2025 TOP HEALTHCARE SOFTWARE & SERVICES

Clinical Data Integration and Interoperability Solutions

Comparative Performance Result Set of the
Highest Client-Rated Satisfaction Technologies

Hospitals & Health Systems
Physician Practices & Groups
Long Term Care & Post Acute Providers
Diagnostics & Specialty Providers

Survey Period: Q4 2024 – Q1 2025

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About Black Book: Independent & Unbiased Healthcare IT Evaluation

Black Book™ conducts annual evaluations of healthcare and medical software and service providers, utilizing a rigorous and independent survey methodology. Focusing on 18 operational excellence key performance indicators, these evaluations provide insights entirely from the perspective of client experience.

Black Book's surveys are conducted without any influence or interference from vendors, ensuring unbiased and credible results. Since its inception, more than 3,000,000 healthcare IT users have participated in these polls since 2011, contributing their feedback to create comprehensive and objective assessments. Suppliers may encourage their clients to participate, further enriching the data and providing accurate customer service insights for stakeholders, including buyers, analysts, investors, competitors, and media.

Black Book maintains a steadfast commitment to objectivity and credibility, offering impartial evaluations at a time when industry alliances and biases can obscure reliable information. Unlike consultancies and research firms with vested interests, Black Book is dedicated solely to helping healthcare organizations identify the best solutions for their unique needs.

For customized research results or further information, please contact the Client Resource Center at +1 800.863.7590 or via email at Research@BlackBookMarketResearch.com.

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2025 Survey Response Rates by Organization Type

CLINICAL DATA INTEGRATION & INTEROPERABILITY

2025 Survey Respondent Identification	Number of Responses Validated
Community Hospitals	220
Academic Medical Centers, Teaching Hospitals	88
Rural & Critical Access Hospitals	103
Corporate Health Systems	177
Physician Groups	255
Independent Physicians	423
Behavioral Providers	85
Long Term Care and Post Acute Care Providers	94
Diagnostic Service Providers, Lab, Imaging	108
FQHCs	77
Surgical Centers	68
Oncology Centers	40
Others	35
Total	1,773

Source: Black Book ™ 2025

Statistical Confidence Level

In evaluating the statistical validity of the 1,773 provider respondents in this research, a rigorous confidence level analysis was performed to ensure representativeness within the total eligible population of 255,000 providers, comprising 5,000 hospitals and 250,000 physicians and ancillary providers. Given this sample size and population distribution, the statistical confidence level was determined through a multi-step process incorporating standard error calculations, Z-score analysis, and finite population correction where applicable.

The standard error (SE) of the proportion was first calculated using the assumption of maximum variability (p = 0.5) to ensure the broadest application of results. Using the formula:

SE=p(1−p)nSE = \sqrt{\frac{p(1 - p)}{n}}SE=np(1−p)

where p = 0.5 and n = 1,773, the standard error was determined to be 0.01187. To establish the confidence level associated with this sample, the margin of error (E) was set at ±5% (0.05), a commonly accepted threshold in healthcare research. Solving for the Z-score, the relationship:

Z=ESEZ = \frac{E}{SE}Z=SEE

yielded a Z-value of 4.21, which significantly exceeds the standard Z-score for 99% confidence (2.576). This indicates that, given this sample size, the confidence level for the findings far surpasses 99%, reinforcing the reliability of the data collected.

To further refine this estimation, a finite population correction (FPC) was applied due to the sample size being relatively large compared to the total eligible provider population. Using the correction formula:

SEadj=SE×N−nN−1SE_{adj} = SE \times \sqrt{\frac{N - n}{N - 1}}SEadj=SE×N−1N−n

where N = 255,000 and n = 1,773, the adjusted standard error remained virtually unchanged at 0.01186, confirming that the finite population effect is negligible. As a result, the overall confidence level remains statistically above 99%, supporting the robustness of these research findings.

In summary, the sample size of 1,773 provider respondents ensures an exceptionally high confidence level in reflecting the broader population of hospitals, physicians, and ancillary providers. This rigorous validation underscores the reliability of the conclusions drawn from this study and reinforces the statistical integrity of the research methodology.

Clinical Data Integration & Interoperability: Trends, Challenges, and Innovations

Healthcare interoperability and clinical data integration are critical for modernizing operations, optimizing clinical workflows, and meeting regulatory mandates. Health systems, hospitals, physician networks, health information exchanges (HIEs), government agencies, and payers rely on these capabilities to facilitate seamless data exchange, enhance care coordination, and ensure regulatory compliance. The healthcare ecosystem is shifting toward FHIR (Fast Healthcare Interoperability Resources)-based architectures, API-driven connectivity, and real-time data interoperability to address longstanding challenges in data fragmentation and information silos.

Key Drivers of Interoperability Adoption

Modernizing Healthcare Data Exchange

- **API-Driven Interoperability:** The widespread adoption of **FHIR-based APIs** has enabled real-time patient data sharing across disparate health IT systems, reducing delays and enhancing clinical decision-making.
- **Automation & Workflow Efficiency:** Advances in **automated data reconciliation, prior authorization processing, and claims integration** are reducing administrative overhead and improving operational efficiency.
- **Scalable Cloud-Based Solutions:** Cloud infrastructure and **containerized interoperability platforms** facilitate scalability, security, and resilience, allowing organizations to expand data exchange capabilities.
- **Enhanced Care Coordination: Longitudinal patient records and cross-system data sharing** help eliminate redundancies, improve diagnostic accuracy, and support evidence-based treatment planning.

Regulatory & Policy Impact

CMS and ONC Interoperability Mandates

- **21st Century Cures Act Final Rule:** Requires healthcare organizations to adopt API-based data-sharing frameworks, prohibiting information blocking.
- **CMS Interoperability & Patient Access Rule:** Mandates that payers implement API-based solutions to allow patients seamless access to their healthcare data.

- **Prior Authorization & Data Sharing Rules:** CMS has introduced new regulations that require real-time prior authorization status updates and streamlined payer-provider communication through **FHIR-based APIs.**

State and Federal Compliance Alignment

- Many state Medicaid agencies are aligning with federal interoperability mandates, requiring real-time data sharing between payers, providers, and public health entities.
- New TEFCA (Trusted Exchange Framework and Common Agreement) initiatives are driving the formation of a national interoperability framework that standardizes how health organizations exchange electronic health information (EHI).

Current Challenges in Clinical Data Integration

Data Fragmentation & Semantic Interoperability

- Disparate **EHR, payer, and provider systems** often lack standardized terminologies, requiring advanced **natural language processing (NLP) and AI-driven data normalization** to ensure consistency across platforms.

Security & Compliance Risks

- **Data governance, patient consent management, and cybersecurity threats** remain critical barriers to seamless interoperability, requiring organizations to implement robust **zero-trust architectures** and enhanced encryption protocols.

Technical Infrastructure & Implementation Barriers

- Legacy systems and non-standardized APIs present integration challenges, necessitating FHIR converters, middleware platforms, and AI-driven data mapping tools to bridge gaps between outdated and modern systems.

Innovations & Advances in Interoperability

FHIR-Based Real-Time Data Exchange

- FHIR R4 and SMART on FHIR frameworks are being widely adopted to enable real-time data sharing across health systems, payers, and government entities.

AI-Powered Data Harmonization & Predictive Analytics

- AI and machine learning models are automating clinical data reconciliation, identifying inconsistencies, and enhancing patient record accuracy.
- Predictive analytics solutions leverage real-time data from multiple sources to improve risk stratification, chronic disease management, and population health initiatives.

Blockchain for Secure Data Sharing

- Emerging blockchain-based interoperability solutions ensure tamper-proof, decentralized, and auditable data exchange between stakeholders while maintaining compliance with HIPAA and GDPR regulations.

API-Driven Connectivity & Microservices Architecture

- The shift toward microservices-based interoperability platforms enables modular and scalable deployment of healthcare data integration solutions, allowing organizations to incrementally expand capabilities.

Payer and Provider Connectivity Enhancements

Integrated Payer-Provider Data Exchange

- FHIR-based payer-to-provider communication frameworks are improving care coordination, reducing claim denials, and enhancing value-based care initiatives.
- Automated claims adjudication and prior authorization APIs are reducing delays and streamlining reimbursement cycles.

Public Health & Population Health Interoperability

- Health systems are integrating public health reporting systems with interoperability platforms to support real-time disease surveillance, immunization registries, and social determinants of health (SDoH) initiatives.

Remote Patient Monitoring & Digital Health Integration

- IoT-enabled remote monitoring devices and wearable technology are generating real-time clinical data that must be integrated into provider EHRs and payer analytics platforms through FHIR-based APIs.

