

Patient Portals, PHRs and Consumerism

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Agenda



- Define consumerism
 - Why is this important?
- Define Personal Health Record (PHR)

Agenda



- Define patient portals
 - What is the difference?
 - Who is using them?
 - What is the benefit gained?

Agenda



- HITECH and HIPPA considerations
 - Privacy
 - Access
- Top 10 ways to engage patients

Consumerism

Why is it a Good Thing?



What if air travel worked like healthcare?
YouTube (Altons) The New

Healthcare Consumerism

- Consumerism – “the promotion of a consumer’s interest”. Webster’s Dictionary, first used in 1944.
- Also known as patient-driven healthcare

Healthcare Consumerism

Why now?

- Increased cost shifting to consumer
- More information readily available online
- Personal access to large storage capacity media
- Changes in doctor-patient dynamic

Healthcare Consumerism



What does consumerism in U.S. healthcare look like?

- Pick your own doctor
- FSA and HSA accounts
- Testing for strep with at-home kits

Healthcare Consumerism



- Choice of insurance plans
- Utilization of alternative and complimentary medicine
- Patients can review and correct their medical records

All of these equal EMPOWERED patients

Healthcare Consumerism



“Consumerism is such a powerful force in healthcare that it is a defining characteristic between its past and its future that will impact every stakeholder’s value proposition and business models. Consumerism is not a fad; it is a trend of enormous significance.”

-Deloitte Center for Health Solutions

Personal Health Record

PHR

PHR – “typically a health record that is initiated and maintained by an individual.” Wikipedia. First mentioned in June 1978, PubMed.

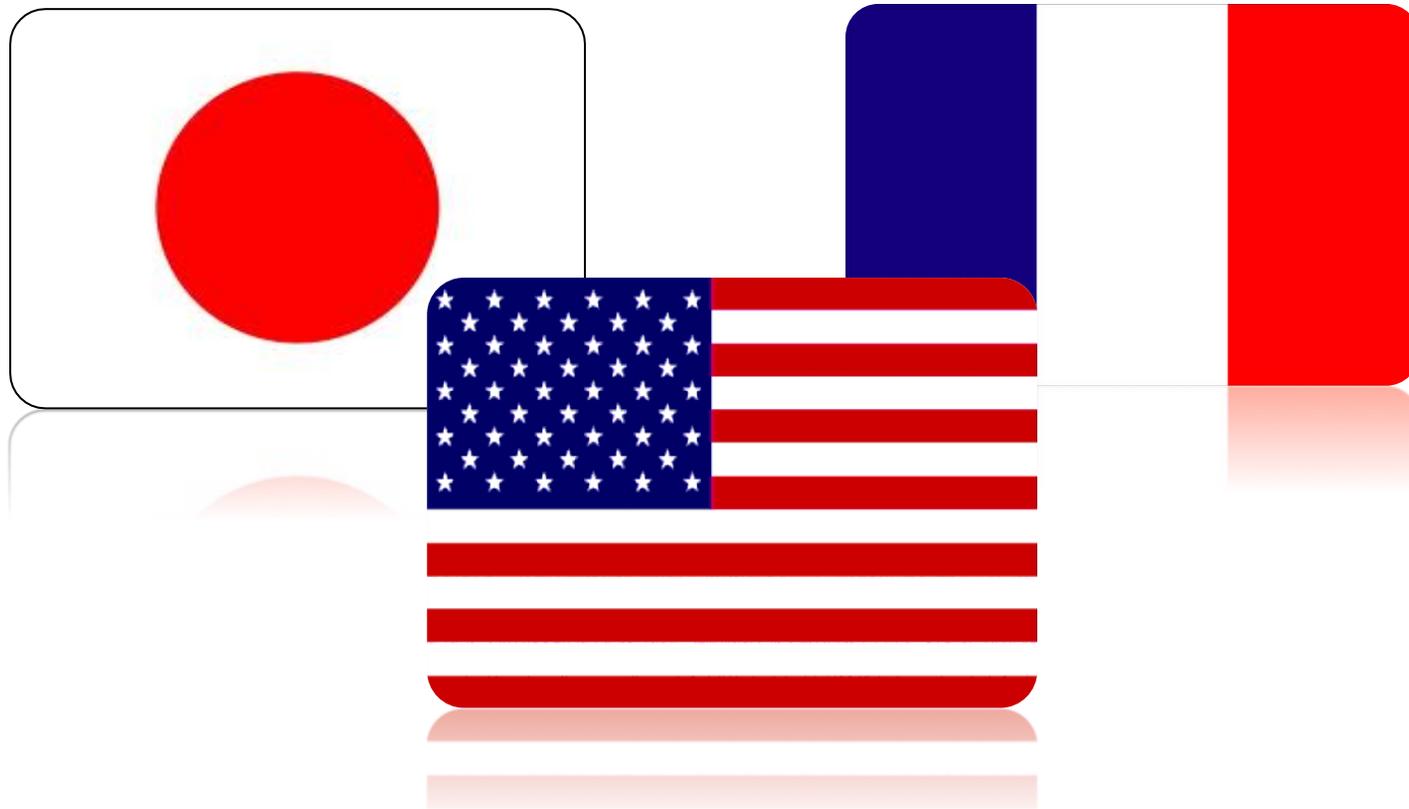
Early PHRs



circa 1953

Global PHRs

It's really *not* a small world after all!



