

PATIENT PORTAL TOOLKIT



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This toolkit was designed to address the many key aspects of portal implementation, activation, and use. While these processes are not inherently linear, we have attempted to lay out this document in a way that cohesively represents the components and concerns that arise throughout the process – from identifying requirements and vendor selection to developing a plan to address issues post-go live. Each section can stand alone so that you only need to review the individual section(s) that apply to your organization and needs. The team at Health Federation of Philadelphia are able to assist with your portal efforts and are happy to be thought partners throughout the process. For technical assistance, please reach out to HCCN Senior Project Manager, Holly Hainsworth, at hhainsworth@healthfederation.org.

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OVERVIEW OF THE PATIENT PORTAL



Your patient portal is a gateway to enhanced patient autonomy, improved provider-patient communication, reduced administrative burden, and improved satisfaction from patients and staff alike.

Portals are secure websites that give patients convenient, 24-hour access to their health information via a secure Internet connection. Through the portal, patients can communicate directly with their care team, request refills or referrals, make appointments, and submit vital signs, health history information, and screen information for review by the care team. Patients can use the portal to fill out and review forms, review details such as upcoming appointments, clinical visit summaries, medication(s) and medication history, immunizations, prescription requests and, in most cases, lab and other diagnostic study results. Portals can also be a great way to share patient education materials or send blast messages such as those advertising flu vaccine availability, women's health campaigns, or chronic condition campaigns. They can even be used to share health information with other providers or manage health information from a variety of providers (e.g., a primary care physician, behavioral health provider, or specialist) in a single location.

Your patient portal can also be an invaluable tool for the care team and other health center staff. Some of the more advanced functionality of patient portals can save time and reduce administrative burdens, while improving the quality of the patient visit for both the patient and the practice. Practices are finding fewer missed appointments, improved patient satisfaction, and decreased burden on phone system and call center staff as patients are enabled to schedule their own appointments, enter or update their demographic information, complete surveys and submit screening information prior to an appointment. Instead of spending time on logistics and administrative needs during an appointment, providers and staff can focus energy on engaging and educating patients around their personal needs.

However, many practices are not using patient portals to their full potential. This toolkit is designed to help you get the most out of the patient portal – for both patients and staff.

PLANNING

As with any project, it is critically important to properly **plan** for selecting, implementing, and optimizing your patient portal. Detailed below are the key components of this process and resources that you may find helpful.

Identifying Priorities

Sponsorship from organizational leadership is a critical success factor. It is essential to frame the portal as an organizational priority from the outset by clarifying how the patient portal aligns with and supports organizational goals, improves efficiency and revenue streams, and improves processes. Ideally, a cross-departmental group, with full leadership support, will make and disseminate decisions about each major implementation step, including needs and product selection, configuration and testing, and training and marketing. Portal projects that are delegated to a single individual are unlikely to succeed.

Identifying Desired Features & Functionality

Not all patient portals are created equal. Different vendors and products may offer different features and functionality. It is imperative that your organization develops a list of features you need from your patient portal. Not all features have to be activated immediately, but it is important to choose a product with features and functionalities your patients and staff want and will use. You may consider polling providers and staff around what they think would be useful in a portal. Conducting focus groups with patients can help you to understand the functionality they find desirable. Reaching out to similar organizations and their leadership or staff to see what they feel is working well or missing in their product/implementation can also be helpful. These steps together can help to better inform both your decision-making process and implementation, so that you identify a product that meets your needs and your rollout highlights compelling functionality to support its optimization. Be aware during this process that, as with any HIT product, features and functionality are constantly evolving with upgrades and new versions.

Options for Rollout

Another critical consideration is how this project will be rolled out for use. For example, will it include all patients or a small group of selected patients as a beta test group? If your organization has multiple sites, will they all go live simultaneously or will you deploy a site-by-site roll out? As you make these decisions, keep in mind that an immediate goal of this process will be to perform an honest assessment of the portal's effectiveness and ease of use from the user's perspective, so that appropriate adaptations can be made as needed. Opting for a more measured roll out may lengthen implementation timelines, but can be beneficial for creating a durable and sustainable implementation and a product that is truly patient-engaging.



Establishing a Plan to Address Issues

As with any technology project, it is wise to anticipate and plan for challenges. It is recommended that you develop a plan to identify and document issues as they arise, establish a knowledgeable team to support addressing these issues, and decide how and where to document their solutions. This process and team may look different from organization to organization. Do you have the resources internally to quickly respond, assess a situation, implement the necessary changes, and clearly communicate these to staff? Or would it be more prudent for you to solicit support from an external resource?

