Too Many Patient Portals – What Can You Do About It?

1st March 2016

Santosh Mohan, MMCi, CPHIMS
@santoshSmohan
IT Management Fellow, Stanford Health Care

DISCLAIMER: The views and opinions expressed in this presentation are those of the author and do not necessarily represent official policy or position of HIMSS.
Conflict of Interest

Santosh Mohan, MMCi, CPHIMS

Has no real or apparent conflicts of interest to report.
Agenda

1. The Challenge: Patient Portal Sprawl
2. Approaches to Portal Integration
3. Polling and Discussion
Let’s discuss how to:

• Formulate an effective portal integration strategy approach by reviewing various emerging approaches against specific situations and needs.

• Organize the immediate value of offering an integrated view of data with the long-term goal of offering a single point of online access for all patient offerings.

• Develop a plan to connect with patient-owned tools and incorporate patient-generated data.
Value Suite STEPS™: Satisfaction

- Service quality
- Easy access and unified experience
- Care coordination
- Data accuracy and timeliness
- Portal registrations and usage

- Uncertainty with logins/passwords
- Need to learn and navigate multiple portals
- Data inconsistencies
- Consent issues
1  The Challenge: Rise of the Portals

2  Approaches to Portal Integration

3  Polling and Discussion
Making Sense of the Portals Soup

**Tethered Portals**
In broad terms, a tethered portal refers to a solution that is tied to a vendor EHR system and an individual organization or a practice.

**Stand-alone portals / Portal integration platforms**
Also called “untethered portals”. More likely to be EHR-agnostic, independent offerings.

**HIE-sponsored portals**
Untethered solutions offered by private, statewide, or regional HIEs to their respective networks of providers and participants.

**Niche portals offering bedside and other interactive patient services**
Interactive solutions that provide functionality for education, entertainment, satisfaction surveys, service requests etc.

**Personal Health Records (PHRs)**
Platforms offering an independent location for patients to store, control, and manage their health information, and to make parts, or all, of it available to various providers as they see fit.
I met a patient recently who has **advanced cancer**. She accesses care from **multiple providers** in **multiple organizations**. The various **EHRs remain isolated and unsynchronized**. She can access some of her records online, but she must **log into six separate portals**. After each encounter, she **sends messages to five other physicians requesting they update the data** in their EHR.

*Tim Burdick, former CMIO of OCHIN, in his testimony at an ONC hearing*

Nick Dawson @nickdawson · Nov 14

I have mychart accounts with 4 health systems. All are sending me flu shot reminders. I’ve had a flu shot. None let me update the record.
Many Reasons Contributing to Complexity
Examples of Provider-Specific Situations Leading to Portal Sprawl

1. Use of separate portals for inpatient and outpatient settings

2. Additional portals with special functionality for disease-specific conditions

3. Payer-sponsored tools made available through ACO arrangements with health plans

4. Non-consolidation of patient-facing solutions after M&A to maintain separate identities

5. Availability of specialty solutions from homecare, extended care, LPAC, and other care settings, etc.
What this Means for Patients (and Providers)

Uncertainty about which portal to visit and the accuracy and timeliness of the information contained therein

Need to learn to navigate multiple portals—each of which might look and function differently—often failing expectations of easy access and unified experience

Data inconsistencies such as multiple instances of self-reported data; consent issues

Exacerbates challenges of chronic care management and multi-morbidity care coordination across various settings of care

Confusion from multiple logins and passwords

Source: Wilkins, S. [@Healthmessaging]. "Why is pt portal use so low? Maybe it’s because pts. have too many & they don’t play well together #HIT #HIMSS #EHR" Tweet. Date: 09/30/2014. https://twitter.com/Healthmessaging/status/516977568306970624
1. The Challenge: Rise of the Portals

2. Approaches to Portal Integration

3. Polling and Discussion
# Patient Portal Market Overview

<table>
<thead>
<tr>
<th>Tethered Portals</th>
<th>Stand-alone portals / Portal integration platforms</th>
<th>HIE-sponsored portals</th>
<th>Niche portals offering bedside and other interactive patient services</th>
<th>Personal Health Records (PHRs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allscripts</td>
<td>Influence Health</td>
<td>Indiana HIE</td>
<td>GetWellNetwork</td>
<td>CareSync</td>
</tr>
<tr>
<td>Cerner</td>
<td>Medfusion</td>
<td>Kansas Health Information Network</td>
<td>OneView</td>
<td>Microsoft HealthVault</td>
</tr>
<tr>
<td>Epic</td>
<td>RelayHealth</td>
<td>MyKeyCare</td>
<td>SONIFI Health</td>
<td>PicnicHealth</td>
</tr>
</tbody>
</table>

©HIMSS 2016
Four Approaches to Integration

Common Landing Page
Create a single, master landing page for all portals under overall branding with common credentialing and authentication SSO or reverse proxy.

Master Portal
Build a consolidated/ master/ special portal that takes input from all other systems, including EHRs and HIEs.

