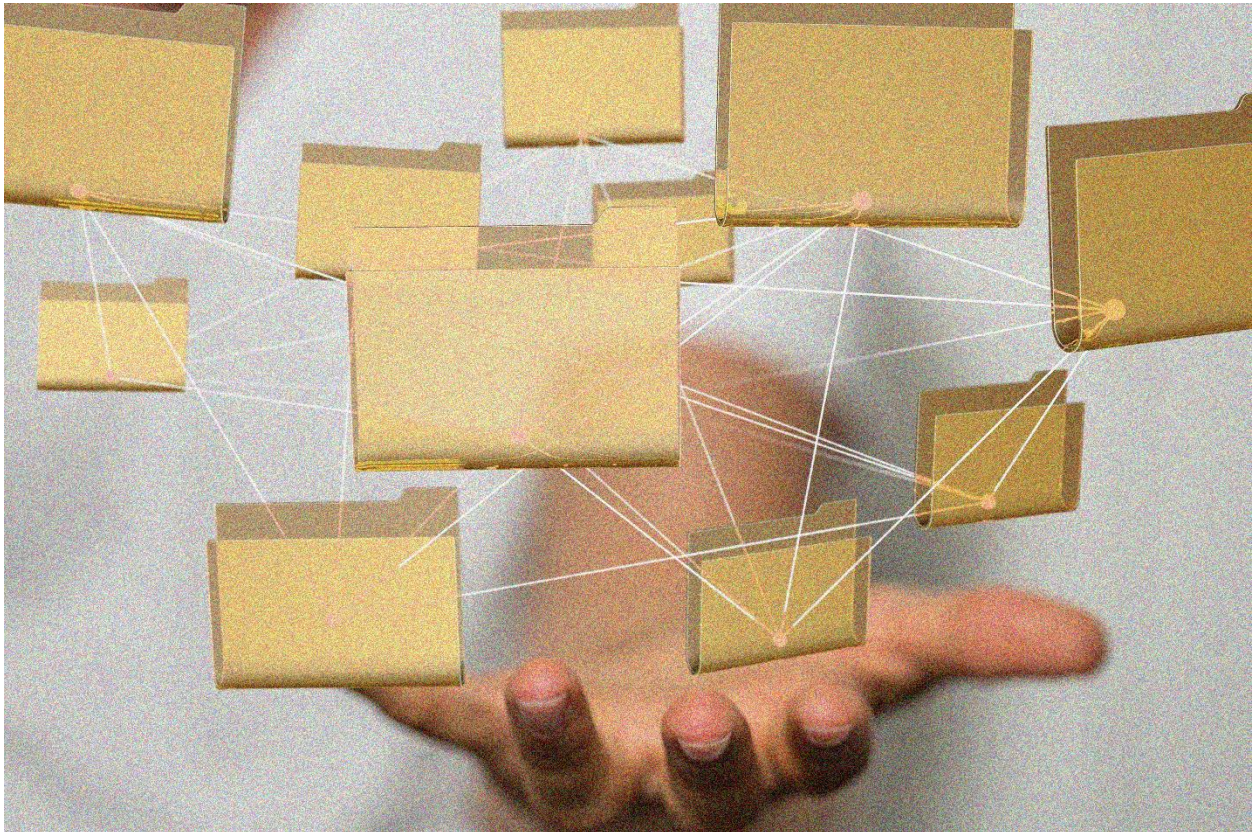




Provider Access to Patient Information Survey

• 2017 Report •



Provider Access to Patient Information Survey 2017 Report



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Introduction

Since its inception in 2001, eHealth Initiative Foundation (eHI) has monitored progress on data sharing and interoperability, across the spectrum of healthcare. Historically, many efforts around interoperability focused on provider access to patient data. With the advent of mobile health, an emphasis on patient satisfaction, and technology-savvy consumers, patient engagement is a priority. Increasing access to patient data, for both providers and patients helps improve patient engagement and reduce the cost of care.

New value-based care models require careful collection and analysis of patient information, while widespread adoption of electronic health records (EHRs), medication data, and data exchange have made a wealth of information available to providers. Significant costs and time investments are often required to acquire, analyze, and share patient information, yet consumers often expect easy access to their EHRs and related data.