Vendor Selection

If you do not already have a portal, or you are considering changing to a different product, vendor selection is a critical step. This process should be fundamentally driven by the [requirements](#) you identified and agreed upon as an organization. Keep in mind that it is best to think about both short term and long term requirements as you search for a product.

If you have already purchased a portal product and do not feel that it is meeting your needs in either functionality or set-up, you essentially have two choices – consider a new product and begin the process of re-implementation, or make the best of the product you have, identifying ways to optimize available functionality. Most portals support basic functionality (see requirements document), but some can be difficult to manage or configure. Before opting to change products, it is important to make sure that you are optimizing the features and functionality of the product you have. Often, health centers that added a portal product months or years in the past are not aware of updates or new configuration options that may meet their needs.

If you are considering purchasing, implementing and activating a new product, it is best to consider the ease of configuration and how the functionality will be activated upon implementation.

Your portal implementation team should be involved in all of this work; it will be crucial to review the list of key decisions with this group. It will also be important to start this work early! It takes considerable time to introduce patients to a robust portal product and even longer to get them into the habit of using it regularly. The more you do at the start of the process, the better off you'll be upon activation.

With foresight, commitment from all levels of the organization, and a proper plan in hand, the design and rollout of the patient portal can be a manageable experience. Health Federation staff are available to assist with this project. Please contact Holly Hainsworth with requests for technical assistance at hhainsworth@healthfederation.org.

IMPLEMENTATION

A patient portal is only truly useful if it is used to its fullest potential by both staff and patients. It will be important to ensure that staff know as much about the tool as possible, are included in decision-making to the extent possible, and are properly trained. Similarly, patients will need to be informed, educated and supported around its availability and use.

Create Provider and Staff Buy- In

As with any new software or process, getting buy-in from staff and providers is critically important for adoption and longevity. Your staff and providers will be key players in both uptake among patients and in the active use of the product by those within your organization. Below are some strategies you may consider to initiate or enhance provider and staff buy-in:

- ▶ *Use a town hall forum to introduce the functionality of the portal tool selected and allow for questions.*
- ▶ *Survey your providers and staff on the functionality that they think would be most helpful to both patients and staff.*
- ▶ *Use the input gathered through provider and staff surveys to determine the roll out of the portal tool.*
- ▶ *Demonstrate the functionality of the portal using test patients.*
- ▶ *Encourage staff who are also patients to sign up for the portal; solicit their feedback in a timely fashion after you go-live. Staff who experience the use of the portal firsthand can leverage this to encourage its use among other patients and staff.*
- ▶ *Collect and distribute stories of positive impact.*



Marketing Your Portal

You will need to develop a plan for getting the word out to patients about your portal. Patients will need to be informed around the availability of the tool, provided examples of its benefits and utility, and educated around its use. There are a number of ways this information can be provided to patients and it may be useful to deploy multiple marketing approaches. Some basic examples of marketing tools include:

- ▶ *Include portal information in your new patient packets.*
- ▶ *Consider waiting room, exam room, and bathroom posters featuring the benefits of signing up for and using the patient portal.*
- ▶ *Consider including a link to sign up for the patient portal on your kiosks or tablets.*
- ▶ *Provide patients with portal information when they register at your clinic(s).*
- ▶ *Send appointment reminders through the portal and encourage patients to register to receive future alerts.*
- ▶ *Include your portal URL at the bottom of the patient summary and on patient statements.*
- ▶ *Create a “tired of waiting?” hold message to remind patients that if they were registered for the patient portal, they could perform many routine tasks (such as refilling a prescription or requesting an appointment) online, instead of waiting on hold.*
- ▶ *Direct patients to the portal when they have questions, reminding them that if they have any questions about their health record, lab results, or care plan, they can use secure messaging to ask their provider, who will respond in a timely manner.*
- ▶ *Provide staff with buttons promoting the portal.*
- ▶ *Create and play video spots in your waiting room(s).*
- ▶ *Consider having volunteers or staff in the waiting room helping patients to sign up as they wait for appointments.*
- ▶ *Incentivize patients to sign up by letting them know that this will give them access to high value information quickly and easily (e.g. availability of vaccines).*

Portal Policies

Providing access to key information via the patient portal is one part of the puzzle. Creating [policy](#) and [procedures](#) for how the portal will function is another key step.



PORTAL ACTIVATION & OPTIMIZATION

Now that you have selected a patient portal and documented [Key Decisions](#), it is time to implement and **activate** or optimize and **re- activate** your patient portal. Why the emphasis on activation? It is one thing to configure, train, and go live with a patient portal. It is equally important to ensure it is being used, gather feedback from patients and staff, refresh training and configuration where needed, and reap the benefits of its use. Activation is a dynamic step in the process and leads to ongoing utilization of the application.

