

Bridging the Gap: TEFCA

Supporting the Needs of Rural Communities

ASTP Annual Meeting

Wednesday, February 11, 2026

Current State of TEFCA Participation and Awareness among Rural and Critical Access Hospitals

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Critical access hospitals (CAH) and rural hospitals have faced gaps in interoperability that TEFCA could help address

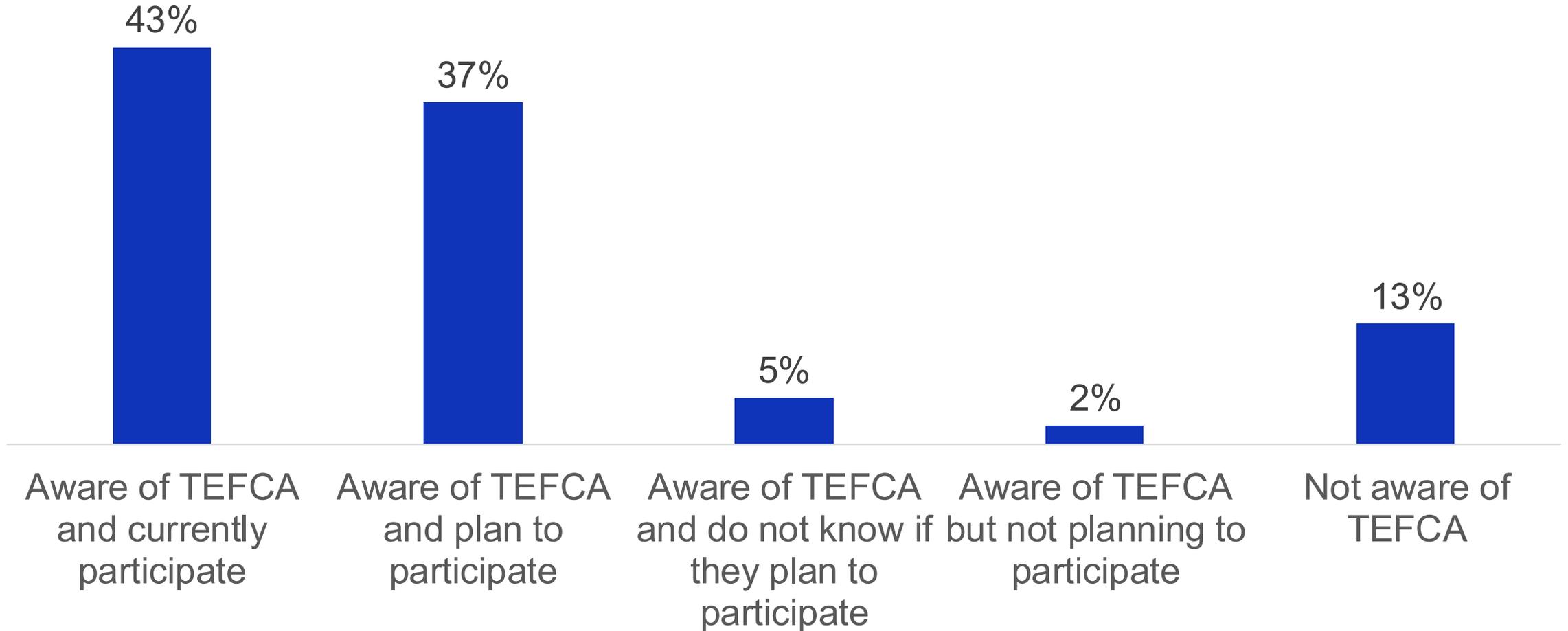
Table 1: Interoperability Frequency Among Non-Federal Acute Care Hospitals by Hospital Characteristics: 2023

Hospital Characteristics	Routinely Interoperable	Sometimes Interoperable	Not Fully Interoperable
Overall Interoperability	43%	27%	30%
Small	38%	23%	39%
Medium	46%*	33%*	21%*
Large	53%*	30%*	17%*
Independent	22%	23%	55%
System Affiliated	53%*	29%	18%*
Rural	36%	23%	41%
Urban	47%*	30%*	23%*
Critical Access Hospital (CAH)	37%	22%	42%
Non-CAH	45%*	30%*	25%*

Source: 2023 AHA Annual Survey Information Technology Supplement.