Patient Portal

Defined by communication and more fluid by nature

- Patients can view results and reports
- Patients can communicate with providers

Lines Are Blurring

No standard or defining structure to what can be called a PHR or a patient portal

- Google Health and Microsoft HealthVault call themselves PHRs
- They are not static documents (CCR/CCD, communication with retail pharmacies)

Apples and Oranges?

Can it be a PHR and not a patient portal? Or can it be a patient portal and not a PHR?

- My data on a thumb drive
- Patient scheduling portal or bill payment portal

Can it be both? Most definitely, yes!



Online PHR

PHR accessible via standard Internet protocols and security measures that also offers provider communication and record exchange tools and capabilities.

Source Matters

Types of PHRs

- Provider-based such as Veteran's Administration, Kaiser Permanente and insurance companies (Aetna)
- RHIO/HIE based
- Health data banks
- Public Internet based

Who Uses PHRs?

- Sample demographics - Aetna 55% female, Kaiser Permanente 58.6% female
- California Healthcare Foundation Survey 2010
 - 15% California
 - 11% West
 - 6% Northeast
 - 5% South and Midwest

Sources of PHRs

California Healthcare Foundation 2010

- Health insurance plan 51%
- Doctor/healthcare provider 26%
- Employer 4%
- Other 6%
- Not sure 13%

Who Uses PHRs?

2011 Partners study

- Blacks and Hispanics half as likely
- High income 14% more likely
- Once access to PHR is established, the use is no different
- Is adoption of PHRs the main challenge?

Who Uses PHRs?

PricewaterhouseCoopers 2011

14% of adults in U.S. have electronic access to their health care information. Of that 14% -

- 58% can check lab reports
- 56% can read prescription medication orders and history
- 53% can see their immunization records
- 52% can view upcoming health care appointments

Better Outcomes

Does PHR Equal Better Outcomes?



- Better informed patients have better outcomes – disease management, medication therapy, family planning, mental health
- PHRs increase patient education, therapy awareness and engage patients and family in care