Patient Enrollment Strategies

While the quest to enroll patients in the portal can be very challenging, there are a number of options for the enrollment process. Some of the most popular enrollment options are discussed below, including key considerations and pros/cons of each.

Bulk Enrollment Options

Gather e-mail addresses for any patients not yet enrolled in the patient portal and upload them into the system (NOTE: You will need to verify your patient portal has a bulk upload feature in order for this to work). Once this upload is complete, you can send a series of e-mails to patients encouraging them to select a username and password in order to complete enrollment. It may also be worth noting that some patient portals may also allow you to assign usernames and temporary passwords for your patients to automatically enroll them. A series of e-mails can be sent to enrolled patients welcoming them to the portal and showing them how to access it. If you use this approach, remember that some emails are likely to end up in patients' spam folders.

Auto-Enrollment Option

If your patient portal offers automatic enrollment, it can be a great way to enroll patients with ease. This process is initiated by collecting the patient's email address. Once the email address has been added to the system (patient must have an email address in their chart), a link is sent via email explaining how to sign up for the patient portal along with the features/benefits it has to offer. This approach makes portal enrollment an "opt out" rather than an "opt in" and can vastly reduce patient enrollment burden.

Benefits of auto-enrollment include a simple, secure sign-up process embedded in the initial invitation email, increased enrollment numbers, reduced burden on staff, and ease of registering new patients.

One-by-One Enrollment Options

The final option is enrolling patients one by one. For instance, patients can be individually enrolled when they register with your front desk staff or call your scheduling staff for a new patient appointment. This process can be very time consuming and labor intensive for staff.

New Patient Enrollment

No matter how you choose to enroll existing patients, it is a best practice to enroll all NEW patients for the portal automatically. This will save time and energy on the part of both the patient and staff. Once your relationship with the patient is established, it is also a good idea to establish practice expectations around use of the portal and ease of communication with the practice using this tool.



<https://>



Enrollment is the first step to patient engagement with the portal; therefore, it must be managed effectively. Patients can be slow or reluctant to enroll in their electronic medical record (EMR) patient portals — and many never enroll at all. There are several ways to address this:

- ▶ *Develop a plan for enrolling patients without e-mail addresses. This can include reviewing patient registration information for missing e-mail addresses and reaching out proactively to help patients obtain one prior to their next appointment, or having staff on-hand to help patients sign-up on-site when they are in the office for a visit. Keep in mind, the level of support needed in this area will vary from patient to patient - some will be able to set up an e-mail account independently with basic guidance, while others will need much more at the elbow support. This work could be a great project for students or patient volunteers.*
- ▶ *Consider having providers target a specific group of patients with portal outreach (e.g. diabetic patients with recent a1c lab results).*
- ▶ *Adopt a process for continuously monitoring patients enrolled in the portal and do outreach to them. This outreach should include asking patients how functionality might be improved to make the portal more useful to them.*
- ▶ *Consider soliciting regular feedback on the portal from patients and staff. Ensure there is a process for expressing and addressing those concerns.*
- ▶ *Leverage your staff who are also your patients! Work with staff members who are using the portal to gain direct and clear insight into the patient experience and what makes the portal useful, what is missing, or what could be improved.*
- ▶ *Monitor utilization metrics and include a review of these metrics in your regular QI process.*
- ▶ *Ensure that processes put in place by the implementation team are fully activated (e.g. response times to prescription refill and referral requests; ensuring secure messages sent to care teams are being addressed in a timely fashion).*

Patient Engagement

In signing up for the patient portal, becoming familiar with it, and committing to using it, patients can take an active step in managing their own health and care. Getting patients to enroll in the tool is a step in the right direction, but is only a small piece of the process. Improving engagement with and utilization of the patient portal can be challenging and can take effort and strategic planning.

