

ENFORCEMENT ALERT

Information Blocking



September 4, 2025

Stopping information blocking to unleash innovation and empower patients and their health care providers with friction-free information is a top priority for the Secretary of the Department of Health and Human Services and the Administration. The Office of Inspector General (OIG) and the Office of the Assistant Secretary for Technology Policy/Office of the National Coordinator for Health Information Technology (ASTP/ONC) are issuing this enforcement alert to signal our joint commitment to intensify enforcement activity, dedicate additional resources, and take decisive action to detect and end information blocking.

The availability of electronic health information when and where it is needed is a critical element of a high-functioning health care system. Information blocking threatens patient care and undermines efforts by providers, payers, and others to make the health system more efficient and to improve quality of care. It puts at risk the substantial taxpayer investments made to encourage and support the adoption and use of technologies such as electronic health records.

What Is Information Blocking?

The 21st Century Cures Act (Cures Act) defines information blocking as a practice by an individual or entity that is likely to interfere with, prevent, or materially discourage the access, exchange, or use of electronic health information except as required by law or as specified in an information blocking exception.

ASTP/ONC has issued regulations addressing information blocking, including identifying limited exceptions—such as to protect privacy or ensure security—where an entity will not be considered to have committed information blocking if its actions meet the conditions of the exceptions ([45 CFR Part 171](#)).

What Are the Consequences for Information Blockers?

Individuals and entities found to have engaged in information blocking may face several types of enforcement actions:

OIG Civil Monetary Penalties. OIG has a long history of investigating serious misconduct that impacts HHS programs and the people they serve. OIG has the authority to investigate claims of information blocking and impose civil monetary penalties (CMPs) against individuals and entities that commit information blocking ([42 U.S.C. 300jj-52](#)). Specifically, OIG may impose CMPs of **up to \$1 million** per violation against:

- Health IT developers of certified health IT,
- Entities offering certified health IT,
- Health information exchanges (HIEs), and
- Health information networks (HINs).

OIG will prioritize enforcement where practices cause patient harm, significantly impact or impair a provider's ability to deliver patient care, are of long duration, or cause financial loss to Federal health care programs or other Government or private entities. Additional information about OIG's investigative process and OIG enforcement priorities may be found on [OIG's information blocking page](#).

ASTP/ONC Certification Program Ban and/or Termination of Certification. ASTP/ONC can ban a developer of certified health IT that information blocks from the ONC Health IT Certification Program and may also terminate the certification of health IT involved in information blocking. ASTP/ONC intends to investigate and take swift action where warranted. Additional information can be found on [ASTP/ONC's information blocking page](#).

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CMS Health Care Provider Disincentives. Under the Cures Act, OIG may investigate and refer providers that engage in information blocking to the Department, which may impose appropriate disincentives. CMS has established specific disincentives that it may apply to the following providers:

- Eligible hospitals and critical access hospitals participating in the Medicare Promoting Interoperability Program;
- Merit-based Incentive Payment System eligible clinicians (including a group practice); and
- A Medicare Shared Savings Program accountable care organization (ACO), ACO participants, and ACO providers/suppliers.

More information about CMS information blocking disincentives is found in the [final rule](#).

The Department is committed to using all available authorities to hold information blockers accountable and prevent future violations. OIG and ASTP/ONC are coordinating closely with each other and with other Department partners.

How to Avoid Information Blocking

Voluntary compliance now can prevent serious consequences later. Stopping information blocking protects patients and strengthens the health care system. If you or your organization are engaged in practices that could constitute information blocking, now is the time to bring those practices into compliance. The statutory and regulatory framework is in place, and enforcement is active. More information on compliance with information blocking may be found here:

- [ASTP/ONC's information blocking page](#)
- [OIG's information blocking page](#)

How to Report Suspected Information Blocking

If you believe you are the victim of information blocking, are aware of information blocking practices, or have seen them happen, your voice matters. Sharing your experience can help protect patients, improve care, and strengthen our health system for everyone. We want to hear from you.

The preferred way to report is through [ASTP/ONC's Information Blocking Portal](#). Complaints reported through the portal are shared with OIG. Reports may also be [submitted online through the OIG Hotline](#) or by calling 1-800-HHS-TIPS (1-800-447-8477).

When submitting a report:

- Please provide as much detail as you can about the suspected information blocking. Health care or IT expertise is not needed to submit a report.
- **You may submit reports anonymously**, though providing your contact information can help us follow up and better understand the situation.
- Your identity and the details you share are legally protected, including from disclosure [under the Freedom of Information Act](#). OIG and ASTP/ONC will protect your identity to the extent permitted by law.

Your story can make a difference!

Each report may help stop harmful practices, supports fair access to information, and ensures that the health care system works for the people it is meant to serve.