Future Outlook & Strategic Considerations

- National interoperability networks (TEFCA, QHINs) will establish a federated data-sharing model that enhances national healthcare connectivity.
- Emerging AI models for clinical data exchange will automate data validation, patient matching, and unstructured data integration.
- Regulatory frameworks will continue to evolve, requiring health IT leaders to stay agile in adapting to new mandates and compliance standards.
- Payer-driven interoperability advancements will further accelerate value-based care adoption and data transparency initiatives.

The evolution of clinical data integration and interoperability is rapidly transforming the healthcare landscape. As FHIR-based APIs, AI-driven automation, and blockchain-enhanced security become the standard, organizations must invest in scalable, compliant, and future-proof solutions to optimize connectivity, enhance care quality, and drive regulatory alignment. Continued innovation in this space will be critical to achieving seamless, real-time, and patient-centric healthcare data exchange.

Competitive Landscape: 50 Vendors in Clinical Data Integration & Interoperability (Alphabetized)

Enterprise Clinical Data Aggregation & Hospital Integration Solutions

1. **AVAILITY dbMotion** – Integrates clinical data from multiple hospital and provider EHRs into a unified patient record.
2. **Arcadia Analytics** – Aggregates hospital and provider clinical data for predictive insights.
3. **Apervita Clinical Data Marketplace** – Enables cloud-based hospital-provider data exchange.
4. **ORACLE HEALTH Interoperability** – Connects hospital-practice networks via secure data exchange.
5. **Availity Clinical Data Exchange** – Enables automated hospital-to-provider clinical data sharing and claims integration.
6. **Axway Healthcare Integration** – Provides API-driven connectivity for hospital-practice EHR integration.
7. **CareEvolution HealthData Platform** – AI-driven platform unifying multi-hospital clinical data for provider use.
8. **MULESOFT (Oracle Health) Interoperability** – Supports hospital-to-provider data exchange and analytics-driven insights.
9. **Ciox Health** – Automates hospital-to-provider medical record sharing for coordinated care.
10. **CliniWorks Clinical Data Exchange** – Specializes in large-scale hospital data normalization for providers.
11. **Commure Data Integration** – Secure, scalable platform supporting cross-provider clinical data sharing.
12. **Conifer Health Solutions** – Integrates clinical and financial hospital data for provider access.
13. **Edifecs Healthcare Integration** – AI-driven data normalization platform supporting hospital-provider interoperability.
14. **QVERA PRISMA** – Aggregates hospital and provider clinical data into a single longitudinal patient record.
15. **Epic Care Everywhere** – Enables seamless sharing of clinical data across Epic-connected hospitals and external providers.
16. **Epic Healthy Planet** – Hospital data aggregation and analytics platform for accountable care networks.

17. **Evolent Health Data Interoperability** – Enables hospital-practice data sharing for ACOs and value-based care groups.
18. **GE Healthcare Command Center** – AI-powered clinical data integration platform optimizing provider coordination.
19. **Greenway Health Interoperability** – Connects independent practices with hospital data networks.
20. **Health Catalyst Data Operating System (DOS)** – Normalizes clinical data across hospitals and provider networks for analytics-driven care coordination.
21. **HealthEdge Clinical Data Exchange** – Supports hospital and provider interoperability for value-based care.
22. **Health Gorilla** – Unified clinical data exchange platform supporting hospitals and providers.
23. **IBM Watson Health Data Integration** – AI-powered hospital data aggregation and interoperability solutions.
24. **Infor Cloverleaf** – Secure integration engine that normalizes hospital clinical data and facilitates multi-provider connectivity.
25. **Innovaccer Data Activation Platform** – Combines hospital data integration with AI-driven provider insights.
26. **InterSystems HealthShare** – Enterprise platform enabling hospital data aggregation, provider data exchange, and analytics.
27. **Lyniate Corepoint** – Industry-leading data integration platform supporting hospital, provider, and HIE connectivity.
28. **MacroHealth Data Exchange** – AI-powered hospital-practice data integration platform.
29. **Medhost Interoperability Solutions** – Facilitates multi-EHR hospital-practice connectivity.
30. **Medicity Interoperability Suite** – Real-time data aggregation and hospital-practice integration framework.
31. **MedAllies Health Information Exchange** – Facilitates secure, multi-stakeholder clinical data exchange.
32. **MuleSoft Healthcare Integration** – Cloud-based platform enabling hospital EHR connectivity with provider organizations.
33. **INNOVACCER Share** – Provides hospital-practice integration and real-time provider notifications.

34. **Optum Clinical Data Exchange** – Supports hospital data aggregation, analytics, and interoperability with providers.
35. **Oracle Health Data & Analytics** – Facilitates cross-hospital data integration, analytics, and AI-driven decision-making.
36. **Orion Health Amadeus** – Aggregates and normalizes hospital data to provide actionable insights for care teams.
37. **PatientPing (Bamboo Health)** – Real-time hospital event notification service for provider networks.
38. **Persivia CareSpace** – Population health management platform using hospital-practice data integration.
39. **Philips Interoperability Solutions** – Multi-EHR hospital data exchange framework supporting real-time clinical workflows.
40. **Qvera Interface Engine (QIE)** – Automates real-time clinical data exchange between hospitals and affiliated provider networks.
41. **Redox Integration Platform** – Connects hospital systems with provider apps and analytics tools.
42. **RelayHealth Clinical Connectivity** – Secure real-time hospital data exchange solution for providers.
43. **Rhapsody Interoperability** – Secure, scalable hospital data integration platform supporting multi-EHR connectivity.
44. **Summit Healthcare Integration** – Provides hospital-practice data exchange solutions for multi-site organizations.
45. **Surescripts Clinical Direct Messaging** – Facilitates provider-to-hospital data exchange and care coordination.
46. **Symphony Health Solutions** – Offers cloud-based data integration to unify hospital and provider clinical workflows.
47. **Truven Health MarketScan** – Aggregates claims and clinical data for hospital-provider insights.
48. **Veradigm Interoperability Solutions** – Streamlines provider-hospital data connectivity for real-time decision-making.
49. **ZeOmega Jiva** – AI-powered data integration platform for value-based care hospital networks.
50. **Zynx Health Clinical Integration** – Automates evidence-based decision support using aggregated hospital data.

Infor Cloverleaf's Consecutive Leadership in Clinical Data Integration & Interoperability

For seven consecutive years, Infor Cloverleaf has been recognized as the top-performing clinical data integration and interoperability solution by crowdsourced users. Achieving the highest client satisfaction scores across multiple performance indicators, Cloverleaf has consistently delivered enterprise-grade interoperability, data normalization, and real-time messaging solutions that drive seamless connectivity across hospitals, health systems, payers, and provider organizations. Its continued dominance in clinical data exchange, secure API integrations, and automation-driven data workflows positions it as the industry leader in healthcare interoperability engines.

As healthcare organizations navigate complex multi-EHR environments, payer-provider data sharing challenges, and regulatory-driven interoperability mandates, Infor Cloverleaf has emerged as the preferred enterprise integration engine due to its scalability, flexibility, and automation-driven efficiency. Black Book Research's independent survey results reinforce its position as the most reliable and widely adopted data integration platform across healthcare enterprises.

Enterprise-Grade Scalability & Data Standardization

Healthcare IT leaders consistently cite Infor Cloverleaf's ability to scale across multi-system hospital networks, payers, and HIEs as a critical differentiator. Organizations managing thousands of real-time data transactions highlight Cloverleaf's robust data transformation and standardization capabilities, ensuring seamless integration between disparate EHRs, clinical applications, payer databases, and government registries.

Users particularly emphasize its high-performance transaction processing engine, capable of handling complex HL7 message routing, API-based FHIR workflows, and batch data processing with sub-millisecond latency. This reliability makes it an ideal choice for mission-critical interoperability environments, where uninterrupted data exchange is required to support clinical decision-making, emergency response, and real-time care coordination.

Automation-Driven Workflow Optimization

Infor Cloverleaf's advanced automation and orchestration tools have received high praise for reducing manual data reconciliation efforts, improving workflow efficiency, and minimizing human intervention in clinical data exchange processes. Black Book respondents note significant reductions in interface development time, maintenance costs, and integration errors, citing the platform's AI-enhanced data mapping tools as a major contributor to long-term operational efficiency.

Cloverleaf's self-monitoring capabilities, proactive alerting, and automated system recovery features further enhance its reliability for large-scale healthcare environments. Health IT professionals report a substantial improvement in data governance, error detection, and automated remediation workflows, reducing downtime and ensuring continuous compliance with HIPAA, CMS, ONC, and state-level interoperability mandates.