There are many reasons why patients do not engage with their patient portal, but many of these concerns can be mitigated by the portal and your staff:

| Reasons Patients May Not Engage with Patient Portal | How the Health Center Can Mitigate |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Patient prefers to speak directly to provider | <ul style="list-style-type: none"> • Demonstrate quick turnaround times on communications with provider/care team through the portal. • Ask/encourage patients to give it a try. • Offer to enter the request into the portal on the patient's behalf. |
| Patient not feeling a compelling need to use the portal | <ul style="list-style-type: none"> • Host focus groups to hear from patients what functionality on the portal would be useful to them. |
| Medical records are not available | <ul style="list-style-type: none"> • Strongly consider releasing as much patient information to the portal as possible. |
| Patient lacks internet access | <ul style="list-style-type: none"> • Prior to implementing the portal, determine the number of patients who do not have internet access and why (is it because it is not available in their area, cost, or lack of a device that can access the internet). This is probably the challenge that is most difficult for the practice to mitigate. However, in most settings, there are some groups of patients who do have access even if many do not. |
| Patient has concerns around portal use and privacy | <ul style="list-style-type: none"> • Ask patients what might be stopping them from using the patient portal – provide copy of privacy policy up front. |
| Patient does not have an email address | <ul style="list-style-type: none"> • Review registered patients and identify those who do not have an email address. • Create decision support for registration staff to gather email addresses from patients and if they do not have one direct them as to how to create an email address. • Proactively reach out to patients without an email address and who have an upcoming appointment. |
| Portal application does not have a mobile app | <ul style="list-style-type: none"> • Test patient portal using a browser on a mobile device. • Provide educational materials for patients teaching them how to access the patient portal using a mobile browser. • Consider how the lack of a mobile app will impact patient use and consider converting to a different portal product. |

Portal Features & Functionality

As previously mentioned, not all portal products offer the same features and functionality. It will be important to identify early on which features will be most useful to your patients and staff and will support optimization of the portal. Subsequently, it is imperative to select a product that includes all of the features you require. Patient portal feature availability can stoke patient participation. The more features that are made available, the more likely participation will expand, and patients will be engaged.

Self-Scheduling:

Patient self-scheduling is the ability for patients to schedule their healthcare appointments online via a portal, website, or through text messaging. This can be done anytime, day or night, without staff interaction. This process is becoming more widely available in healthcare organizations. There are numerous benefits to self-scheduling functionality. It is fast and convenient for patients and saves tremendous time and resources for healthcare organizations that have previously relied on staff to schedule appointments. Allowing patients to self-schedule unburdens your staff, freeing them to focus on other tasks. Further, anecdotal evidence indicates that patients are more likely to keep an appointment that they self-schedule, thus reducing no-show rates for the organization. Most portals allow practices to select the appointment times and types allowable for self-scheduling; this may help to fill unpopular appointment times and new provider schedules, for instance.

Appointment Reminders:

In many cases you can use the patient portal to send appointment reminders. Many systems will send up to three reminders to the patient prior to an appointment; when patients receive multiple reminders, the incidence of no-shows is further reduced.

Appointment Requests:

Allowing patients to request an appointment in lieu of self-scheduling can be very taxing on resources. This process requires health center staff review the patient's request, look for an appointment date and time that meets their needs, and work to speak to the patient directly. If you decide to allow only appointment requests, consider follow-up options using asynchronous communication, such as email or text messaging, to save staff time and ensure patient convenience.

Updating Demographics:

Most portal configurations allow for patients to enter or review and update their demographic information from the portal prior to their visit. In most cases this information appears in the PM system as patient-entered information and can simply be confirmed when the patient registers for an encounter.

Sliding Fee Scale Information:

Patients can enter their income and family size on the patient portal, and receive back information about the likely cost of their visit. Having this functionality activated on the portal provides insight into a sliding-fee discount for uninsured and underinsured patients. It also provides ease of documentation around family structure and income that benefits the health center's data and frees up staff time.

View/Print Patient History:

Like demographic information, patient medical history can be updated via the patient portal and imported into the electronic medical record (EMR). Having this information in the EMR prior to the visit can support a cohesive continuum of care. Typically, this data is labeled as patient-entered and is committed to the EMR after clinical staff have reviewed it. The benefits include reduced paperwork from patients (particularly new patients), facilitation of both telehealth and in-person visits for new patients, reduced data entry effort on the part of clinical staff and providers, and improved capture of patient information. Consider using this functionality for Past Medical/Surgical History, Social History and screening information like depression, substance and alcohol use, Social Determinants of Health (SDOH) screening, etc.

Publishing Clinical Information to the Portal:

The patient portal is designed to improve patient engagement in their health care, allow for easy and asynchronous access for patients to the care team, and provide easy and asynchronous access for all patients to their health information for the purpose of viewing and sharing with other providers as needed. In essence, it is a place where individual health information is stored and where the patient can view, download, and transmit as they see fit. The clinical information that should be published to the portal includes lab, diagnostic imaging, pathology, specialist consult results, office visit documentation, problem lists, and medication lists.

Patient Satisfaction Survey:

Use the patient portal to distribute a customized or standardized patient satisfaction survey. This method of distribution allows broad distribution of the survey, does not require patients to be in the office to complete the survey, and makes data analysis easier.