Overall, 8 in 10 hospitals participate or plan to participate in TEFCA

TEFCA awareness and participation status among hospitals



Source: American Hospital Association Information Technology Survey, 2025.

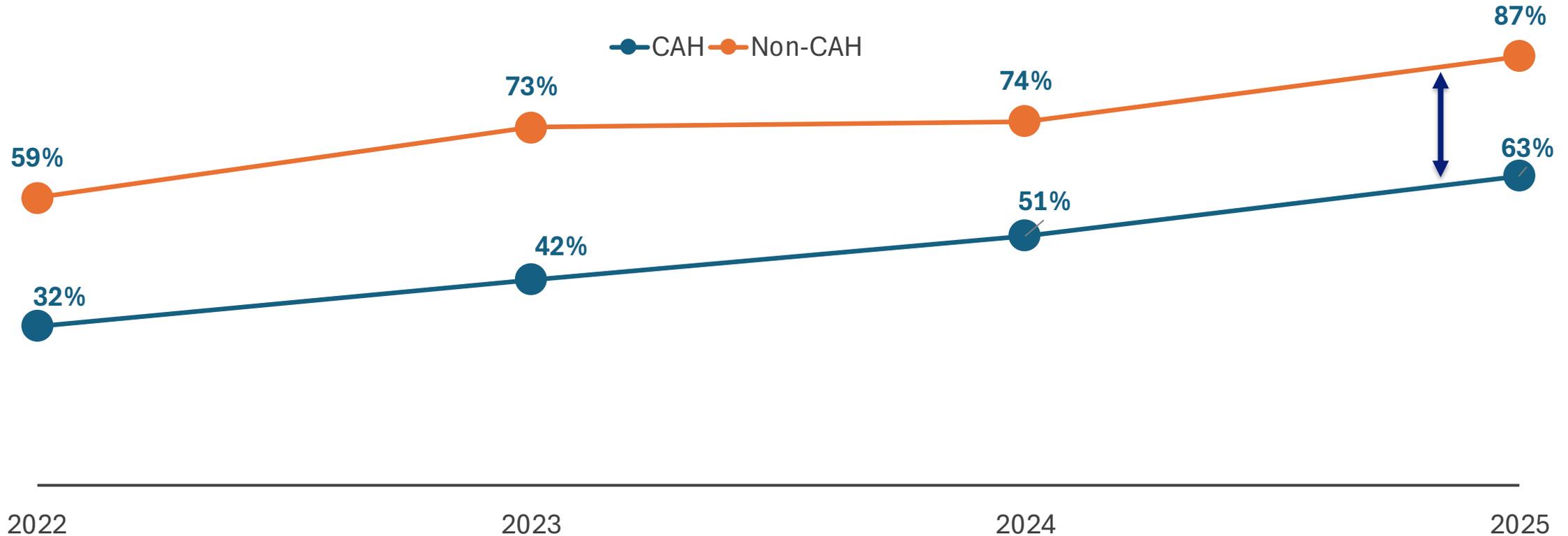
Among the other 2 in 10 hospitals, a majority are rural or CAH hospitals

		Among 20% of hospitals who don't have plans or don't know if they will participate
Rural vs. Urban Status		
	Rural (40%)	62%
	Urban (60%)	38%
Critical Access Hospital status		
	CAH (31%)	52%
	Other Rural (15%)	18%
	Urban (54%)	30%

Source: American Hospital Association Information Technology Survey, 2025. Denominator is among hospitals that do not know or don't have plans to participate (n=878)

CAH hospitals' participation and plans to participate in TEFCA increasing but gaps persist