Seamless Multi-Vendor EHR & Payer Connectivity

As the healthcare ecosystem becomes increasingly fragmented, Black Book findings highlight Infor Cloverleaf's vendor-agnostic architecture as a key competitive advantage.

Payer organizations, including Medicare Advantage plans, Medicaid Managed Care Organizations (MCOs), and commercial insurers, recognize Cloverleaf's ability to bridge provider-payer data silos through real-time claims adjudication, eligibility verification, prior authorization automation, and risk adjustment data sharing. Customers appreciate the out-of-the-box support for payer data models, ensuring faster compliance with CMS-mandated interoperability rules and TEFCA.

Security, Compliance, and Reliability

Security remains a top concern for healthcare CIOs, and Infor Cloverleaf has outperformed competitors in compliance-driven security measures, according to Black Book Research survey results. Customers highlight its end-to-end encryption, fine-grained access controls, audit logging, and built-in support for multi-factor authentication (MFA) as essential features for protecting sensitive patient health data.

Organizations deploying Cloverleaf in cloud-hosted, hybrid, and on-premises environments report confidence in its high availability architecture, disaster recovery capabilities, and redundant failover mechanisms. This has positioned it as the preferred choice for government health agencies, multi-state HIE networks, and large hospital enterprises requiring 24/7 clinical data availability.

With its proven track record of reliability, scalability, and innovation, Cloverleaf remains the preferred interoperability engine for healthcare enterprises seeking to modernize their IT infrastructure, streamline multi-system data connectivity, and enhance real-time clinical decision-making.

As new federal interoperability mandates, value-based care models, and AI-driven data management requirements reshape the industry, Infor Cloverleaf is well-positioned to lead the next generation of healthcare data integration and interoperability advancements.

Competitive Intelligence Report: Top 23 Clinical Data Integration & Interoperability Vendors Ranked by Client Satisfaction & User Experience

1. Infor Cloverleaf

- **Overview: Industry-leading integration engine enabling hospital, provider, and payer data exchange at scale.**
- **Strengths:** Robust data mapping, real-time messaging, API support, and high-volume data orchestration for multi-system connectivity.
- **Client Feedback:** Unparalleled reliability, flexibility, and seamless integration with EHRs, HIEs, and payer networks.

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2. InterSystems HealthShare

- **Overview: A leading health information exchange (HIE) platform, enabling real-time clinical data aggregation and provider-payer collaboration.**
- **Strengths:**
  ✓ Cross-organizational data sharing, connecting hospitals, ACOs, HIEs, and payers in a unified ecosystem.
  ✓ AI-driven analytics for population health, predictive modeling, and value-based care insights.
  ✓ Multi-EHR integration, enabling seamless exchange
- **Client Feedback:**
  ✓ Highly rated for scalability, enterprise-grade security, and actionable analytics.

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3. Epic Care Everywhere

- **Overview: A comprehensive integration framework allowing seamless clinical data sharing between Epic hospitals and non-Epic providers.**
- **Strengths:** Embedded within Epic's provider network, supporting multi-organization data exchange.
- **Client Feedback:** High usability scores among large health systems and academic medical centers.

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4. Oracle Health (MULESOFT) Interoperability

- **Overview: Enterprise-wide data integration platform supporting hospitals, physicians, and ACOs.**

- **Strengths:** Advanced multi-system integration, including HL7, claims data, real-time clinical workflows, and payer-provider connectivity.
- **Client Feedback:** Strong performance in scalability and real-time analytics.

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5. Innovaccer Data Activation Platform

- **Overview: Cloud-native data integration and population health platform, designed for provider organizations, ACOs, and health systems.**
- **Strengths:**
  ✓ AI-driven clinical data harmonization, enabling real-time patient insights.
  ✓ Unified patient records, aggregating data across hospitals, payers, and providers.
- **Client Feedback:**
  ✓ Highly rated for ease of use, analytics-driven decision support, and seamless data exchange.

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6. Availity

- **Overview: The largest real-time health data network, facilitating clinical and administrative data exchange between hospitals, providers, and payers.**
- **Strengths:** High-volume transaction processing, prior authorization automation, and claims data integration.
- **Client Feedback:** Praised for payer-provider connectivity and real-time decision-making capabilities.

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7. Inovalon ONE Platform

- **Overview: Specializes in payer-provider data exchange, risk adjustment, and clinical data analytics.**
- **Strengths:**
  ✓ AI-powered risk stratification and real-world data analytics.
  ✓ Large-scale cloud infrastructure supporting multi-payer and multi-provider integration.
- **Client Feedback:** Highly rated for payer connectivity and data-driven decision-making.

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8. Informatica Intelligent Data Management Cloud (IDMC)

- **Overview: A leading cloud-based data integration and governance platform designed for hospitals, payers, and HIEs.**
- **Strengths:**
  ✓ Master Data Management (MDM) ensuring data accuracy and interoperability across

multi-EHR environments.
✓ AI-powered data governance for cleaning, mapping, and enriching patient data.

- **Client Feedback:** Highly rated for data quality management and payer-provider data exchange.

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9. Lyniate Corepoint

- **Overview: Real-time clinical integration engine that connects hospitals, providers, and HIEs through secure data exchange.**
- **Strengths:** Highly adaptable interface engine that enables flexible data transformations, API connectivity, and real-time messaging.
- **Client Feedback:** Known for high implementation success rates and strong vendor support.

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10. Health Catalyst Data Operating System (DOS)

- **Overview: AI-powered clinical data integration solution aggregating hospital and provider data for predictive analytics and value-based care.**
- **Strengths:** Advanced machine learning algorithms for data harmonization and population health insights.
- Client Feedback: High ratings for data-driven insights and provider collaboration.

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11. Redox

- **Overview: Cloud-native integration platform** that connects **hospitals, providers, and digital health apps** for real-time clinical data exchange.
- **Strengths:**
  ✓ API-driven interoperability, enabling seamless data exchange across EHRs and health IT systems.
  ✓ Plug-and-play integration model, reducing the complexity of connecting hospital systems with third-party apps.
  ✓ Scalable, HIPAA-compliant infrastructure for secure healthcare data exchange.
- **Client Feedback:**
  ✓ Highly rated for ease of implementation, fast onboarding, and strong customer support.

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12. Rhapsody

- **Overview: Hybrid interoperability engine** supporting **hospitals, payers, and providers** in data integration and connectivity.
- **Strengths:**
  ✓ Multi-protocol support including HL7, APIs, and legacy data formats.
  ✓ Customizable interface engine, allowing organizations to tailor integration workflows.
  ✓ Advanced monitoring tools for real-time data management and security.
- **Client Feedback:**
  ✓ Mid-tier ranking due to strong technical capabilities but moderate usability concerns.

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13. ELLKAY Healthcare Data Solutions

- **Overview:** Specializes in **EHR data extraction, legacy data conversion, and multi-system interoperability**.
- **Strengths:**
  ✓ Comprehensive data migration solutions, ensuring seamless transitions between EHR systems.
  ✓ API and HL7-based data normalization, enabling structured clinical and financial data exchange.
  ✓ Strong presence in hospital-practice integrations, supporting multi-vendor healthcare data plumbing.
- **Client Feedback:**
  ✓ Highly rated for data migration accuracy, vendor-agnostic interoperability, and scalable solutions.

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14. Persivia CareSpace

- **Overview:** AI-powered **population health management and hospital-provider data integration platform**.
- **Strengths:**
  ✓ Real-time risk stratification, enabling hospitals to proactively manage high-risk patient populations.
  ✓ Claims and clinical data aggregation, supporting value-based care and ACO performance metrics.
  ✓ Strong integration with hospital EHRs and provider analytics platforms.
- **Client Feedback:**
  ✓ Praised for intelligent analytics, value-based care integration, and provider engagement tools.

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15. MuleSoft Healthcare Integration

- **Overview:** Enterprise-grade **API gateway and data integration platform**, connecting **hospitals, payers, and provider networks**.
- **Strengths:**
  ✓ Highly scalable API management, facilitating real-time clinical and claims data exchange.
  ✓ Supports HL7, FHIR, and RESTful APIs, enabling seamless integration with multiple hospital systems.
  ✓ Strong cloud-native capabilities, reducing infrastructure costs and improving scalability.
- **Client Feedback:**
  ✓ Highly rated for enterprise API standardization and interoperability across multi-cloud environments.

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16. Philips Interoperability Solutions

- **Overview: Multi-EHR clinical data exchange platform**, supporting **hospitals, imaging centers, and provider networks**.
- **Strengths:**
  ✓ Supports cross-vendor data exchange, ensuring real-time patient data sharing.
  ✓ Optimized for radiology, cardiology, and specialty workflows, enabling seamless imaging data integration.
  ✓ AI-powered clinical decision support tools for hospital systems.
- **Client Feedback:**
  ✓ Strong performance in interoperability across imaging systems, PACS, and multi-hospital networks.

