Using Patient Portals in Ambulatory Care Settings

Electronic health records (EHRs) that directly engage patients through a patient portal can be a powerful platform for increasing access, empowering patients, supporting care between visits, and improving health outcomes.

Patient portals can enhance patient-provider communication and enable patients to check test results, refill prescriptions, review their medical record, and view education materials. In addition, patient portals can simplify administrative tasks such as streamlining registration, scheduling appointments, and providing patient reminders. They also allow practices to generate electronic statements and facilitate online payments.

| “When we first rolled out the portal to the doctors they thought, ‘I’m not going to have time; this is going to be a burden.’ Then they realize it actually cuts down on the phone calls and the back and forth.”  *— Tracy Morris, Executive Director Primary Health Medical Group* |
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| *Patients pay more attention and become more engaged in their health and medical care when they have easy access to their health information online.*   * *California Health Care Foundation, 2011* |
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# Meaningful Use Requirements

Medical practices can meet a number of the meaningful use requirements by using a robust patient portal. The importance of the patient portal will increase with higher patient engagement thresholds for Stages 2 and 3.

## Stage 1 Core Requirements

* Provide patients with an electronic copy of their

health information.

* Provide patients with a clinical summary of the

office visit.

* Enter or modify personal or demographic information.

## Stage 1 Menu Options

* Send reminders to patients for preventive and

follow-up care.

* Provide patients with timely electronic access to

their health information.

* Identify and provide patient-specific educational resources.

# Patient Portals: Common Concerns and the Facts[[1]](#endnote-1)

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| Concern | Facts |
| Providers will be flooded with email messages from patients | Rather than being inundated with messages, **providers report increased** **efficiency** and appreciate being able to respond to patients at their convenience. Evaluation studies find that telephone volume decreases when secure messaging is introduced. |
| Patients may use messaging inappropriately. | Studies find that **the communication content of patient messages tends to be appropriate**, addressing non-urgent care issues. Best practice is to educate patients about when and how to use secure messaging. |
| Clinicians will be unable to bill time for communicating with patients on the portal and the practice will lose revenue. | Portal features have been found to **provide cost savings** by decreasing indirect and direct labor costs, such as mailing costs for lab results, online billing questions versus telephone, online appointment scheduling, and online appointment reminders. |
| Patients will be confused or upset by information contained within the EHR. | Best practices for displaying test results include **providing a brief explanation and guidance for any follow**-**up** along with the results. |
| Patients won’t adapt to using a patient portal. | **A majority of consumers favor using online tools** to communicate with providers, obtain lab results online, and make appointments. Medical practices have had success in getting a wide range of patients—including the elderly, lower income, and those with chronic illnesses—to use a patient portal. |

# Tips for Launching the Portal

* **Advertise the portal** by posting signs, using telephone on-hold messages, distributing flyers and letters to patients, and staff wearing “Ask me about the portal” buttons.
* **Make it everyone’s job to encourage using the portal,** from front-desk and telephone staff to physicians. Develop talking points for staff that encourage patients to sign up and use the portal.
* **Develop policies and procedures** for response times for messages and systems for routing and responding to messages.
* **Phase in the portal rollout** by pilot testing it with a few physicians or clinical sites first. Start by activating a few features and rollout new features over time.
* **Minimize potential loss of patient interest** by simplifying the registration process**.** Try bulk enrollment or having patients register at kiosks in the clinic. Designate staff to assist patients and troubleshoot.
* **Educate patients** about what kinds of communication are appropriate via the portal, how and when providers will use messaging, and when to check the portal for lab results.

**Talking Points to Introduce Patients to the Portal:**

* Do you use e-mail? The portal is just a secure e-mail system that we can use to communicate.
* You can send me a message and it goes right into your chart, so I have all of your information at hand when I read it and respond.
* If you use it and find you don’t like it, you don’t have to continue to use it. Just let us know.
* It’s really very easy to use. If you use the Internet, you’ll most likely find the portal helpful and easy to navigate.

*(Source: Primary Health Medical Group)*

1. **Sources**

   Byrne, J.M., Elliott, S., & Firek A. (2009).Initial experience with patient-clinician secure messaging at a VA Medical Center*. Journal of the American Medical Informatics Association*, 16, 267–270. Retrieved from

   <http://171.67.114.118/content/16/2/267.full.pdf+html>

   Emont, S. (2011). *Measuring the impact of patient portals: What the literature tells us*. Retrieved from the California Healthcare Foundation website:

   <http://www.chcf.org/publications/2011/05/measuring-impact-patient-portals>

   Electronic Health Records in Action: Stories of Meaningful Use

   * Blackstone Valley Community Health Center (Spring 2011)
   * Dover Family Physicians (Spring 2011)
   * Primary Health Medical Group (Winter 2011)
   * Patient First Health Care (Winter 2011)

   <http://www.healthit.gov/> [↑](#endnote-ref-1)