Patient-entered Information:

The following are examples of screening information the patients can enter at their convenience via the patient portal:

- ▶ Social Determinants of Health (SDOH)
- ▶ Depression Screening
- ▶ Alcohol and substance use screening
- ▶ M-Chat (Autism) screening
- ▶ SWYC Child Development screening

This functionality allows the organization and provider to gather and potentially evaluate screening outcomes BEFORE the patient appointment. This frees up administrative time and can support better clinical pre-visit planning.



HOW WILL YOU MEASURE SUCCESS?

As with any project, adopting evaluation metrics from the beginning will help you measure and understand success along the way. Some evaluation metrics that could be used are:

- ▶ *Number of patients who have enrolled*
- ▶ *Number of patients accessing and using the portal to view, download, or transmit their health information, including the ability to drill down to find specific patients who are not using this functionality*
- ▶ *Number of screening forms completed by patients through the portal prior to a visit*
- ▶ *Number of patients enrolled in the portal prior to visit*
- ▶ *Metrics on the individual functionality used e.g., prescription refills, referral requests, secure messages with the care team etc.*
- ▶ *No show rates for patients scheduling their own appointment*
- ▶ *Number of phone calls before and after the portal launch*
- ▶ *Phone call wait time improvements*
- ▶ *Reduction in number of requests for information*



WORKFLOWS & TRAINING

The following areas of [workflow](#) need to be addressed when implementing a patient portal:

- ▶ *Patient registration - for both new patients and established patients*
- ▶ *Patient entry of billing and financial information*
- ▶ *Patient Satisfaction Survey*
- ▶ *Posting lab and diagnostic study results*
- ▶ *Patient request for refill and referral*
- ▶ *Patient messages to the care team*
- ▶ *Patient-entered health data*
 - ▶▶ *Blood pressure measurements, weight, pulse oximeter readings, blood glucose reading*
 - ▶▶ *Screening information like depression and SDOH*
 - ▶▶ *Health history information*
- ▶ *Patient access to personal health information*
- ▶ *Granting proxy access to the portal for a family member or friend*

Front Desk Workflow

Patient portal enrollment

Accurate patient contact information, specifically email addresses and mobile phone numbers, is a critical success factor to portal implementation, adoption, and activation. Front desk staff are integral members of the team responsible for ensuring these these vital pieces of information are entered accurately and in the right fields and regularly reviewed with patients when they present for care either in person or over the phone. Most groups find the following strategies to be effective:

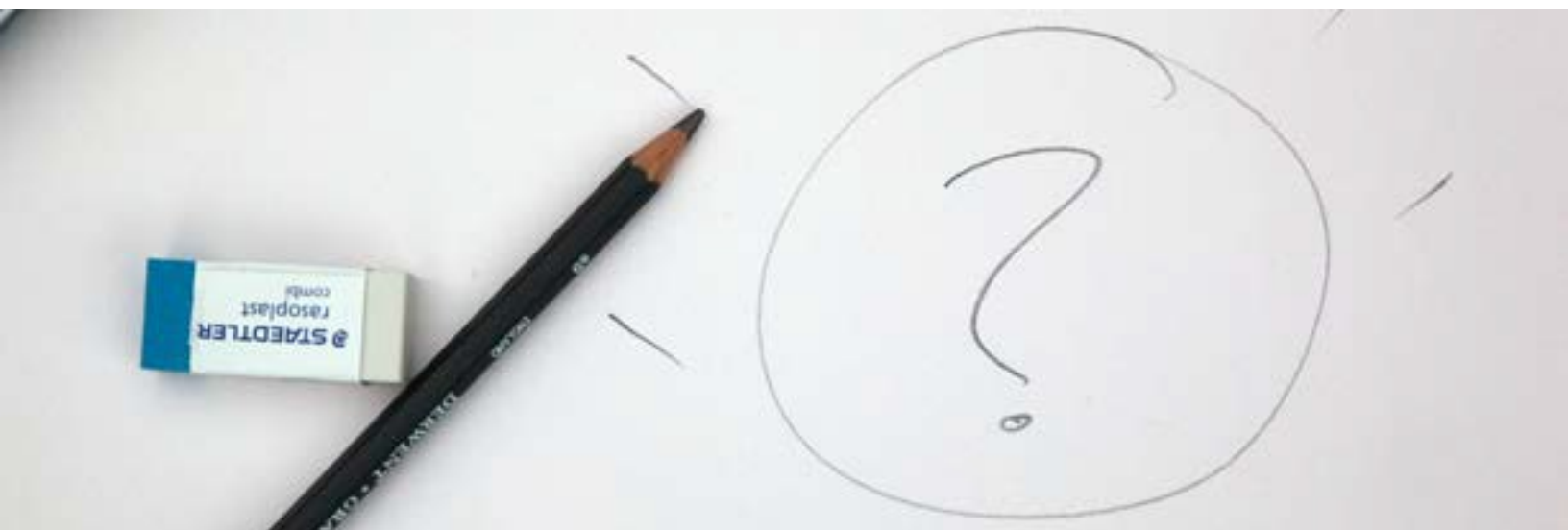
- ▶ *Enlist members of the registration staff in the implementation process to ensure their insight is voiced and buy in is created*
- ▶ *Reinforce to these staff members that accurate registration information properly entered is their responsibility and is critically important to the success of this project*
- ▶ *Create scripts for registration staff to ensure standardized processes*
- ▶ *Refresh training as needed based on data and metrics that are shared with this part of the team*
- ▶ *Ensure that training for new staff includes policies, procedures and workflow related to the patient portal*



