New information-blocking rules: What doctors should know

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What’s the news: The AMA has developed resources to help physicians navigate a complex federal regulation aimed at ending information-blocking practices that impede the secure exchange and use of electronic health information by patients, doctors and health care organizations.

The final rule, implemented under the 21st Century Cures Act (Cures Act), took effect April 5. Last year, the AMA issued two essential resources to help physicians understand what the new regulation means for them and their medical practices:

- What is information blocking?
- How do I comply with info blocking and where do I start?

Now the AMA has enhanced its resources on information blocking as part of its Patient Access Playbook.

The playbook also covers other elements, including requirements under HIPAA, to help practices provide patients with their own health information—not only because it’s the law, but because it is the right thing to do.

Among other things, the playbook details legal requirements, real-world scenarios, the world of apps, key points to remember, and outlines a patient records request flowchart.

Why it’s important: Reflecting longstanding concerns raised by the AMA, patients, and health care community stakeholders, the Cures Act included provisions to promote health information interoperability, patient access to their records, and to prohibit information blocking.

Information blocking can occur in many forms. Physicians can experience information blocking when trying to access patient records from other providers, connecting their EHR systems to local health information exchanges, migrating from one EHR to another, and linking their EHRs with a clinical data registry.


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Patients can also experience information blocking when trying to access their medical records or when sending their records to another provider. AMA supports legislative and regulatory prohibitions on information blocking and is a longstanding advocate of eliminating major contributors to information blocking.

These include:

- Restrictive and unfair contractual limitations on physicians’ use and exchange of medical information.
- Excessive fees charged to create EHR interfaces or connections with other health IT.
- Technical or nonstandard methods of implementing EHRs and other health IT that block the access, exchange or use of medical information.

The new rules regulate EHR vendors, prohibiting them from blocking information. Like physicians, EHR vendors must comply with these regulations now. Information blocking not only affects patients, but also physicians. You should reach out to your EHR vendor to discuss what they are doing to come into compliance. The federal government has created a site where you can file information-blocking complaints on your EHR vendor or other health care entities covered by the rule.

Physicians may also implicate the information-blocking rule if they knowingly take actions that interfere with access, exchange or use of electronic health information (EHI), even if no harm materializes. The AMA is working with ONC to identify and reduce the rule’s complexity and unintended consequences, such as the rule’s requirement to release lab results without physician and patient review.

Learn more: Find out about three EHR information-blocking tactics that can harm patients. Also, read this in-depth AMA summary of the rule and a companion summary of the Centers for Medicare & Medicaid Services’ rule on patient access to data and interoperability.


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