National Association of Community Health Centers, Inc.

Iowa
Number (Percent) of Responding Health Centers*: 7 (88%)

Acquisition and Use of Electronic Health Information

Percent reporting that they **submit claims electronically**:
- 86% Yes
- 14% No
- 0% Don't Know

Percent reporting that they **use Electronic Medical Records** (EMRs):
- 0% Yes, all electronic
- 0% Yes, part paper and part electronic
- 100% No

Percent reporting that they **plan to install a new EMR system or replace the current system** within the next 3 years:
- 57% Yes
- 14% No
- 29% Maybe
- 0% Don't Know

Percent reporting that have **more than one primary care delivery site**:   57%
- Of these, percent reporting the capacity their other sites have on average:
  - Less capacity than primary site: 50%
  - About the same capacity: 50%
  - Greater capacity: 0%

Percent reporting that they maintain any **disease-specific patient registries** (e.g., depression, diabetes, asthma): 86%
Percent reporting that they maintain any patient registries as part of HRSA's **Health Disparities Collaboratives**: 86%

Barriers to Adopting Electronic Medical Records (EMRs)

Respondents Rate the **Importance of Select Barriers** to Implementing an EMR at Their Health Center	Not at all Important	Somewhat Important	Important	Very Important
Unable to integrate the EMR with practice's billing/claims submission system	14%	0%	29%	57%
Added value of EMR does not justify investment	14%	57%	14%	14%
Lack of capital to invest in EMR	0%	0%	29%	71%
Lack of support from physicians	29%	29%	14%	29%
Lack of support from non-physician providers	33%	33%	0%	33%
Inability to evaluate, compare, and select the appropriate EMR system	14%	29%	14%	43%
Currently available software does not meet the health center's needs	14%	14%	29%	43%
Concern about loss of productivity or income during transition to the EMR system	14%	14%	29%	43%

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Iowa

Health Information Technology Planning & Staffing

Percent reporting that they have a **dedicated health information technology staff person or Chief Information Officer**:

> 43% Yes
> 57% No
> 0% Don't Know

Percent reporting that they utilize the following **additional information systems** or computer support staff:^

A network:	57%
Contractual arrangements:	57%
Larger organizational structure:[#]	14%
None of the above:	14%

Reported role of **health center's governing board** in implementing an EMR:^	Percent Reporting
Approved a budget for implementation of an EMR	14%
Approved/ assisted with the development of a strategic plan for health IT/EMR	14%
Established a board workgroup on health center information technology issues	0%
Identified or approved network partners for HIT	0%
Had/has one or more representatives serving on a regional health information organization (RHIO) or similar health information technology organization[†]	0%
Initiated efforts to highlight health information technology adoption at the health center	14%

About the 2006 Survey of Health Center Use of Electronic Health Information
The National Association of Community Health Centers, Harvard Medical School/MGH, and George Washington University conducted and funded this survey, with additional survey assistance from faculty at Yale University. Executive Directors of all federally-funded health centers in 2004 (N=914) received the survey by mail and email, and data were collected from March through May 2006. National response rate is 79.5%. Data in this fact sheet are based on available responses. The maximum percent of responses nationwide that were missing for questions on barriers was 6.9%, and 1.7% for any other question. The final report is forthcoming. For more information, email healthit@nachc.com.

Note: Responses may not total 100% due to rounding.

* Based on the number of federally-funded health centers in 2004. For more recent information, see www.nachc.com/research/ssbysdat.asp.

^ Health centers may select all that apply and therefore responses do not total 100%.

[#] I.e., affiliate medical center, university, or health department.

[†] In some states, the Primary Care Association may be an active participant in a RHIO or state-wide initiative promoting health information exchange.