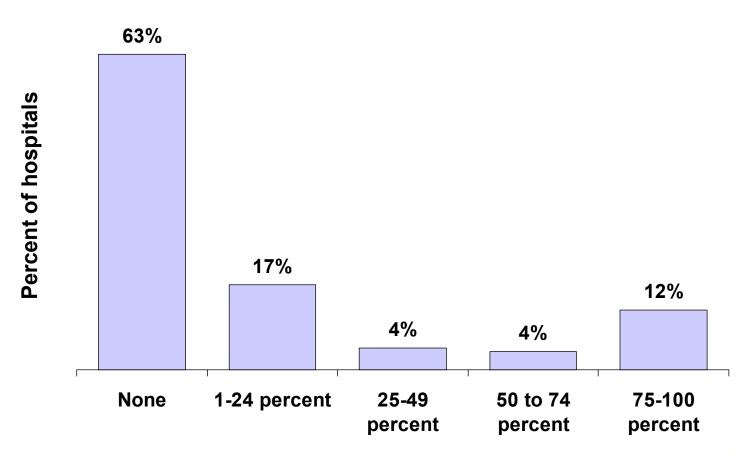






In 16 percent of hospitals, more than half of treating physicians routinely ordered tests electronically

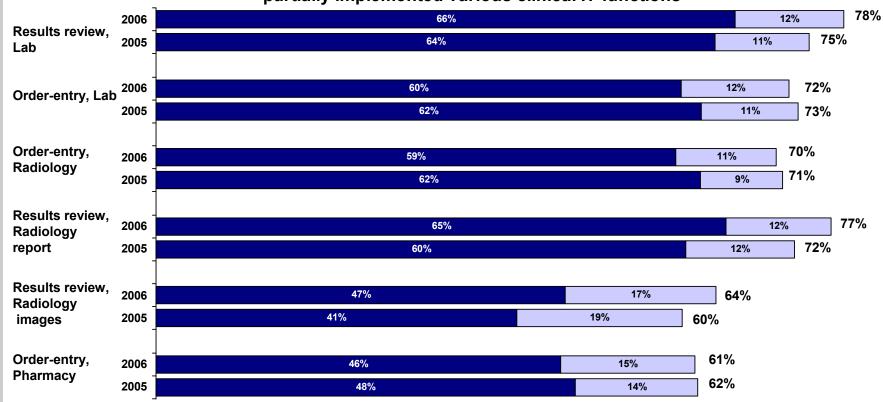
Share of physicians ordering tests electronically, 2006





Hospitals used many electronic laboratory, radiology, and pharmacy functions



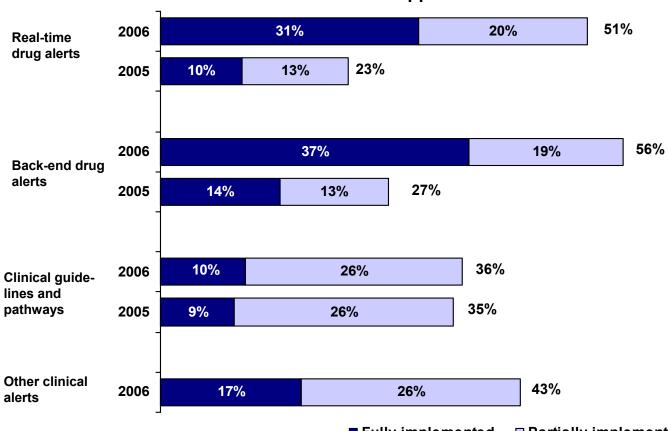


■ Fully implemented □ Partially implemented



Hospitals increased use of decision-support functions

Percent of hospitals reporting that they have fully or partially implemented various decision-support functions