A unique opportunity has been created for providers because of patient desires to access their information. Specifically, clinicians can help patients better understand their clinical information, diagnoses and treatments. Sharing this information more openly has opened the door for clinicians to positively impact patient engagement, compliance with treatment, and outcomes. *eHealth Initiative's 2017 Provider Survey on Access to Patient Information* offers a snapshot of how well providers are meeting patient expectations related to their data.

Background on Survey

eHealth Initiative's 2017 Provider Survey on Access to Patient Information examines perspectives on:

- increased access to patient information
- interoperability
- changing regulations, including compliance with Merit-Based Incentive Payment System (MIPS) and Meaningful Use (MU)
- latest findings on provider-related interoperability solutions, which drive outcomes and organizational priorities

The survey occurred in Fall 2017 and was completed by a wide range of respondents. In total 107 providers answered around 50 questions on access to patient information:

- Almost half (45%) of respondents were affiliated with a hospital or health system
- 22% were associated with medical groups, clinics, and physician practices
- 18% were with Health Information Exchanges (HIEs), public health organizations, health education, and pharmacy organizations (the other category)
- Providers with Accountable Care Organizations (ACOs) accounted for 12% of respondents
- Home health providers represented 3% of respondents

Although this was not a scientific sample, the results of this report represent a snapshot of the current state of the field, as well as the perspectives of the providers taking the survey.

Overview of Key Findings

After careful analysis of the survey results, the following key findings emerged:

| | |
|---------------|--|
| Key Finding 1 | Patient engagement appears to be increasing, with more patients accessing their health information and managing how it is shared |
| Key Finding 2 | Providers are struggling to meet patient access regulations, which do not necessarily align with business needs |
| Key Finding 3 | Changing federal requirements, and the costs associated with them, are causing great concern among providers |
| Key Finding 4 | Current interoperability solutions do not meet the needs of providers |
| Key Finding 5 | Patient security, privacy and confidentiality remain top concerns amongst providers |
| Key Finding 6 | Professional societies and industry groups play a key role in educating providers on new regulations |
| Key Finding 7 | EHR vendors are viewed as "helpful" in addressing current patient access regulatory requirements |
| Key Finding 8 | Providers are engaged in a variety of alliances and participate in different interoperability frameworks |
| Key Finding 9 | Providers prioritize connectivity in a variety of ways |

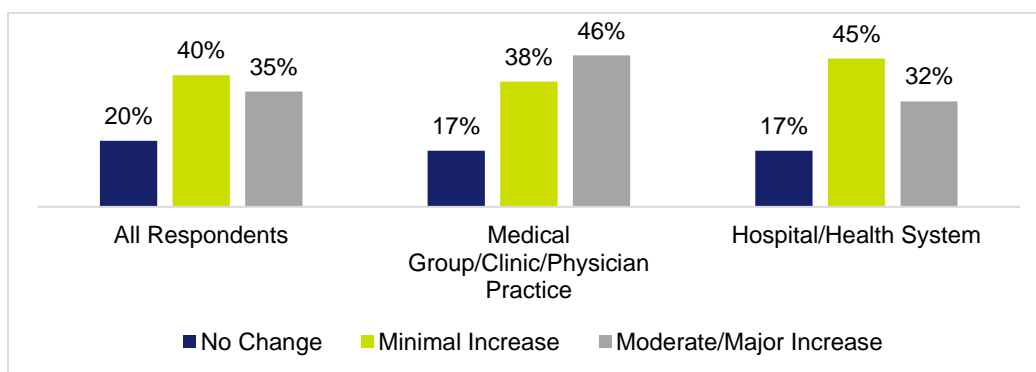
Key Finding 1: Patient engagement appears to be increasing, with more patients accessing their health information and managing how it is shared

The smartphone was one of the most quickly adopted consumer technologies in recent historyⁱ. In the U.S. 77% of adults reported owning a device, compared to 35% in 2011. Most U.S. internet users find medical information online and an increasing number of patients communicate with their providers through patient portals. According to a 2017 survey, 74% of patients joined a portal offered by their healthcare provider, a dramatic increase from 45% in 2016ⁱⁱ. As this survey demonstrates, the trend will continue.