Review of patient- entered registration information

One of the benefits of using a patient portal is the ability of patients to update their registration information asynchronously and prior to an office visit. Most portal products allow for patient-entered information that populates the Practice Management System. It is important that registration staff review this information that patients have entered prior to committing it to the PM database. Activating this functionality requires proper configuration and set up prior to go-live of the patient portal system. [Key decisions](#) to support configuration include:

- ▶ *Which registration information can be entered by the patient?*
 - ▶▶ *Update name changes*
 - ▶▶ *Update address, phone number, email address changes*
 - ▶▶ *Update insurance information*
 - ▶▶ *Update preferred pharmacy information*
- ▶ *Who will review patient-entered information and how will it be committed to the database?*
- ▶ *How will patients enter data?*
- ▶ *What training and education will be needed? For staff? For patients?*
- ▶ *How will training be delivered?*
- ▶ *How will patients learn about opportunities to update their information via the patient portal?*



Clinical Workflow

Review of patient entered clinical information

Encouraging patients to update clinical information BEFORE an office visit improves efficiency, reduces staff workload, improves patient engagement, and improves the accuracy of the data in the practice management and EHR systems. As with the patient registration information, it is important to review patient-entered health information before committing it to the clinical database. Key decisions needed to support portal configuration include:

- ▶ *Which clinical information can be entered by the patient?*
 - ▶▶ *Vital signs - Bluetooth connected devices*
 - ▶▶ *Health History*
 - ▶▶ *Screening data such as PHQ 9, SDOH, etc.*
- ▶ *Will patients be able to upload pictures and other documents to the portal?*
 - ▶▶ *How will providers be notified of uploaded pictures or documents?*
- ▶ *Who is responsible for reviewing patient entered data?*
- ▶ *How will patients enter data?*
- ▶ *What training and education will be needed? For staff? For patients?*
- ▶ *How will training be delivered?*
- ▶ *How will patients learn about opportunities to update their information via the patient portal?*



Addressing refill and referral requests

Encouraging patients to use the portal to request medication refills and referrals improves efficiency by accommodating asynchronous communication from patients to the care team and reduces the burden on the health center's phone system. Key decisions include:

- ▶ *How will patients request a refill or referral?*
- ▶ *Who is responsible to monitor and respond to these requests?*
- ▶ *What policies need to be in place to allow for efficient response to these requests?*
- ▶ *What is the acceptable timeframe to respond to these requests?*

Pushing electronic health information to the portal

Lab results

Patients are entitled to have access to their lab, imaging, pathology, and specialist consult results. Most providers want to discuss these sorts of results with patients and are uncomfortable with automatic release of results particularly if they are indicative of a new diagnosis or need for further testing such as an out of range lab result or pathology report. It is important to recognize the health center's responsibility to avoid information blocking as covered in the [21st Century Cures Act requirements](#). Key decisions include:

- ▶ *Will all lab, imaging, pathology and specialist consult results be automatically released to the patient portal? If not what is the criteria that will be used to delay or prevent the release of results and what functionality is supported by the portal product in use?*
- ▶ *If results are not automatically released, what are the policies for ultimately releasing results, e.g. providers have 24 - 48 business hours to review results and communicate them to the patient either through secure messaging on the portal, a phone call, or text message to schedule a phone or in person visit.*
- ▶ *Which team members are engaged in the process of ensuring patients get results in a timely fashion that supports a positive relationship with the patient?*
- ▶ *How will providers and staff communicate with patients who opt out of using the portal?*