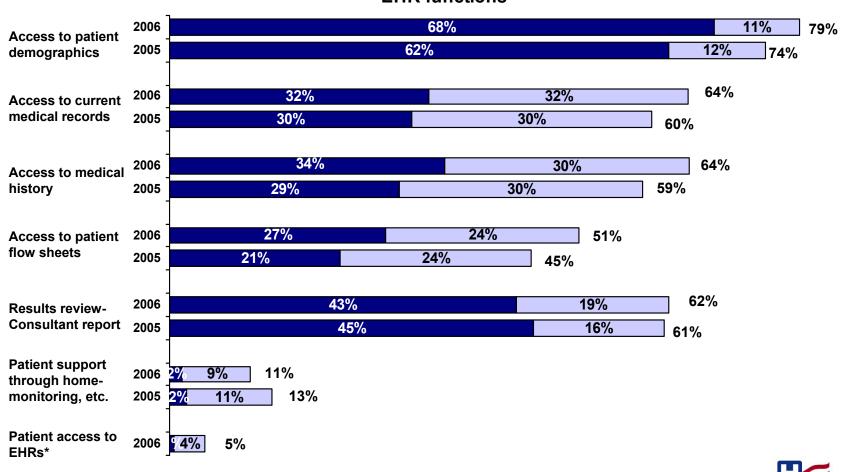






Hospitals increased use of electronic record management functions

Percent of hospitals reporting that they had fully or partially implemented various EHR functions



■ Fully implemented □ Partially implemented





Spectrum of health IT use

Level	of
Use)

Getting <u>Starting</u>	<u>Low</u>	<u>Moderate</u>	<u>High</u>
0-3 Functions	4-7 Functions	8-11 Functions	12-15 Functions
(0-25%)	(26-50%)	(51-75%)	(76-100%)
Fully Implemented	Fully Implemented	Fully Implemented	Fully Implemented

Functions

- Access to medical history Access to patient flow sheets Access to patient demographics
- Order-entry lab
- •Results review lab

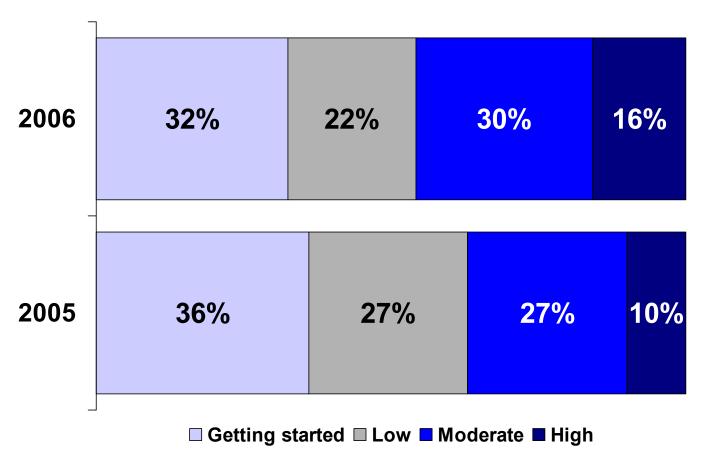
- •Access to current medical records •Order-entry radiology
 - •Results review radiology images (incl. PACS)
 - •Results review radiology report
 - •Results review consultant report
 - •Order-entry pharmacy

- •Real time drug interaction alerts
- •Back-end drug interaction alerts
- Clinical guidelines and pathways
- Patient support through home monitoring, self-testing, and interactive patient education