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17. Qvera Interface Engine (QIE)

- **Overview:** A **lightweight, high-performance integration engine** for **hospital, provider, and payer data exchange**.
- **Strengths:**
  ✓ Automated clinical data normalization, ensuring smooth HL7 and API-based data exchange.
  ✓ Highly flexible, lightweight architecture, making it a cost-effective solution for smaller hospitals.
  ✓ Supports bidirectional data exchange, ensuring real-time synchronization across systems.
- **Client Feedback:**
  ✓ Praised for cost-effective implementation, ease of customization, and vendor-neutral interoperability.

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18. Orion Health Amadeus

- **Overview:** AI-driven **health information exchange (HIE) and predictive analytics platform**, enabling **real-time hospital data exchange**.
- **Strengths:**
  ✓ Population health analytics, integrating claims, clinical, and public health data.
  ✓ Predictive modeling tools, allowing providers to optimize care pathways.
  ✓ Scalable for large regional HIEs and multi-state healthcare networks.
- **Client Feedback:**
  ✓ Praised for HIE scalability, predictive analytics, and strong support for provider-payer collaboration.

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19. Commure Data Integration

- **Overview: Cloud-native cross-provider data-sharing solution**, enabling **hospital and payer interoperability**.
- **Strengths:**
  ✓ AI-driven data orchestration, simplifying multi-EHR and provider connectivity.
  ✓ Security-first approach, ensuring compliance with HIPAA, ONC, and TEFCA.
  ✓ Multi-cloud compatibility, optimizing hospital data management strategies.
- **Client Feedback:**
  ✓ Highly rated for cloud-based interoperability and seamless multi-system data exchange.

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20. PatientPing (Bamboo Health)

- **Overview: Real-time hospital event notification platform**, improving **provider coordination for high-risk patients**.
- **Strengths:**
  ✓ Admission, discharge, and care transition alerts, enabling proactive provider follow-up.
  ✓ Reduces hospital readmission risks, ensuring better post-acute care transitions.
- **Client Feedback:**
  ✓ Highly rated for improving post-acute care transitions and provider-patient engagement.

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21. Medhost Interoperability Solutions

- **Overview: Rural and community hospital-focused interoperability platform**, ensuring seamless clinical data exchange.

- **Strengths:**
  ✓ Designed for smaller hospital networks, providing cost-effective data exchange.
  ✓ Optimized for real-time EHR integrations and clinical workflows.
- **Client Feedback:**
  ✓ Praised for low-cost implementation and interoperability with regional provider networks.

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22. ZeOmega Jiva

- **Overview: AI-powered care management, interoperability, and data integration solution designed for payer-provider collaboration and value-based care programs.**
- **Strengths:**
  ✓ Unified Data Exchange: Integrates clinical, claims, and social determinants of health (SDoH) data for comprehensive patient insights.
  ✓ Risk-Based Contracting & Population Health Management: Supports Medicare Advantage, ACOs, Medicaid Managed Care, and Commercial Value-Based Programs.
  ✓ Care Coordination Tools: Provides predictive analytics, real-time alerts, and automated workflows for hospitals, payers, and health systems.
  ✓ FHIR & HL7 Support: Ensures seamless interoperability with EHRs, HIEs, and payer platforms to facilitate data-driven decision-making.
- **Client Feedback:**
  ✓ Highly rated for real-time risk stratification, provider-payer engagement, and regulatory compliance (CMS, NCQA, HEDIS, and ONC standards).
  ✓ Recognized for improving care outcomes through AI-driven predictive analytics and real-time patient intervention capabilities.

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23. Optum Clinical Data Exchange

- **Overview: AI-powered clinical and claims data interoperability platform, enabling seamless information exchange between providers, payers, and health systems.**
- **Strengths:**
  ✓ Claims & Clinical Data Integration: Bridges provider-payer silos to improve prior authorization, care coordination, and risk adjustment.
  ✓ Predictive Analytics & AI: Uses machine learning algorithms to optimize population health initiatives and financial risk models.
  ✓ Cloud-Based & Scalable: Offers real-time data interoperability between hospitals, health plans, and large multi-specialty networks.
  ✓ Regulatory Compliance: Supports CMS, HIPAA, and NCQA standards, helping payers and providers meet evolving healthcare mandates.

Survey Overview

Black Book Methodology

How the Data Sets Are Collected

Black Book collects and analyzes ballot results across 18 performance areas of operational excellence to rank vendors by electronic medical and health record product lines. Data collection follows rigorous methodology and immediate audits—both internal and external—to verify completeness, accuracy, and respondent validity while maintaining the anonymity of participating client organizations. Each data set is reviewed by a Black Book executive and at least two independent reviewers, ensuring the highest standards of transparency and reliability.

The 18 criteria on operational excellence are further segmented by industry, market size, geography, and outsourced function, allowing the results to be tailored to specific client needs. Situational and market studies focus on high-interest areas such as e-Prescribing, Health Information Exchange, Accountable Care Organizations, hospital software, service providers, educational platforms in e-health, and benchmarkers. These targeted surveys range from four to 20 specific questions or criteria, depending on the area of study.

Incorporating Real-Time Methodology Updates

In 2024, Black Book introduced enhancements to its methodology, powered by updated capabilities from Qualtrics®. These updates optimize data accuracy and ensure faster processing and verification of responses. The integration of mobile applications and online tools allows new participants to join seamlessly, further diversifying and enriching the survey pool.

Crowdsourced Surveys: Ensuring Authenticity in Client Use Experience

Black Book's crowdsourced approach to surveys provides an unbiased and authentic representation of client experiences with healthcare technology vendors. By soliciting feedback directly from end-users rather than relying on vendor-provided client lists, Black Book eliminates the risk of vendor influence. Crowdsourced surveys ensure that responses reflect genuine client satisfaction and operational outcomes, free from the pressure or motivation that vendors may exert on handpicked clients. This methodology creates a level playing field where vendors are evaluated solely based on their performance and user satisfaction.

Vendor-provided client lists often present ethical challenges, as vendors can selectively choose participants who are likely to provide positive feedback, skewing survey results in their favor. Moreover, some vendors may offer incentives or apply subtle pressures to clients, further compromising the authenticity of the data. Black Book's independent and transparent process ensures that all respondents are either invited directly through

validated networks or participate voluntarily through open access platforms. This rigorous approach safeguards the integrity of the rankings and provides stakeholders with reliable insights into vendor performance across diverse environments.

Understanding Statistical Confidence of Black Book Data

The statistical confidence for each performance rating is derived from the volume and diversity of organizations contributing data. Black Book ensures data reliability using the following criteria:

Minimum Participation Thresholds: Top-10-ranked vendors must have at least 10 unique client votes, with broader categories requiring a minimum of 20. Data sets marked with an asterisk (*) indicate sample sizes below the required limits and are used only for tracking purposes, not rankings. These smaller samples may exhibit high variability and are flagged for users to consider potential future margin-of-error adjustments.

Who Participates in the Black Book Ranking Process

For the 2025 annual Black Book satisfaction survey, over 3,000,000 healthcare technology users—including health plan executives, clinicians, IT specialists, and implementation veterans—were invited to participate. To ensure inclusivity, non-invited participants can join after completing a verifiable profile and registering with a valid corporate email address.

Respondents participate through Black Book's web instrument at blackbookrankings.com or via mobile applications available on iTunes and Google Play. Strict measures are in place to maintain data integrity, including limiting one ballot per corporate email address and requiring formal email requests for ballot changes during the open polling period.

Black Book's survey instruments, powered by Qualtrics®, are managed collectively to enhance security and reliability. Ballots are validated through two independent survey verification software services before inclusion in scoring, ensuring the accuracy and authenticity of the final rankings. Professional associations, media outlets, and returning participants with prior identification verifications are among the diverse groups invited to participate, further bolstering the credibility and reach of Black Book's rankings.