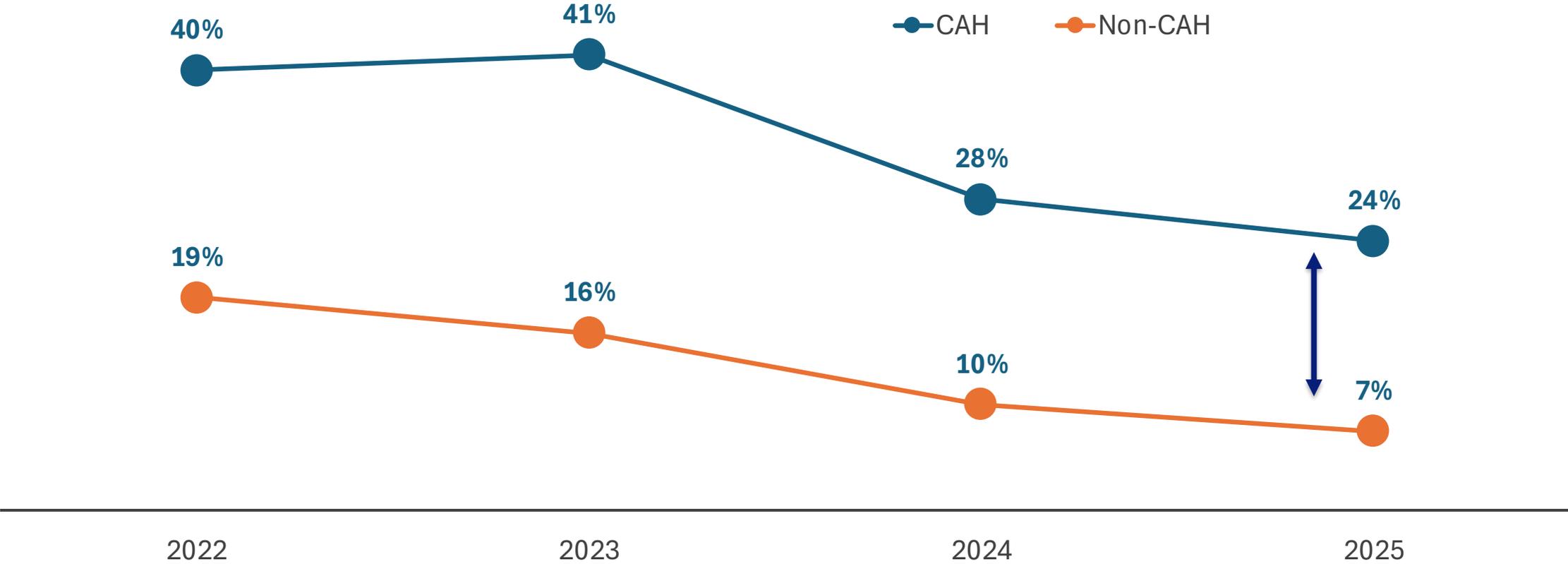
Currently Participating or Plan to Participate in TEFCA by CAH status



Source: American Hospital Association Information Technology Survey, 2025.

