Supplemental breakdown of the Epic mechanism of action in my case:

EHR Data Transmission Architecture (The "How")

1. The Source Node (2021): KU Physicians Network (KS)

Infrastructure: Epic / MyChart.

Mechanism: Data entered here is stored in the Epic Chronicles database. Administrative and behavioral tags are hardcoded into the Global Problem List, serving as a permanent digital identity within the national Epic ecosystem.

2. The Corporate Bridge (4/1/2022): SCL Health & Intermountain Health Merger

Infrastructure: SCL Health (KS/CO) was already an established Epic / MyChart node.

Mechanism: Upon merger with Intermountain Health (NV/UT/ID/MT), a Common Corporate Data Environment was legally and technically established. This granted Intermountain in Nevada legal custody and administrative access to the SCL/Kansas Epic database years before the Nevada "Go-Live."

3. The Vertical Payer Bridge (3/2023–1/2024): Humana, Aetna Medicare Part C (NV)

Infrastructure: Delegated Medical Group Management by Intermountain Health.

Mechanism: As the Payer changed (Humana to Aetna), the Data Custodian remained constant: Intermountain Medical Group. Because they already possessed the SCL/Kansas merger data, the "blacklist" resided in their central administrative backbone regardless of the insurer.

4. The Platform Expansion (1/2025): Alignment Healthcare Network Integration

Infrastructure: Integration of previously independent Alignment nodes into the Intermountain Healthcare Network.

Mechanism: This expansion allowed the Intermountain data footprint to absorb and reconcile previously "independent" patient databases in Nevada, closing the regional data loop. Switching to Alignment Part C did not facilitate leaving the tainted Electronic Health Record behind.

5. The Automated Lockdown (9/6/2025): Intermountain Systemwide Epic Go-Live

Infrastructure: Transition from 8 legacy systems to a single Unified Epic Instance.

Mechanism: Automated Care Everywhere Reconciliation. The system performed a global "handshake" query of the national Epic/MyChart database. It reconciled the 2021 KU and SCL profiles and instantly imported those administrative tags into the entire Nevada Intermountain/Epic monopoly.

6. The Payer Shift Isolation (3/1/2026): Original Medicare / Plan G

Infrastructure: Change in Insurance Payer only.

Mechanism: Because the 9/6/2025 Sync had already occurred and the data was residing at the Provider Level (the clinics), changing the Payer did not facilitate leaving the tainted EHR behind. The software architecture superseded the change in insurance, ensuring the blockade persisted.