Hospitals used more health IT in 2006

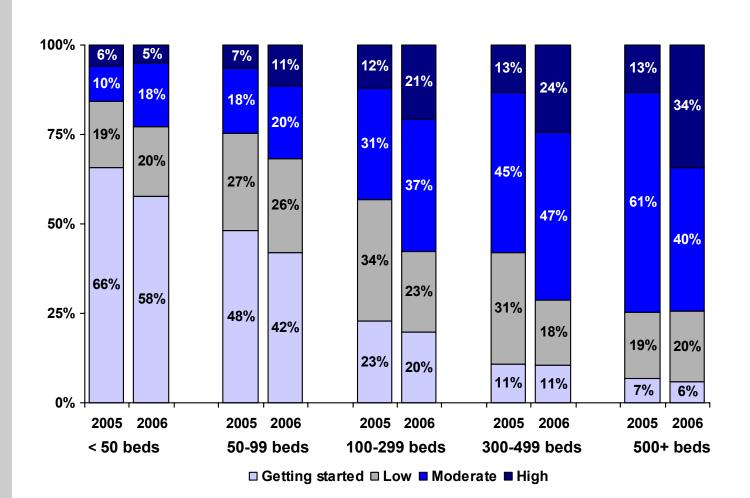






Larger hospitals used more health IT and saw greater growth from 2005 to 2006

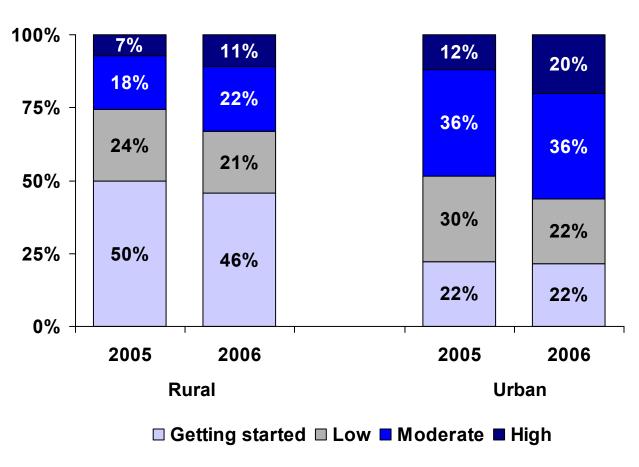
Distribution of hospitals across levels of health IT use by bed size





Urban hospitals used more health IT than rural hospitals, but both groups increased use

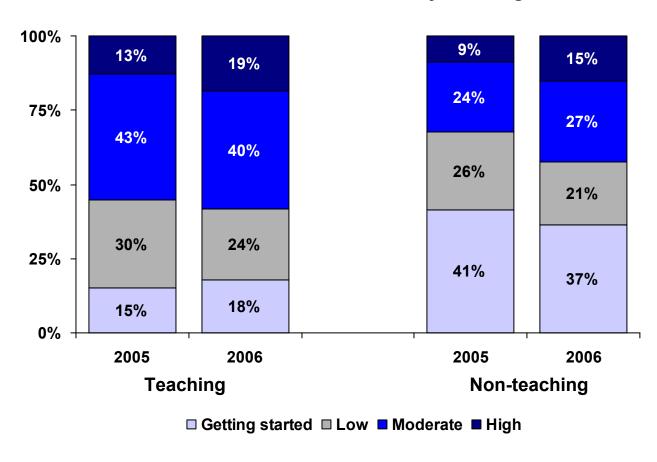






Teaching hospitals used more health IT than nonteaching hospitals, but both groups increased use

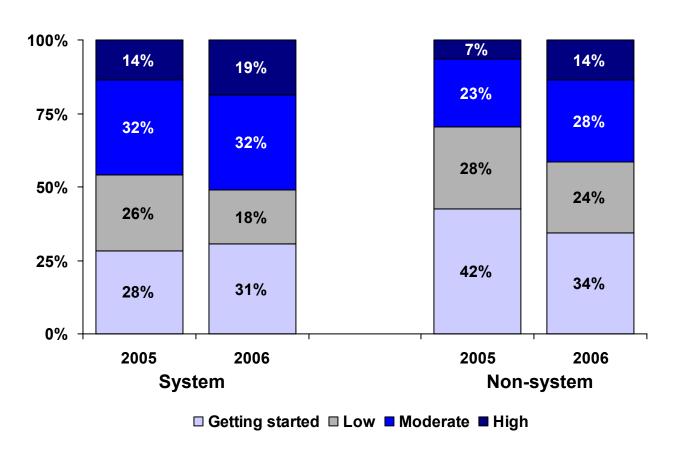
Level of health IT use by teaching status





Hospitals that were members of systems used more health IT than those that were not, but both groups increased use