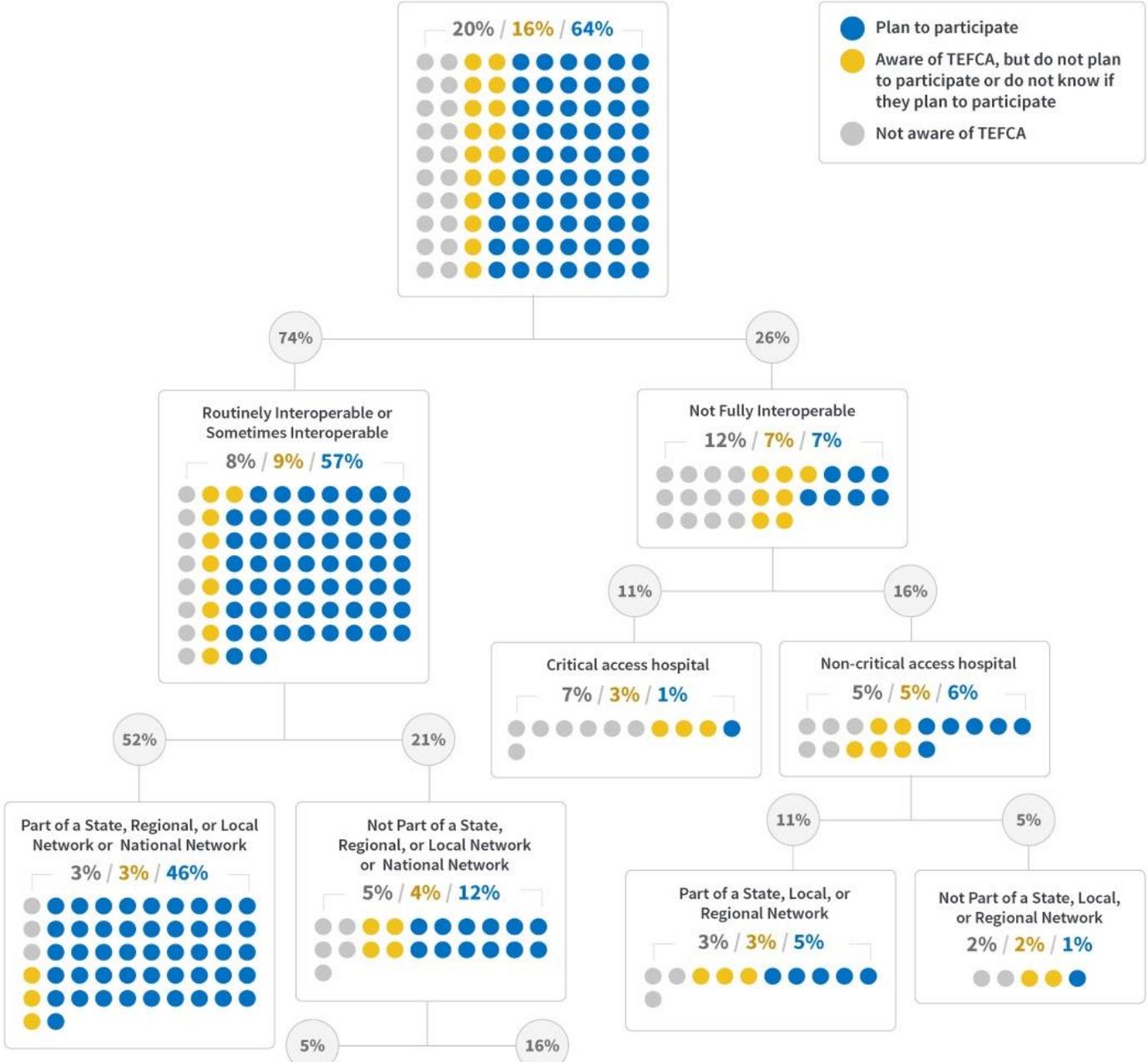
CAH hospitals' lack of awareness about TEFCA diminishing but gaps persist

Lack of Awareness of TEFCA by CAH status



Source: American Hospital Association Information Technology Survey, 2025.

Past analyses indicate that network participation is a major predictor of awareness and plans to participate in TEFCA.



Source: 2023 AHA Annual Survey Information Technology Supplement.

Past data indicate that rural hospitals are less likely to participate in networks that enable connectivity via TEFCA

Table 3: Percent of U.S. non-federal acute care hospitals that participate in national and state, regional, or local health information networks by hospital type, 2019.

Type of Network	Medium-Large	Small	Suburban-Urban	Rural	Non-CAH	CAH
State, Regional, or Local Network	80%	68%*	78%	68%*	76%	68%*
National Network	75%	63%*	74%	62%*	73%	59%*
Both Network Types	61%	47%*	59%	46%*	57%	46%*
Neither Network Type	5%	17%*	7%	17%*	8%	19%*

Source: 2019 AHA Annual Survey Information Technology Supplement.

Notes: *Significantly different from a corresponding category presented in the column to the left (p<0.05).)

Johnson C. & Pylypchuk Y. (February 2021). Use of Certified Health IT and Methods to Enable Interoperability by U.S. Non-Federal Acute Care Hospitals, 2019. ONC Data Brief, no.54. Office of the National Coordinator for Health Information Technology: Washington DC.

Key Takeaways

- There is a potential for TEFCA to address gaps in interoperability faced by CAH and rural hospitals
- While hospitals' participation and plans to participate in TEFCA overall are growing, there are about 1 in 5 hospitals that remain on the sidelines
- A majority of those hospitals are rural and critical access hospitals
- These hospitals awareness and participation rates in TEFCA have grown over time but gaps remain
- Past analyses have shown that health information network participation is critical to TEFCA participation but rural hospitals may have lower rates of participating in those networks compared to their counterparts
- Strategies are needed to increase awareness and address specific barriers for rural and CAHs to join TEFCA such as facilitating participation in networks that connect to TEFCA