2025 Client Satisfaction Survey Results
Technology Software & Services

CLINICAL DATA INTEGRATION & INTEROPERABILITY

Figure 1A/B: Comprehensive Technology Vendors Defined

HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS

Figure 2: Key to Raw Scores

0.00-5.79 ►	◄ 5.80-7.32 ►	◄ 7.33-8.70 ►	◄ 8.71-10.00
Deal breaking dissatisfaction Does not meet expectations Cannot recommend vendor	Neutral Meets/does not meet expectations consistently Would not likely recommend vendor	Satisfactory performance Meets expectations Recommends vendor	Overwhelming satisfaction Exceeds expectations Highly recommended vendor

Source: Black Book Research

Color-Coded Stoplight Dashboard Scoring Key

Green	Top 10% scores better than 90% of Vendors. Green coded vendors have received consistently highest client satisfaction scores.	8.71 +
Clear	Top 33% scores better than two-thirds of Vendors. Well-scored vendor which have middle of the pack results.	7.33 to 8.70
Yellow	Mid Pack: scores average of half of all Vendors. Cautionary performance scores, areas of improvement required.	5.80 to 7.32
Red	Lowest 10%: scores worse than 90% of Vendors. Poor performances reported potential cause for service and contractual cancellations.	Less than 5.79

Raw Score Compilation and Scale of Reference

Black Book raw score scales

0 = Deal breaking dissatisfaction ◄ ___ ► 10 = Exceeds all expectations

Source: Black Book Research

Individual vendors can be examined by specific indicators on each of the main functions of vendors as well as grouped and summarized subsets. Details of each subset are contained so that each vendor may be analyzed by function and PAYER/PROVIDER IT services collectively.

Scoring Key

Overall Rank	Q1 Criteria Rank	Company	PRIVATE PAYERS	PUBLIC PAYERS	PROVIDERS	HIE	Mean
5	1	Name	8.49	8.63	8.50	8.01	8.66

Source: Black Book Research

- **Overall rank** – this rank references the final position of all 18 criteria averaged by the mean score collectively. This vendor ranked fifth of the 20 competitors.
- **Criteria rank** – refers to the number of the question or criteria surveyed. This is the sixth question of the 18 criteria of which this vendor ranked first of the 20 vendors analyzed positioned only on this criteria or question. Each vendor required ten unique client ballots validated to be included in the top ten ranks.
- **Company** – name of the vendor.
- **Subsections** – each subset comprises one-fourth of the vendor mean at the end of this row and includes all buyers and users who indicate that they contract each respective functional subsection with the supplier, specific to their physician enterprise.
- **Mean** – congruent with the criteria rank, the mean is a calculation of all four subsets of functions surveyed. As a final ranking reference, it includes all market sizes, specialties, delivery sites and geographies.

Overall KPI Leaders: Technology Solutions

CLINICAL DATA INTEGRATION & INTEROPERABILITY

Summary of Criteria Outcomes

Table 1: Summary of Criteria Outcomes

Total Number One Criteria Ranks	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	Overall Rank
12	INFOR	1
4	INTERSYSTEMS	2
1	EPIC	5
1	ORACLE HEALTH	6

Source: Black Book Research, Q1 2025

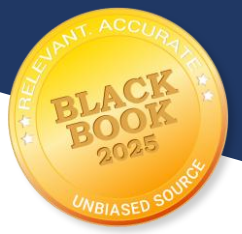
Overall KPI Leaders

CLINICAL DATA INTEGRATION & INTEROPERABILITY

Table 2: Top Score Per Individual Criteria

Question / Criteria		Vendor	Overall Rank
Q1	• Data Integration Speed & Efficiency	INFOR	1
Q2	• Ease of Implementation & Deployment	INFOR	1
Q3	• Interoperability Standard Compliance	INFOR	1
Q4	• Vendor-Agnostic Data Exchange Capabilities	INFOR	1
Q5	• Workflow Automation & Optimization	INFOR	1
Q6	• Customizability & Configurability	EPIC SYSTEMS	5
Q7	• Data Accuracy & Integrity	INFOR	1
Q8	• Real-Time Data Processing & Alerting	INFOR	1
Q9	• User Interface & Usability	INTERSYSTEMS	2
Q10	• Problem Resolution & Troubleshooting Efficiency	INFOR	1
Q11	• Security & Compliance Capabilities	INTERSYSTEMS	2
Q12	• Scalability & Future-Proofing	ORACLE HEALTH	6
Q13	• Data Governance & Master Data Management (MDM) Support	INTERSYSTEMS	2
Q14	• AI-Driven Data Insights & Predictive Analytics	INFOR	1
Q15	• Cost-Effectiveness & ROI Perception	INFOR	1
Q16	• Vendor Support & Customer Service Quality	INTERSYSTEMS	2
Q17	• Integration with Population Health & Value-Based Care Models	INFOR	1
Q18	• Innovation & Market Differentiation	INFOR	1

Source: Black Book™ 2025



Individual Technology Solutions Vendor Key Performance

Table 3: Top Ranked Vendors - Raw/Aggregate User Satisfaction Scores 2025 CLINICAL DATA INTEGRATION & INTEROPERABILITY

Rank	Vendor	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Mean
1	INFOR	9.82	9.70	9.64	9.57	9.72	9.70	9.38	9.76	9.70	9.83	9.75	9.73	9.83	9.81	9.78	9.70	9.88	9.76	**9.73**
2	INTERSYSTEMS	9.12	8.99	8.55	9.23	9.61	9.13	9.35	9.64	9.73	9.17	9.77	9.21	9.86	9.72	9.36	9.77	9.20	9.51	**9.38**
3	INNOVACCER	9.36	9.03	9.36	9.21	9.40	9.04	9.01	9.30	9.45	9.27	9.42	8.42	9.09	9.03	9.49	8.99	9.18	9.40	**9.19**
4	AVAILITY	8.91	8.95	8.93	9.51	9.33	9.48	9.08	8.60	9.07	8.96	9.62	8.59	9.29	9.03	9.05	9.43	8.72	9.45	**9.11**
5	EPIC	8.91	8.34	9.03	8.81	8.96	9.74	9.16	9.69	9.43	8.85	8.23	8.31	8.77	9.52	8.34	9.20	8.98	9.02	**8.96**
6	ORACLE HEALTH	8.46	8.66	9.42	9.09	8.74	9.46	8.68	9.15	8.33	9.19	9.20	9.78	9.19	9.20	8.70	8.42	8.55	8.88	**8.93**
7	INOVALON	8.57	9.14	8.00	8.02	9.57	9.43	8.38	8.49	9.27	8.50	8.05	8.15	7.98	8.81	8.45	8.99	9.43	9.04	**8.68**
8	INFORMATICA	8.38	9.15	7.79	9.15	8.11	8.93	8.31	8.22	8.31	8.16	9.15	9.35	8.37	7.69	8.57	8.42	8.94	8.68	**8.56**
9	LYNIATE	7.95	8.66	9.00	7.80	8.52	7.61	9.15	7.78	8.10	8.42	9.34	7.63	8.78	9.12	8.09	9.21	7.74	8.71	**8.42**
10	HEALTH CATALYST	7.26	8.64	8.51	8.05	8.55	7.49	8.12	8.63	7.29	8.02	8.61	8.03	7.73	7.97	8.69	7.97	8.99	8.42	**8.17**
11	REDOX	7.77	7.31	7.88	8.41	8.53	6.79	8.34	7.99	8.17	7.70	8.17	8.12	8.55	8.20	8.45	7.77	8.73	8.38	**8.07**
12	RHAPSODY	7.90	6.36	9.30	8.37	7.60	7.68	8.01	8.68	8.59	6.91	7.15	8.82	8.63	7.79	8.18	8.40	8.12	7.70	**7.99**
13	ELLKAY	8.03	8.00	7.19	7.99	6.23	8.09	6.69	7.35	7.78	7.68	8.29	8.96	8.17	8.28	8.85	8.25	8.42	8.36	**7.92**
14	PERSIVIA	8.24	7.16	8.65	7.20	6.87	5.78	9.11	7.80	6.99	7.85	7.70	7.38	7.97	8.97	9.06	7.92	9.26	8.65	**7.92**
15	MULESOFT	7.28	7.17	7.05	8.27	5.72	7.65	8.20	7.85	8.03	7.56	8.03	7.98	8.41	7.97	8.31	7.63	8.59	8.15	**7.77**
16	PHILIPS	8.08	7.46	7.53	7.11	7.39	8.18	6.73	7.30	7.64	7.63	8.31	8.91	7.19	8.37	7.90	7.11	8.92	8.08	**7.77**
17	QVERA	8.60	6.96	7.89	7.04	7.92	6.82	7.99	8.16	7.67	7.07	7.41	8.78	8.25	8.30	7.08	8.01	8.06	7.26	**7.74**
18	ORION	8.35	7.36	7.61	6.06	8.56	7.16	7.32	8.26	7.97	8.84	8.14	6.44	7.03	7.61	5.51	8.84	7.72	7.20	**7.55**
19	COMMURE	7.28	6.64	7.40	7.95	8.06	5.99	7.87	7.20	6.30	7.04	7.11	7.15	8.08	6.35	7.98	6.35	8.26	7.01	**7.22**
20	PATIENT PING	6.23	5.22	5.75	6.74	4.97	7.10	6.00	6.33	6.18	7.00	5.57	6.30	4.66	7.19	7.07	6.53	5.78	5.70	**6.13**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

1. Data Integration Speed & Efficiency

- Definition: Measures how quickly and accurately the solution integrates clinical, operational, and administrative data from multiple sources.
- Assessment Metric: Time taken to complete integration tasks and the frequency of errors.
    - Evaluation Questions: How long does it take for integrated data to appear in the EHR or analytics systems? Are delays in data exchange affecting care delivery or decision-making? Are errors or missing data causing inefficiencies in workflows?