Office notes/clinic visit summary

The [21st Century Cures Act](#) requires that health centers provide access to core elements of the patient's chart. The perspective of the Act is that health centers are stewards of the patient's data. It is a requirement to provide access to all [data in the patient's chart as described in the United States Core Data for Interoperability \(USCDI\)](#) including and not limited to the the information that is typically included in the Clinical Summary or After Visit Summary. This requirement is new and is set to be activated as of April 2021. In addition to the Clinical or After Visit Summary, which provide relevant and actionable information, you will need to perform a comprehensive review of USCDI and make decisions as to how each category of data will be managed. One area that may need particular attention is Clinical Notes. Under these new rules, Consultation, Discharge Summary, H & P, Imaging Report, Laboratory Report, Pathology Report, Procedure and Progress notes must be made available to patients for view, download or transmission purposes. Providers may resist and find it uncomfortable for patients to read actual notes rather than the summarized information. Some examples of key decisions are listed below and may require preparation and discussion with both patients and providers.

- ▶ *How will the health center prepare patients for how problems are used on the problem list? For example patients often object to problems that they see as negative labels such as Obesity. In other cases patients may not be prepared to see Depression or other mental health or substance use disorder diagnoses on their problem lists. If a health center is coding Social Determinants information, this will also appear on the problem list and patients may have concerns about seeing Food Insecurity or Domestic Violence in their Visit Summaries.*
- ▶ *How will the health center prepare the providers for sharing office notes with patients? Providers are often uncomfortable with patients reading their notes especially when they use medical jargon.*
- ▶ *What is the required timeline for releasing office notes?*

Secure messaging with the care team

Secure messaging through the patient portal is another tool that can be used to improve efficiency, enhance patient engagement and allow for asynchronous communication.

- ▶ *Who on the care team is responsible for fielding messages from patients?*
- ▶ *What is the acceptable timeframe for responding to patient messages?*
- ▶ *How will secure messaging be used to initiate a conversation with the patient?*
- ▶ *How will secure messaging be used by various members of the care team?*



Minors

Federal and State law limits the sharing of sensitive health information regarding adolescents, even with their parents and guardians. It is important to operate a patient portal in compliance with applicable laws. Some health centers have therefore removed adolescents from their portals entirely. However, teens can also be an appropriate group to engage in their health care through portal use. Clinics are encouraged to work to optimize patient engagement with teens through the use of the patient portal. Most organizations create new portal log on credentials for children reaching the age when state law allows them to have access to sensitive health care services without their parents' knowledge; generally, 12 – 13. Patients and their parents are informed of this policy when appropriate and it is up to the child to allow their parents to have access to their portals. Some portals allow for selective access based on log on; however, this is not common functionality. Key decisions include:

- ▶ *At what age will patients be given new portal log on credentials with limited or no access by parents?*
- ▶ *How will this policy be communicated to patients and when?*
- ▶ *What training is needed for staff?*
- ▶ *What education is needed for patients and how will it be delivered?*

Establishing Policies and Procedures (Samples)

The workflows described above need to be documented in [policies and procedures](#). This is essential for compliance reasons, as well as to provide staff with clear guidance and to document change over time. List of needed policies:

- 1) Portal adoption
- 2) Enrolling patients in patient portal
- 3) Use of patient portal for adolescents
- 4) Posting lab, imaging, pathology, and specialist consultation results to the portal
- 5) Managing refill and referral requests
- 6) Managing secure messaging with patients using the patient portal
- 7) Patient entered data through the portal
- 8) Using the portal for communication with all patients
- 9) Releasing office notes and other patient health data to the portal

Training Program

Train your staff

Staff training is an essential part of portal implementation/activation or reactivation. Training must involve all levels of patient-facing staff. While your portal vendor may offer training as part of implementation, delivering training that is specific to the workflow adopted by your organization will be more impactful. We recommend a “train the trainer” model whereby the implementation team at the health center is trained in the configuration, setup and use of the patient portal, and the implementation team then develops and delivers an individualized training curriculum for remaining staff.

Role- based training based on workflows

During the implementation process and workflow development, the implementation team will [identify roles and responsibilities](#) as they relate to the patient portal. Training curricula should be based on these roles and responsibilities and optimal workflow. Training should be specifically tailored to staff roles. In addition, the implementation team should make recommendations related to on-going and new staff training for the patient portal. The portal training will need to be added and incorporated into training for new staff and considered when a staff member changes roles. Ongoing monitoring of the portal usage and feedback from patients and staff can be used to frame on-going training.