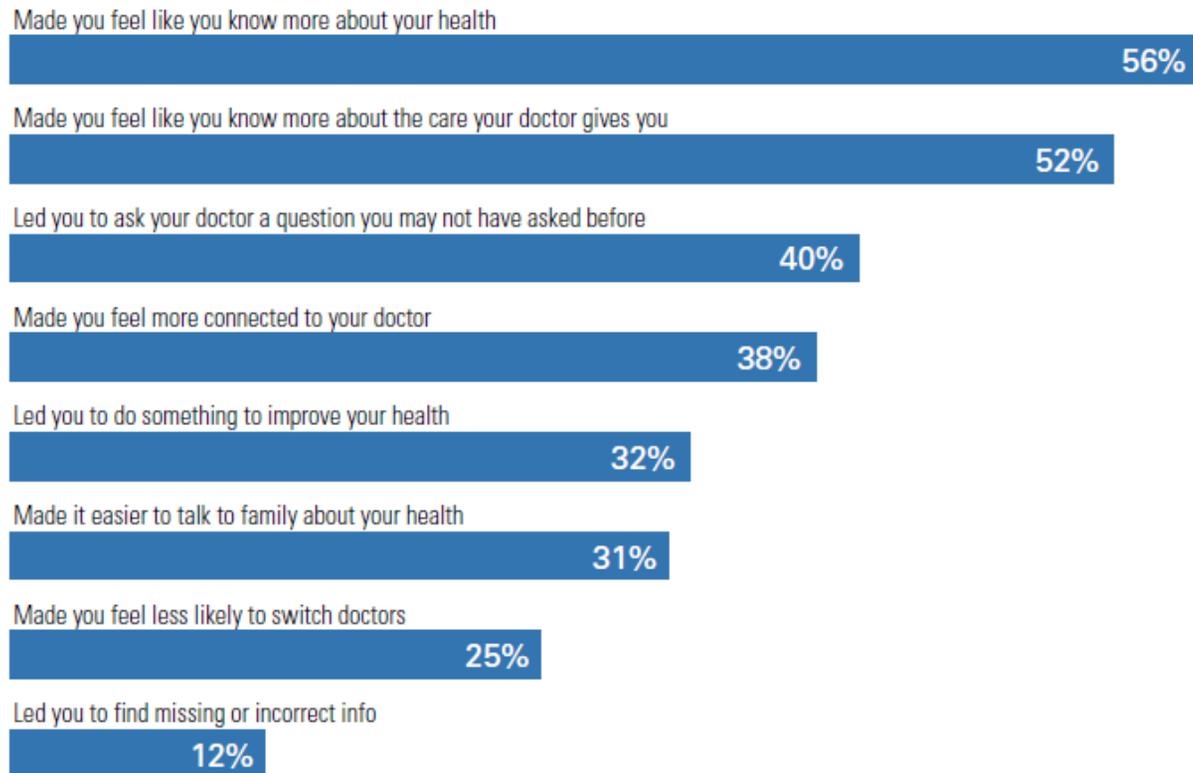
Better Outcomes

Does PHR Equal Better Outcomes?

Using a PHR...

PERCENT WHO ANSWERED "YES"

BASE: PHR USERS (n=266)



Source: Lake Research Partners, national health IT consumer survey, 2009–2010.

Who's Data is it Anyway?

Patient's right to health information vs. physician's business property



Privacy Rule effective April 14, 2001

- Ensures patient access to medical records, ability to copy and make amendments
- Obtain patient consent before releasing information in records
- Punishment for violating rules

HITECH and Privacy

Round 2

HITECH (2009), Subtitle D added powerful privacy updates to HIPAA

- Apply the HIPAA privacy and security requirements directly to business associates
- Establish mandatory federal security breach reporting requirements for HIPAA covered entities and their business associates

HITECH and Privacy

Round 2

- Create new privacy requirements for HIPAA covered entities and their business associates, including new accounting requirements for EHR, restrictions on marketing and fundraising
- Establish new criminal and civil penalties for noncompliance and new enforcement responsibilities

Opt-in or Opt-out

- Definition and national standards for patients' rights to have data included in exchanges still lacking
- Currently patient is an opt-in until they decide to opt-out

Opt-in or Opt-out

- ONC to define national standard with granular access for patients regarding the exchange of data among providers
- National patient IDs may help with the access permissions

Fragmented Laws

Laws governing
PHRs and PHR
privacy are
fragmented
among the 50
states and federal
government



HITECH Meaningful Use

Stage 1

EH Objective: Provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, allergies, discharge summary and procedures) upon request.

Measure: At least 50% of all patients who request an electronic copy of their health information are provided it within 3 business days.

EH Objective: Provide patients with an electronic copy of their discharge instructions at time of discharge, upon request.

Measure: At least 50% of all patients who are discharged from an eligible hospital and who request an electronic copy of their discharge instructions and procedures are provided it.

HITECH Meaningful Use

Stage 1

EP Objective: Provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, and medication allergies) upon request.

Measure: At least 50% of all patients who request an electronic copy of their health information are provided it within 3 business days.

MENU SET for EPs

Objective: Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists, allergies) within 4 business days.

Measure: At least 10% of all unique patients seen by the EP are provided timely electronic access to their health information.

HITECH Meaningful Use

Stage 2

What's next?

- 20% of patients must have electronic access to results via web portal
- Matching patients digitally to records. Provider and patient digital IDs
- Increased security for authentication. Is user name and password sufficient?

10 Considerations

For Engaging Patients

1. Your patients are already getting and using health information online. Shouldn't they be getting more from you?
2. Patients are looking to connect with others about healthcare. Isn't it time for you to enter this dialogue in a meaningful way?

10 Considerations

For Engaging Patients

3. It's not just young people who want to engage with your hospital and physicians online. Are your patient outreach efforts targeted based on solid segmentation research?
4. Family caregivers can improve patient outcomes but lack access to tools that can ease the burden of their work. Are you supporting them sufficiently with your services?

10 Considerations

For Engaging Patients

5. Your patients trust you more than any other source for their personal health information. Are you leveraging that trust?
6. Patients are mobile and are already accessing and documenting health information wherever they are. Are you meeting them where they are?

10 Considerations

For Engaging Patients

7. There are certainly many concerns that come with patient engagement. Are you taking advantage of the many strategies and tactics to protect the security of your hospital and the privacy of your patients?
8. Patient engagement improves health outcomes and it doesn't have to be expensive. Are you taking advantage of the variety of inexpensive tools available to you?

10 Considerations

For Engaging Patients

9. Don't think of patient engagement as just another ROI business case. Are you placing too many barriers on your team's creative patient engagement efforts?
10. Changing payment models means that patient engagement is no longer an *option*. Are you still discussing its priority?

We Can Help!



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