OVERALL RANK	Q1 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.81	9.83	9.93	9.71	**9.82**
3	2	**INNOVACCER**	9.24	9.38	9.57	9.21	**9.36**
2	3	**INTERSYSTEMS**	9.08	9.23	9.07	9.09	**9.12**
5	4	**EPIC**	9.34	9.02	8.06	9.21	**8.91**
4	5	**AVAILITY**	8.95	9.48	8.84	8.38	**8.91**
17	6	**QVERA**	8.35	8.77	8.52	8.83	**8.62**
7	7	**INOVALON**	9.16	8.89	8.05	8.17	**8.57**
6	8	**ORACLE HEALTH**	8.60	7.90	8.94	8.38	**8.46**
8	9	**INFORMATICA**	8.64	8.47	8.37	8.05	**8.38**
18	10	**ORION**	8.83	8.11	7.83	8.17	**8.24**

Source: Black Book Research™ Q1 2025

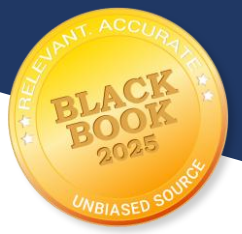
CLINICAL DATA INTEGRATION & INTEROPERABILITY

2. Ease of Implementation & Deployment

- Definition: Evaluates the level of effort and technical expertise required to set up and configure the system.
- Assessment Metric: User feedback on installation complexity, required IT resources, and time-to-go-live.
    - Evaluation Questions: Does our IT team have the capacity and expertise to implement this solution? How long will deployment take compared to vendor estimates? What level of training is required for staff across departments?

OVERALL RANK	Q2 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.46	9.79	9.77	9.78	**9.70**
8	2	**INFORMATICA**	9.03	9.66	8.98	8.91	**9.15**
7	3	**INOVALON**	9.26	8.78	9.10	9.42	**9.14**
3	4	**INNOVACCER**	9.04	8.92	9.30	8.84	**9.03**
2	5	**INTERSYSTEMS**	9.07	8.66	8.53	9.69	**8.99**
4	6	**AVAILITY**	8.79	9.27	8.64	9.11	**8.95**
6	7	**ORACLE HEALTH**	8.66	9.11	8.34	8.51	**8.66**
9	8	**LYNIATE**	8.51	8.33	9.10	8.70	**8.66**
10	9	**HEALTH CATALYST**	8.19	9.02	9.28	8.06	**8.64**
13	10	**ELLKAY**	8.27	8.12	8.08	7.53	**8.00**

Source: Black Book Research™ Q1 2025

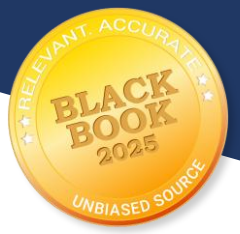


CLINICAL DATA INTEGRATION & INTEROPERABILITY

3. Interoperability Standard Compliance

- Definition: Measures adherence to FHIR, HL7, CDA, X12, and DICOM standards.
- Assessment Metric: User-reported compatibility with different EHRs, LIS, RIS, and third-party applications.
    - Evaluation Questions: Does the solution comply with required standards for our clinical and operational workflows? Are there challenges in exchanging data with payers, HIEs, or external providers? Does it support the latest versions of interoperability frameworks?

OVERALL RANK	Q3 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.32	9.79	9.68	9.78	**9.64**
6	2	**ORACLE HEALTH**	9.09	9.27	9.71	9.51	**9.42**
3	3	**INNOVACCER**	9.33	9.27	9.31	9.53	**9.36**
12	4	**RHAPSODY**	9.48	9.59	8.73	9.41	**9.30**
5	5	**EPIC**	9.01	8.77	9.17	9.18	**9.03**
9	6	**LYNIATE**	8.82	9.49	8.81	8.89	**9.00**
4	7	**AVAILITY**	9.18	8.79	9.17	8.58	**8.93**
14	8	**PERSIVIA**	8.43	9.07	8.90	8.18	**8.65**
2	9	**INTERSYSTEMS**	8.55	8.46	8.74	8.45	**8.55**
10	10	**HEALTH CATALYST**	8.64	7.82	8.75	8.81	**8.51**



4. Vendor-Agnostic Data Exchange Capabilities

- Definition: Assesses the system's ability to integrate with various EHRs, HIEs, and third-party health systems.
- Assessment Metric: User perception of how well it connects with major systems
    - Evaluation Questions: Can we integrate this solution with multiple vendor systems used across our network? Have we tested its ability to exchange data across different locations and specialties? How does it handle proprietary formats and legacy systems?

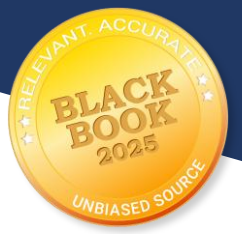
OVERALL RANK	Q4 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.66	9.38	9.53	9.71	**9.57**
4	2	**AVAILITY**	9.22	9.30	9.79	9.73	**9.51**
2	3	**INTERSYSTEMS**	9.41	8.82	9.32	9.36	**9.23**
3	4	**INNOVACCER**	9.39	8.99	9.63	8.84	**9.21**
8	5	**INFORMATICA**	9.34	9.59	8.78	8.87	**9.15**
6	6	**ORACLE HEALTH**	8.97	9.51	8.77	9.09	**9.09**
5	7	**EPIC**	8.57	8.47	8.97	9.23	**8.81**
11	8	**REDOX**	8.39	8.06	8.64	8.56	**8.41**
12	9	**RHAPSODY**	8.43	8.11	8.31	8.71	**8.37**
15	10	**MULESOFT**	7.87	8.33	8.73	8.1	**8.27**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

5. Workflow Automation & Optimization

- Definition: Evaluates how well the system reduces manual processes through intelligent automation.
- Assessment Metric: Reduction in clinician burden and administrative workload due to system automation.
    - Evaluation Questions: Which repetitive tasks can this solution automate in our clinical and administrative workflows? Does it reduce the workload for clinicians, nurses, and billing staff? How does automation impact turnaround times for lab results, authorizations, or clinical documentation?

OVERALL RANK	Q5 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.72	9.84	9.76	9.57	**9.72**
2	2	**INTERSYSTEMS**	9.41	9.53	9.93	9.57	**9.61**
7	3	**INOVALON**	9.74	9.66	9.48	9.40	**9.57**
3	4	**INNOVACCER**	9.28	9.65	8.93	9.75	**9.40**
4	5	**AVAILITY**	9.57	9.05	9.64	9.06	**9.33**
5	6	**EPIC**	8.79	7.98	9.38	9.68	**8.96**
6	7	**ORACLE HEALTH**	9.37	9.03	7.93	8.63	**8.74**
18	8	**ORION**	8.88	8.80	8.36	8.21	**8.56**
10	9	**HEALTH CATALYST**	8.37	8.60	8.87	8.35	**8.55**
11	10	**REDOX**	9.21	7.92	7.89	9.08	**8.53**



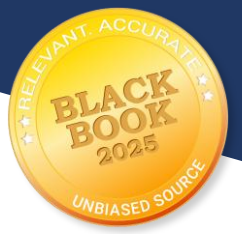
CLINICAL DATA INTEGRATION & INTEROPERABILITY

6. Customizability & Configurability

- Definition: Measures the platform's flexibility in allowing custom rule-building, transformations, and mappings based on provider needs.
- Assessment Metric: User satisfaction with customization flexibility for different workflows.
    - Evaluation Questions: Can we configure this solution to meet our unique operational needs? Does it support specialty-specific customization (e.g., oncology, cardiology, radiology)? How much IT involvement is required for changes or updates?