HIE-Based Portals
Use an HIE-based portal that consolidates patient data from all network participants.

Synchronized Portals
Synchronize the data to ensure all portals have a more comprehensive view of the patient record.
# The Pros and Cons

<table>
<thead>
<tr>
<th>Approach</th>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Master Landing Page</strong></td>
<td>• Least expensive and most achievable approach in short term&lt;br&gt; • Creates a central starting point for online access and provides a single sign-on platform&lt;br&gt; • Allows for launching common features and common marketing&lt;br&gt; • Best approach if you have separate EHRs with tightly tethered portals</td>
<td>• Doesn’t solve the under-the-covers integration of patient records&lt;br&gt; • Does not provide patients with a common look and feel&lt;br&gt; • May lead to some confusion and frustration for patients because a complete view of their record may not be available in any of their portals</td>
</tr>
<tr>
<td><strong>Master Portal</strong></td>
<td>• Popular approach for large organizations&lt;br&gt; • Provides a common view to the patients</td>
<td>• Can be expensive and time consuming to build or implement&lt;br&gt; • Data normalization can be challenging&lt;br&gt; • Tends to reduce the types of interactions patients can have to the lowest common denominator&lt;br&gt; • Will not fully replicate the rich experience of tethered portals</td>
</tr>
<tr>
<td><strong>Synchronized Portals</strong></td>
<td>• Enables each partner to have their own portal while still providing the patient with all the relevant information</td>
<td>• Does not resolve issues with multiple logins or patients having to learn to navigate multiple portals&lt;br&gt; • Requires significant data integration&lt;br&gt; • Complexity increases as more partners are added</td>
</tr>
<tr>
<td><strong>HIE-Based Portals</strong></td>
<td>• Establishes a portal with connectivity across the network&lt;br&gt; • Providers can share patient participation credit for MU by contribution to shared portal&lt;br&gt; • It is less expensive; sharing of common functionality and portal costs rolled into participation fee make it affordable</td>
<td>• Potential challenges with patient matching and flow of information&lt;br&gt; • Absence of full integration with EHRs limits functionality&lt;br&gt; • Creating reports for MU attestation can be a challenge</td>
</tr>
</tbody>
</table>
**Resurgence of the PHR**

Promising Solution to Address Portal Fragmentation?

- Offer patients ownership and control
- Provide a common location to view records
- Can become source of data for providers
- Do not offer rich experience of a provider-based portal

Adoption has lagged due to various reasons, but provider and consumer attitudes continue to evolve.

**PHR platforms improving in functionality—offer features that were lacking in the early versions.**

**Action Items:**

1. Continue to explore other ways to consolidate portals, but stay abreast of PHR market.

2. Consider building necessary capabilities for integrating with PHRs to exchange and update patient records and provide other customer service aspects as desired by patients.
Key Considerations

Critical Factors to Evaluate When Integrating Portals

Patient-specific Considerations

- How will the patient authenticate to use the websites?
- How will the patient’s records be integrated?
- How will the patient access website features and functions?

Provider-specific Considerations

- **Level of integration:** Different circumstances call for different solutions
- **Strategy:** Planning for long term but remaining flexible in the near term
- **Privacy and Security:** You can only be as secure as the weakest link in the network
The Road Ahead
“Perfect Storm” Creates Tremendous Opportunity

Market Factors
- Evolving standards such as FHIR®
- Emerging API Ecosystems
- Meaningful Use (Stage 3)
- Interoperability Consortia

Consumerism and Awareness
- #DataIndependenceDay
- Vocatus Project
- OpenNotes

Evolving Industry Standards
Rising Consumer Focus
1 The Challenge: Rise of the Portals

2 Approaches to Portal Integration

3 Polling and Discussion
Instant Poll #1
Is Your Portal Adoption Challenged by Competing Portals?

a) Not really

b) Only in a very limited way

c) Absolutely

d) Don’t know / Can’t say
Instant Poll #2
How Important Is Portal Access to Your Service Quality Strategy?

a) Very important
b) Important
c) Somewhat important
d) Not important
Instant Poll #3
Is Your Organization Addressing the “Portal Sprawl”?

a) Yes, with one or more of these four approaches

b) Yes, but with a different approach

c) Not at this time

d) Not applicable
Instant Poll #4

Do You Think a Patient Managed Portal (PHR) Is a Usable Approach?

a) Yes

b) No

c) I have no opinion
Value Suite STEPS™: Satisfaction

- Service quality
- Easy access and unified experience
- Care coordination
- Data accuracy and timeliness
- Portal registrations and usage

- Uncertainty with logins/passwords
- Need to learn and navigate multiple portals
- Data inconsistencies
- Consent issues

http://www.himss.org/ValueSuite
©HIMSS 2016
Q&A and Contact Information

Santosh Mohan, MMCi, CPHIMS
Health Care IT Industry Analyst
santosh.mohan@fuqua.duke.edu
LinkedIn: [www.linkedin.com/in/santoshmohan](http://www.linkedin.com/in/santoshmohan)
Twitter: @santoshSmohan