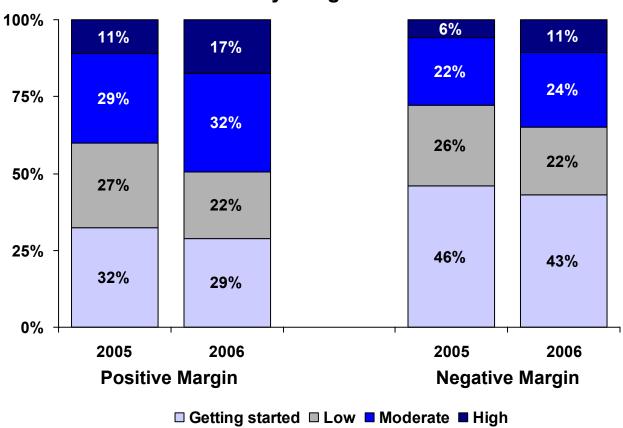
Level of health IT use by system status





Hospitals with positive margins used more health IT in both 2005 and 2006



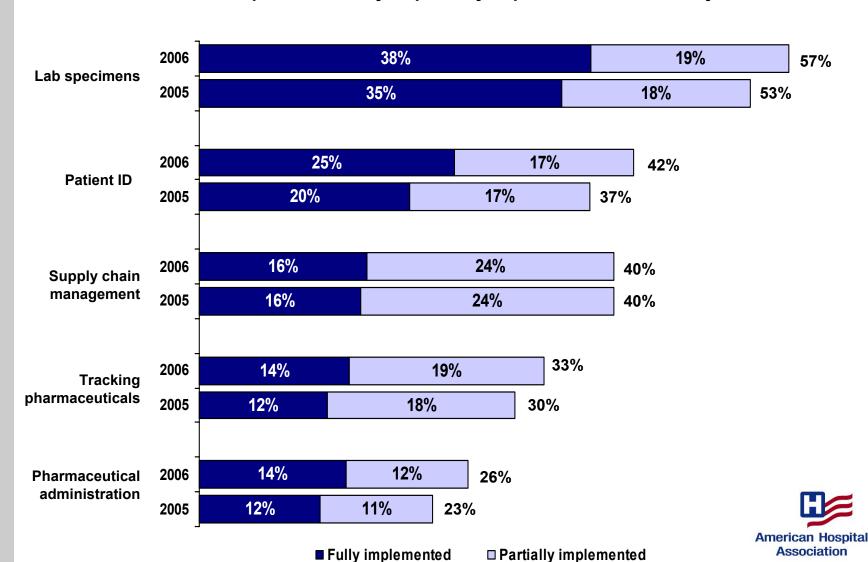






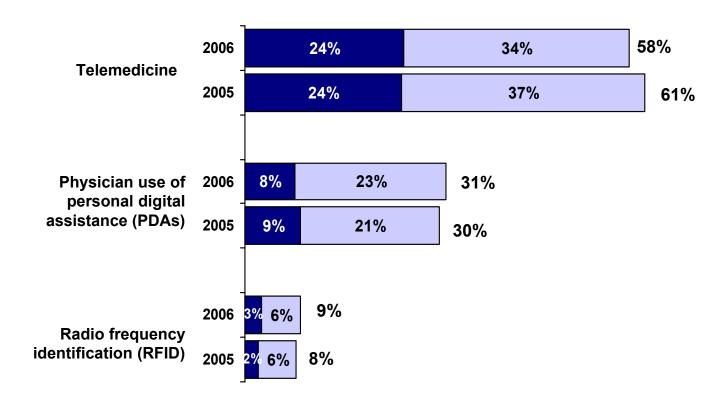
Hospitals increased use of bar-coding

Percent of hospitals with fully or partially implemented bar-code systems



Hospitals adopting telemedicine and other technologies

Percent of hospitals with fully or partially implemented systems

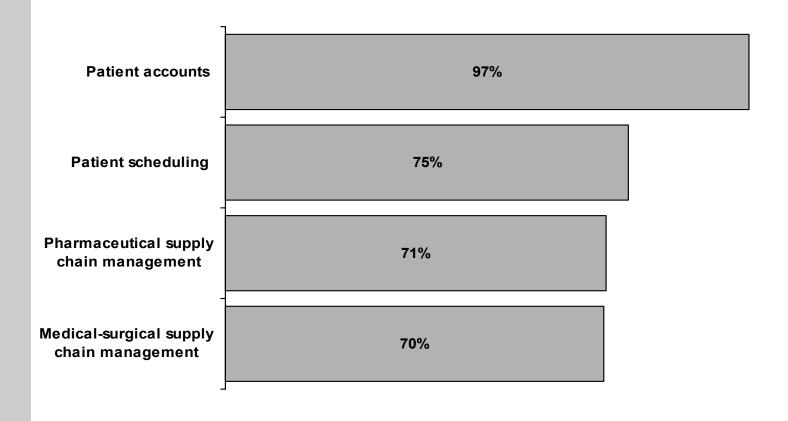