OVERALL RANK	Q6 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
5	1	**EPIC**	9.79	9.83	9.71	9.63	**9.74**
1	2	**INFOR**	9.93	9.70	9.58	9.59	**9.70**
4	3	**AVAILITY**	9.36	9.61	9.71	9.25	**9.48**
6	4	**ORACLE HEALTH**	9.78	9.68	8.63	9.75	**9.46**
7	5	**INOVALON**	9.67	9.27	9.10	9.68	**9.43**
2	6	**INTERSYSTEMS**	9.22	9.02	8.87	9.41	**9.13**
3	7	**INNOVACCER**	8.93	9.38	8.77	9.08	**9.04**
8	8	**INFORMATICA**	9.28	8.83	8.85	8.75	**8.93**
16	9	**PHILIPS**	7.87	8.48	8.22	8.13	**8.18**
13	10	**ELLKAY**	8.17	7.91	7.67	8.60	**8.09**

Source: Black Book Research™ Q1 2025



CLINICAL DATA INTEGRATION & INTEROPERABILITY

7. Data Accuracy & Integrity

- Definition: Assesses the reliability and accuracy of integrated clinical data.
- Assessment Metric: User feedback on data mismatches, duplications, or inconsistencies.
    - Evaluation Questions: Are there frequent discrepancies in patient records across integrated systems? How well does it handle duplicate records and reconciliation? Does our staff trust the accuracy of the data presented in their daily workflows?

OVERALL RANK	Q7 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.33	9.57	9.59	9.01	**9.38**
2	2	**INTERSYSTEMS**	9.15	9.65	8.93	9.66	**9.35**
5	3	**EPIC**	9.18	9.56	8.83	9.05	**9.16**
9	4	**LYNIATE**	8.94	9.04	8.88	9.72	**9.15**
14	5	**PERSIVIA**	9.31	9.38	8.92	8.82	**9.11**
4	6	**AVAILITY**	9.51	9.15	8.61	9.04	**9.08**
3	7	**INNOVACCER**	9.27	8.97	9.22	8.57	**9.01**
6	8	**ORACLE HEALTH**	8.60	9.18	8.23	8.71	**8.68**
7	9	**INOVALON**	8.86	8.69	8.19	7.78	**8.38**
11	10	**REDOX**	8.01	8.86	8.37	8.13	**8.34**

Source: Black Book Research™ Q1 2025

CLINICAL DATA INTEGRATION & INTEROPERABILITY

8. Real-Time Data Processing & Alerting

- Definition: Evaluates the system's ability to provide real-time notifications for clinical and operational updates.
- Assessment Metric: Clinician feedback on timeliness and relevance of alerts.
    - Evaluation Questions: Are alerts delivered in real-time or with delays? Does the alerting system help prevent clinical errors or improve response times?Can clinicians and administrators customize notifications based on priority?

OVERALL RANK	Q8 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.75	9.75	9.83	9.68	**9.76**
5	2	**EPIC**	9.63	9.90	9.43	9.79	**9.69**
2	3	**INTERSYSTEMS**	9.78	9.50	9.52	9.76	**9.64**
3	4	**INNOVACCER**	9.47	9.13	9.04	9.57	**9.30**
6	5	**ORACLE HEALTH**	8.82	9.51	9.47	8.80	**9.15**
12	6	**RHAPSODY**	8.86	8.40	8.70	8.77	**8.68**
10	7	**HEALTH CATALYST**	9.19	9.10	8.22	8.01	**8.63**
4	8	**AVAILITY**	8.91	8.94	8.40	8.13	**8.60**
7	9	**INOVALON**	8.69	8.43	9.04	7.79	**8.49**
18	10	**ORION**	8.51	8.47	7.98	8.06	**8.26**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

9. User Interface & Usability

- Definition: Measures intuitiveness and ease of use of the system's dashboard and management console.
- Assessment Metric: User ratings on system navigation, clarity, and learning curve.
    - Evaluation Questions: How easily can our staff navigate the system? Does it provide clear visualizations of data flow and interoperability? Are there frequent complaints about usability or a steep learning curve?

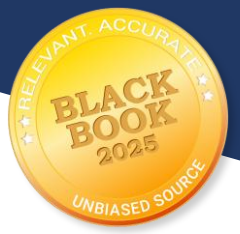
OVERALL RANK	Q9 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
2	1	**INTERSYSTEMS**	9.93	9.51	9.70	9.77	**9.73**
1	2	**INFOR**	9.49	9.63	9.82	9.85	**9.70**
3	3	**INNOVACCER**	9.46	9.61	8.98	9.74	**9.45**
5	4	**EPIC**	9.70	9.21	9.08	9.71	**9.43**
7	5	**INOVALON**	9.14	9.44	8.93	9.58	**9.27**
4	6	**AVAILITY**	8.87	9.43	8.86	9.10	**9.07**
12	7	**RHAPSODY**	9.06	9.13	7.46	8.72	**8.59**
6	8	**ORACLE HEALTH**	8.48	8.86	7.50	8.46	**8.33**
8	9	**INFORMATICA**	8.90	8.49	7.83	8.00	**8.31**
11	10	**REDOX**	8.24	9.05	7.81	7.58	**8.17**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

10. Problem Resolution & Troubleshooting Efficiency

- Definition: Assesses how quickly the system identifies and resolves integration errors.
- Assessment Metric: Time taken to resolve issues and availability of self-service error management tools.
    - Evaluation Questions: How quickly can we identify and fix integration issues? Are errors easy to diagnose without vendor intervention? Does the system provide self-service tools for IT and clinical teams?

OVERALL RANK	Q10 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.90	9.82	9.98	9.60	**9.83**
3	2	**INNOVACCER**	9.36	9.19	9.14	9.48	**9.27**
6	3	**ORACLE HEALTH**	8.97	9.18	8.88	9.73	**9.19**
2	4	**INTERSYSTEMS**	9.22	9.26	9.20	8.98	**9.17**
4	5	**AVAILITY**	8.98	9.01	8.86	8.99	**8.96**
5	6	**EPIC**	8.47	9.02	8.05	8.76	**8.85**
18	7	**ORION**	8.94	9.42	8.17	8.82	**8.84**
7	8	**INOVALON**	9.12	8.46	8.33	8.09	**8.50**
9	9	**LYNIATE**	8.72	8.24	8.73	7.99	**8.42**
8	10	**INFORMATICA**	8.09	8.46	7.75	8.33	**8.16**



CLINICAL DATA INTEGRATION & INTEROPERABILITY

11. Security & Compliance Capabilities

- Definition: Evaluates the system's adherence to HIPAA, GDPR, and other security regulations.
- Assessment Metric: Perceived security robustness, audit logging features, and incident response effectiveness.
    - Evaluation Questions: How well does it protect patient data against breaches and unauthorized access? Does it have built-in audit logging and reporting for compliance reviews? Does it align with our cybersecurity policies and risk management strategy?

OVERALL RANK	Q11 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
2	1	**INTERSYSTEMS**	9.81	9.71	9.67	9.89	**9.77**
1	2	**INFOR**	9.85	9.78	9.93	9.42	**9.75**
4	3	**AVAILITY**	9.48	9.90	9.38	9.71	**9.62**
3	4	**INNOVACCER**	9.72	9.58	9.31	9.07	**9.42**
9	5	**LYNIATE**	9.45	9.68	9.04	9.20	**9.34**
6	6	**ORACLE HEALTH**	9.42	8.94	9.52	8.93	**9.20**
8	7	**INFORMATICA**	9.40	8.79	8.92	9.50	**9.15**
10	8	**HEALTH CATALYST**	8.55	8.59	9.06	8.22	**8.61**
16	9	**PHILIPS**	9.06	8.81	7.28	8.08	**8.31**
13	10	**ELLKAY**	8.13	9.54	7.46	8.02	**8.29**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

12. Scalability & Future-Proofing

- Definition: Assesses the system's ability to scale with increasing data volumes and emerging trends.
- Assessment Metric: User confidence in the system's long-term viability.
    - Evaluation Questions: Can this solution handle increasing patient and transaction volumes? Does it support upcoming interoperability and AI advancements? Is the vendor consistently updating its product roadmap?

OVERALL RANK	Q12 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
6	1	**ORACLE HEALTH**	9.96	9.73	9.68	9.76	**9.78**
1	2	**INFOR**	9.68	9.89	9.83	9.52	**9.73**
8	3	**INFORMATICA**	9.15	9.31	9.76	9.16	**9.35**
2	4	**INTERSYSTEMS**	9.35	9.04	9.26	9.18	**9.21**
13	5	**ELLKAY**	8.78	9.22	9.20	8.62	**8.96**
16	6	**PHILIPS**	8.79	8.62	8.71	9.53	**8.91**
12	7	**RHAPSODY**	8.87	9.33	8.67	8.39	**8.82**
17	8	**QVERA**	8.65	8.18	9.40	8.90	**8.78**
4	9	**AVAILITY**	9.34	9.05	8.20	7.75	**8.59**
3	10	**INNOVACCER**	8.35	8.71	8.63	7.98	**8.42**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

13. Data Governance & Master Data Management (MDM) Support

- Definition: Measures the effectiveness of data governance policies and role-based access controls.
- Assessment Metric: Satisfaction with data governance tools.
    - Evaluation Questions: Can we define role-based access for different user types? Does it enforce consistent data entry and validation rules? How effectively does it maintain a single source of truth for patient records?

