

PA eHealth Collaborative Lab Survey Results

The PA eHealth Collaborative conducted a phone survey of independent and critical care hospital-associated labs operating in the Commonwealth of Pennsylvania to determine whether or not they are currently electronically transmitting lab results, and if they are, what standards they are using. Respondents indicating that they are not using electronic records were asked why not. In all cases, the collaborative also asked whether respondents were familiar with HIE. The survey was conducted in early 2012. This document summarizes the findings.

Summary of Findings

Of the 516 total labs included in the survey, 93% (480) responded.

80% (384) of the responding labs stated that they are electronically exchanging lab results, with another 7% (34) planning to do so in the future.

Only 13% of the 480 are not planning to electronically exchange, and only a very small portion of those have based their decision on reasons of resource availability or IT knowledge. Only 23% of those responding who said they had no plans to exchange believed they could be swayed by an incentive program.

Most of the responding labs who are exchanging information are using either a Web portal or a hub, but a few of the responding labs are using point-to-point exchange, and most labs have more than one delivery method available to them. The vast majority (94%) of currently exchanging labs are using HL7, while relatively smaller numbers are using SNOMED CT (26%) or LOINC (37%).

Most of the responding labs (62%) state that they are not familiar with HIE.

Study Population Breakdown

All 503 labs identified as independent labs per the CLIA database from the Center for Disease Control were included, in addition to 13 critical care hospital-associated labs. All 13 hospitals and 467 of the independent labs responded to our survey, totaling 480 respondents.

Percentage Electronically Exchanging Lab Results

80% of all surveyed labs (383/480) are electronically exchanging lab results. This includes 69% of the critical care hospitals and 80% of the independent compliance labs.

Delivery Method

Those who are electronically exchanging were then asked what delivery mechanisms they are using. 87% (335/383) are using a hub, 78% (297/383) use a Web portal, and 19% (72/383) use point-to-point communications. Please note that these numbers total more than 100% because they are not exclusive. Most labs (64%) are using two of the above methods, while only 27% are using only a single delivery method and 9% are using all three.

Standards and Vocabularies

We then asked those who are exchanging whether or not they are using the HL7 standard. 94% (361/383) said they are using HL7. When provided a list of vocabularies, 26% (98/383) are using SNOMED CT, and 37% (143/383) are using LOINC. No participating labs reported using either UCUM or OID.

Respondents Planning to Go Electronic

37% (36/97) of those labs who are not currently exchanging electronically plan to begin doing so at some point in the future. Among those, 31% (11/36) plan to go electronic with the next six months, while 33% (12/36) have plans for 7-12 months, and 36% (13/36) have plans later than that.

Respondents Not Yet Planning to Go Electronic

There remain 61 labs, or 13% of all 480 respondents, who stated that they had no intention of moving to electronic exchange of lab results. This group was asked the reasons for this decision.

The most common response, 59% (36/61) was that they had no interest. 34% (21/61) stated that they had no plans due to cost/budget concerns, 10% (6/61) said that the providers they work with are not interested. Only a few providers stated that their reluctance was based upon a lack of IT experience or resources (5%), or that they believed it would be too complicated (2%). Several labs provided other reasoning, most frequently concerns about the privacy and security of electronic transactions. These percentages total more than 100% because respondents were permitted to select more than one reason.

Labs with no plans to electronically exchange information were also asked whether or not an incentive would change their minds, and only 23% (14/61) said that it would.

Respondents Familiar with HIE

Finally, all labs were asked whether they were familiar with health information exchange efforts at the state or federal level. Only 38% (183/480) stated that they were.

Next Steps:

1. Maintain communications and outreach to those labs with intent to go electronic to encourage progress and help overcome obstacles that would delay those plans.
2. Reach out to the labs who say that they may be encouraged to go electronic via incentives offering resources such as the DIRECT grant program.
3. Conduct follow-up survey in one year to evaluate change and to ensure there has been no abandonment of electronic exchange by those who have already adopted.