ON- GOING EVALUATION, ADJUSTMENT, & TRAINING

In the period immediately following portal go-live the implementation team will need to continue meeting to evaluate usage and usability, update configuration and setup, and identify opportunities for more training. Some key areas to address in this phase are:

- ▶ *Patient usability/non-engaged – regularly monitor portal usage and assign this responsibility to members of the implementation team. Call Center staff may be a good choice for this responsibility. Portal usage expectations should be clearly articulated in the portal usage policy.*
- ▶ *Monitor usage of the secure messaging feature. Explore strategies for patients who express their preference to speak directly with a provider on the phone to encourage them to try using the portal for communication, as this method is more flexible, efficient, and effective for meeting their healthcare needs.*
- ▶ *Monitor the numbers of patients engaging in viewing, downloading and/or transmitting health information delivered on the patient portal.*
- ▶ *Review barriers to patients enrolling in and using the patient portal.*
 - ▶▶ *Patients with no internet access – how can the health center facilitate access to low cost internet?*
 - ▶▶ *Patients do not have a device that will allow access to the patient portal – how can the health center staff facilitate access to a computer or tablet for portal access? Are there community partners, libraries, funding sources to facilitate this access?.*
 - ▶▶ *Patients do not have an email address.*
 - ▼ *Develop and activate processes to ensure accurate email address information is gathered and continuously updated.*
 - ▼ *Develop and activate processes to assist patients in setting up an email address.*
- ▶ *Staff are not adequately trained to assist patients with portal education – continuously poll staff about their training and educational needs related to the portal. Offer regularly scheduled training refreshers and ensure portal training is incorporated into new staff training.*
- ▶ *Patients have privacy concerns – provide easy to read documentation to educate patients on the privacy and security safeguards in place.*

MAXIMIZING PORTAL ADOPTION

In sum, patient portals can be highly effective and engaging tools. To ensure success with your patient portal keep the following recommendations in mind:

- ▶ Adopt a patient portal and clearly articulate in a portal adoption policy why adoption and patient participation is an important and effective tool. The policy should include how patients can opt out if they prefer.
- ▶ Post all lab results to the portal for patient viewing, downloading, or transmitting. For patients who opt out of the portal, the organization will need to make arrangements for communicating lab and diagnostic study results.
- ▶ Implement a streamlined portal training program focused on workflow, roles and responsibilities, and a clear understanding of portal features and functionality.
- ▶ Craft compelling marketing to encourage patient engagement. You need a compelling portal marketing message that explains the major benefits of using a portal, tailored to a practice's service and patient mix. Your vendor may have some examples and may be able to help you with marketing and advertising the portal to patients.
- ▶ Support multiple paths to patient registration in the portal. Some practices have installed computers in the waiting room and assist patients in registering in the portal. In addition many portals now support registration on the patient's mobile device.
- ▶ Recruit and train volunteers to assist patients in getting enrolled in the portal. Often patient to patient communication and encouragement can be the most effective.
- ▶ Encourage all employee-patients to sign up for the portal - consider this as the first group to sign up, meet with them as a focus group.
- ▶ Identify incentives for patients to use the portal rather than calling on the phone – e.g. immunization records, labs, quicker turn around on requests/ communication, increased access to care teams, condition-specific educational opportunities, invitations to events and programs, allow patients to schedule appointments in the portal.

Resources

To view actual portal registration records: <https://healthfederation.org/member-portal>

To view a presentation on an overview of using patient portals use this link: <https://healthfederation.org/sites/default/files/Effective%20Use%20of%20Patient%20Portals-20190620%201704-1.mp4>

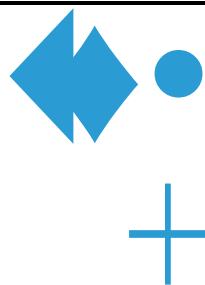
To view Intelichart Portal Demo from Feb 25, 2020 use this link: <https://youtu.be/2GUbxFDw5p4>

To view EZ Access Patient Portal Demo from Feb 14, 2020 use this link: <https://www.youtube.com/watch?v=WTna9vTQRxk&feature=youtu.b>

Adoption Framework from Electronic Patient Engagement. <https://hiteqcenter.org/Resources/HITEQ-Resources/community-health-center-adoption-framework-for-electronic-patient-engagement>

Multi-lingual Patient Portal Status and Resources for Health Centers <https://hiteqcenter.org/Resources/HITEQ-Resources/multi-lingual-patient-portal-status-and-resources-for-health-centers>

Minor and Parental Access to Patient Portals. <https://hiteqcenter.org/Resources/HITEQ-Resources/minor-and-parental-access-to-patient-portals>



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