■ Fully implemented □ Partially implemented



Hospitals using administrative systems

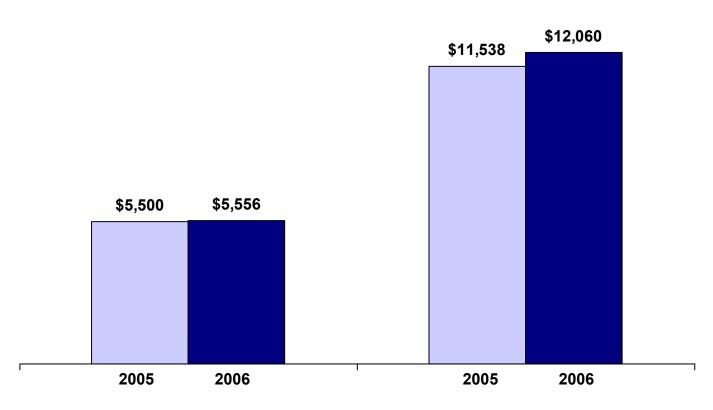
Percent of hospitals with administrative systems, 2006





Spending on health IT is high and increasing

Median one-year spending per bed



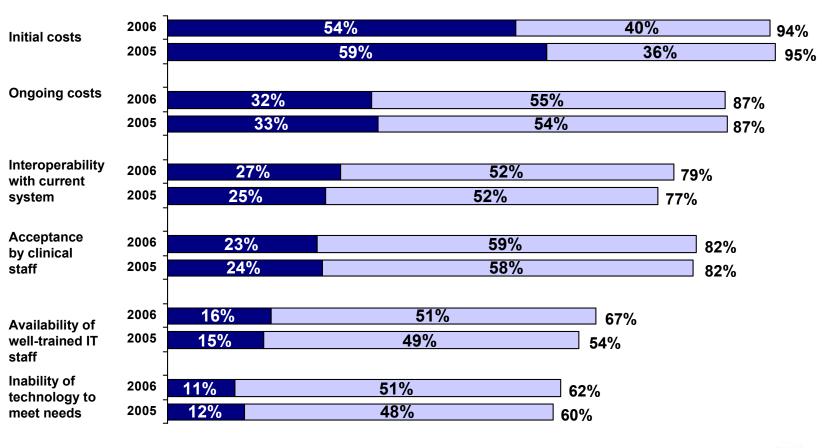
Capital spending

Operating costs



Hospitals continued to report cost as greatest barrier to IT adoption

Percent of hospitals indicating barrier is a "significant barrier" or "somewhat of a barrier"