OVERALL RANK	Q13 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
2	1	**INTERSYSTEMS**	9.90	9.98	9.89	9.66	**9.86**
1	2	**INFOR**	9.75	9.81	9.98	9.78	**9.83**
4	3	**AVAILITY**	9.44	9.22	9.02	9.46	**9.29**
6	4	**ORACLE HEALTH**	9.34	9.51	8.98	8.92	**9.19**
3	5	**INNOVACCER**	9.16	9.34	8.87	8.99	**9.09**
9	6	**LYNIATE**	9.15	8.88	8.48	8.60	**8.78**
12	7	**RHAPSODY**	8.53	8.98	8.68	8.33	**8.63**
11	8	**REDOX**	9.08	8.23	8.48	8.39	**8.55**
15	9	**MULESOFT**	8.71	8.20	8.38	8.36	**8.41**
8	10	**INFORMATICA**	8.78	8.12	7.93	8.63	**8.37**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

14. AI-Driven Data Insights & Predictive Analytics

- Definition: Evaluates AI-driven decision support capabilities.
- Assessment Metric: User feedback on the usefulness of AI-driven insights.
    - Evaluation Questions: Does it provide meaningful AI-driven insights that impact patient care? Can the AI models be adjusted to reflect our organization's needs? Does AI integration help reduce readmissions, improve diagnoses, or streamline operations?

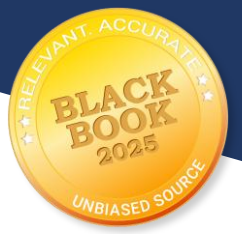
OVERALL RANK	Q14 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.79	9.87	9.89	9.68	**9.81**
2	2	**INTERSYSTEMS**	9.98	9.56	9.66	9.66	**9.72**
5	3	**EPIC**	9.89	9.70	8.93	9.57	**9.52**
6	4	**ORACLE HEALTH**	9.28	8.96	9.17	9.20	**9.13**
9	5	**LYNIATE**	9.90	9.10	8.29	9.18	**9.12**
4	6	**AVAILITY**	9.20	9.08	9.06	8.79	**9.03**
3	7	**INNOVACCER**	9.35	8.56	8.37	9.82	**9.03**
14	8	**PERSIVIA**	8.73	8.74	9.07	9.34	**8.97**
7	9	**INOVALON**	9.37	9.10	8.66	8.11	**8.81**
16	10	**PHILIPS**	8.25	9.02	8.05	8.16	**8.37**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

15. Cost-Effectiveness & ROI Perception

- Definition: Measures the perceived financial return on investment.
- Assessment Metric: User feedback on whether the solution delivers cost savings.
    - Evaluation Questions: Are the operational cost savings significant compared to our investment? How does the solution's pricing compare to competitors? Is the financial ROI measurable within 12-24 months?

OVERALL RANK	Q15 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.87	9.82	9.76	9.68	**9.78**
3	2	**INNOVACCER**	9.50	9.55	9.36	9.55	**9.49**
2	3	**INTERSYSTEMS**	9.63	9.75	8.77	9.30	**9.36**
14	4	**PERSIVIA**	9.10	9.26	8.94	8.92	**9.06**
4	5	**AVAILITY**	8.96	9.02	9.15	9.06	**9.05**
13	6	**ELLKAY**	8.89	9.33	9.00	8.17	**8.85**
6	7	**ORACLE HEALTH**	8.64	8.72	8.87	8.55	**8.70**
10	8	**HEALTH CATALYST**	8.84	8.94	8.18	8.80	**8.69**
8	9	**INFORMATICA**	8.47	8.70	9.20	7.92	**8.57**
7	10	**INOVALON**	7.67	8.56	8.82	8.74	**8.45**



CLINICAL DATA INTEGRATION & INTEROPERABILITY

16. Vendor Support & Customer Service Quality

- Definition: Evaluates vendor responsiveness and technical expertise.
- Assessment Metric: User ratings on ticket resolution times and support availability.
    - Evaluation Questions: How quickly does the vendor respond to support tickets? Is there a dedicated account manager or escalation path for urgent issues? Does the vendor offer robust training and ongoing guidance?

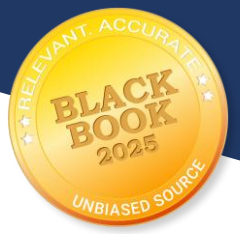
OVERALL RANK	Q16 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
2	1	**INTERSYSTEMS**	9.73	9.82	9.92	9.61	**9.77**
1	2	**INFOR**	9.75	9.74	9.59	9.71	**9.70**
4	3	**AVAILITY**	9.60	9.21	9.70	9.20	**9.43**
9	4	**LYNIATE**	9.32	8.69	9.46	9.36	**9.21**
5	5	**EPIC**	9.17	9.38	9.10	9.13	**9.20**
3	6	**INNOVACCER**	9.07	9.02	9.46	8.42	**8.99**
7	7	**INOVALON**	9.17	9.47	9.29	8.03	**8.99**
18	8	**ORION**	8.60	8.77	9.08	8.92	**8.84**
8	9	**INFORMATICA**	8.41	8.42	9.16	7.69	**8.42**
6	10	**ORACLE HEALTH**	8.66	9.29	7.56	8.17	**8.42**

CLINICAL DATA INTEGRATION & INTEROPERABILITY

17. Integration with Population Health & Value-Based Care Models

- Definition: Assesses the solution's support for population health and SDoH initiatives.
- Assessment Metric: Effectiveness in aligning with alternative payment models.
    - Evaluation Questions: Can this solution support analytics for risk stratification and care coordination? Does it enable seamless integration with public health and payer programs? How does it assist in closing care gaps and improving health equity?

OVERALL RANK	Q17 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.92	9.81	9.86	9.92	**9.88**
7	2	**INOVALON**	9.62	9.56	9.17	9.36	**9.43**
14	3	**PERSIVIA**	8.89	9.32	9.69	9.12	**9.26**
2	4	**INTERSYSTEMS**	9.18	8.94	9.81	8.86	**9.20**
3	5	**INNOVACCER**	9.32	9.41	9.06	8.94	**9.18**
10	6	**HEALTH CATALYST**	9.05	8.84	8.97	9.09	**8.99**
5	7	**EPIC**	8.92	8.74	9.02	9.25	**8.98**
8	8	**INFORMATICA**	8.89	8.91	9.31	8.64	**8.94**
16	9	**PHILIPS**	9.25	8.80	8.60	9.02	**8.92**
11	10	**REDOX**	9.01	8.88	8.24	8.77	**8.73**



18. Innovation & Market Differentiation

- Definition: Measures unique features and competitive advantages.
- Assessment Metric: User perceptions of how the solution stands out.
    - Evaluation Questions: What competitive advantages does this solution offer over others? Has the vendor introduced cutting-edge capabilities? Does this system align with our long-term digital health transformation goals?

OVERALL RANK	Q18 CRITERIA RANK	CLINICAL DATA INTEGRATION & INTEROPERABILITY VENDOR	HOSPITALS & HEALTH SYSTEMS	AMBULATORY PROVIDERS & PHYSICIAN PRACTICES	POST-ACUTE & LONG TERM CARE PROVIDERS	BEHAVIORAL HEALTH & SPECIALTY CARE PROVIDERS	MEAN
1	1	**INFOR**	9.51	9.86	9.82	9.84	**9.76**
2	2	**INTERSYSTEMS**	9.34	9.27	9.50	9.92	**9.51**
4	3	**AVAILITY**	9.34	9.36	9.60	9.51	**9.45**
3	4	**INNOVACCER**	9.89	9.28	9.46	8.95	**9.40**
7	5	**INOVALON**	9.10	8.96	8.99	9.11	**9.04**
5	6	**EPIC**	9.15	9.57	8.68	8.68	**9.02**
6	7	**ORACLE HEALTH**	8.89	8.86	9.06	8.71	**8.88**
9	8	**LYNIATE**	8.46	9.01	9.78	8.57	**8.71**
8	9	**INFORMATICA**	8.90	8.45	9.25	8.13	**8.68**
10	10	**HEALTH CATALYST**	8.96	8.20	8.07	8.43	**8.42**

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