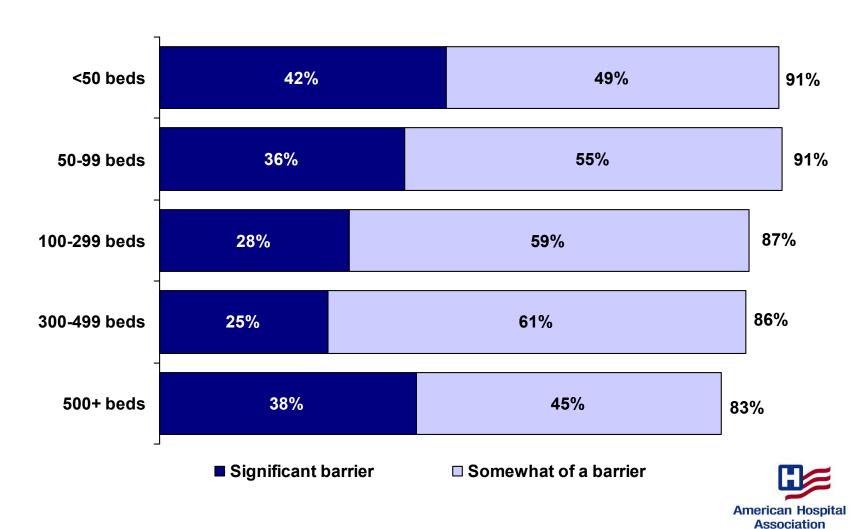


Somewhat of a barrier



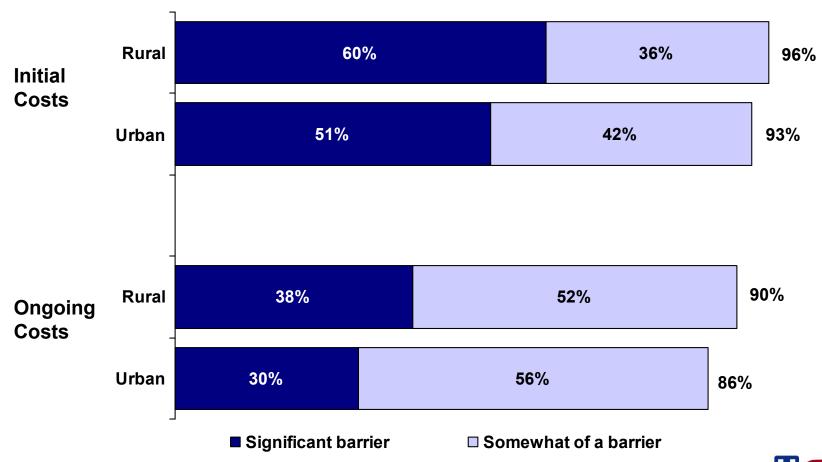
While a barrier for all, smallest hospitals were most likely to see ongoing costs as significant barrier

Percent of hospitals indicating ongoing costs are a "significant barrier" or "somewhat of a barrier" by size, 2006



Rural hospitals more likely to see costs as significant barrier

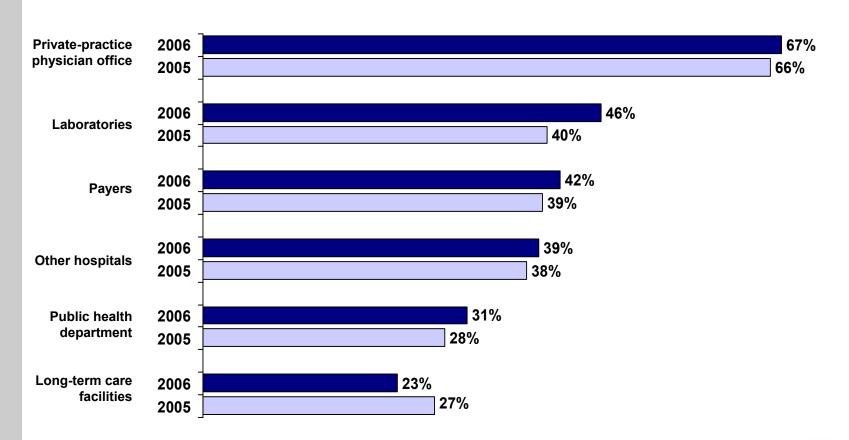
Percent of hospitals indicating ongoing costs are a "significant barrier" or "somewhat of a barrier" by location, 2006





Hospitals most commonly shared electronic patient information with physician offices

Most commonly reported organizations for sharing of electronic patient health care information among hospitals that shared data





Comparison of sample to universe

Characteristic	Universe (%)	Sample (%)
Bed size		
Under 50 beds	28.4	29.1
50 to 99 beds	20.3	18.6
100 to 299 beds	35.4	33.0
300 to 499 beds	11.0	12.6
500+ beds	4.9	6.7
Location		
Urban	59.3	53.5
Rural	40.7	46.5
Teaching status		
Non-teaching	78.3	80.4
Teaching	21.7	19.6

Note: Universe includes all 4,936 community hospitals in the 2005 AHA Annual Survey. Sample includes 1,543 community hospitals responding to the 2006 AHA Health IT Survey.



Comparison of sample to universe (2)

Characteristic	Universe (%)	Sample (%)
Region		
New England	4.2	5.0
Middle Atlantic	9.6	11.6
South Atlantic	15.1	13.2
East North Central	15.1	14.5
East South Central	8.9	7.7
West North Central	13.7	18.7
West South Central	15.0	12.8
Mountain	7.4	7.6
Pacific	11.1	8.6
Ownership		
Non-profit	59.9	62.5
Investor owned	17.6	9.7
State/local government	22.5	27.7
System Membership		
Member	55.0	41.7
Non-member	45.0	58.3