■ PATIENT REQUESTS FOR ACCESS TO HEALTH INFORMATION

Almost half of respondents identifying as medical group, clinic, or physician practice (46%) and a third of those identifying as hospital or health system (32%) reported a **moderate or major increase in patients requesting access to their health information**.

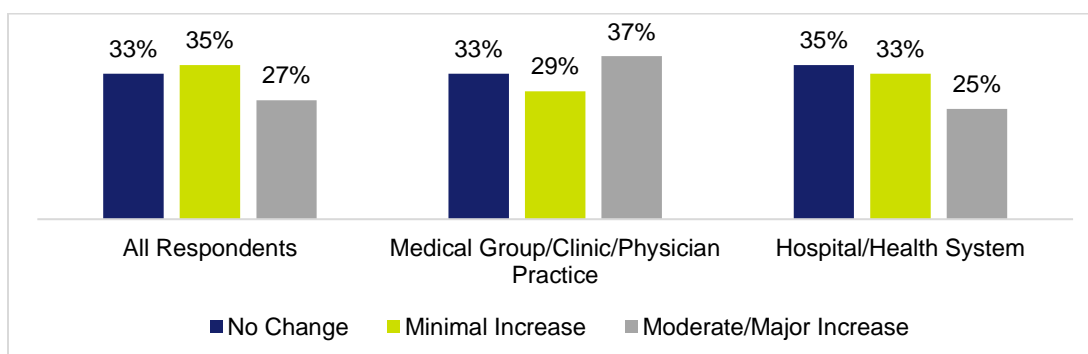
Figure 1. Providers were asked, in the last 12 months, how much of an increase in demand have they seen from patients requesting access to their data



■ PATIENT REQUESTS TO INCLUDE DATA IN THEIR ELECTRONIC HEALTH RECORD (EHR)

Increased requests from patients to add information into their electronic health record (EHR) is a sign of patient engagement, however approximately one-third of both medical group/clinic/physician practice (33%) and hospital/health system (35%) respondents reported seeing **no change in patient requests to have information included in their EHR**.

Figure 2. Providers were asked, in the last 12 months, how much of an increase in demand has been seen from patients requesting to send/share their patient data to their institution for inclusion in the EHR?



■ CLINICAL INFORMATION SHARED WITH PHYSICIANS



As patients become more engaged with their care, they want to share new types of information with their physicians, such as wellness data, in addition to traditional clinical data. **When asked what kinds of data patients are requesting to share with clinicians, 68% of respondents selected lab information, 56% imaging results, and 51% prescription information.** Providers also reported patient requests for data on blood pressure readings (36%), diabetes monitoring (34%), reports from other providers (27%), weight readings (16%), medication adherence data (15%), exercise data (12%) and information from diet tracking/food diaries (8%).

■ IMPACT OF INCREASED ACCESS TO PATIENT INFORMATION

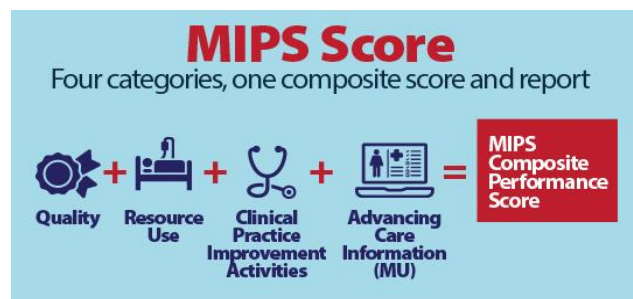
Most providers viewed increased access to patient information in a positive manner

- 55% of respondents agreed that great progress has been made in the use of technology to engage consumers in managing their health
- Providers overwhelmingly stated that increased access to patient information will improve patient engagement in their care (75%), quality of care (65%), and patient satisfaction (62%)
- 38% of respondents indicated patient engagement would reduce cost

In the minority were those with negative views of increased access to patient information

- 21% reported that patient's increased access would increase cost
- Other providers foresaw a *reduction* in quality of care (5%), patient satisfaction (2%) and patient engagement in their care (1%)

Key Finding 2: Providers are struggling to meet patient access regulations, which do not necessarily align with business needs



The 2015 Edition of the Health IT Certification Criteria and Meaningful Use (MU) Electronic Health Record (EHR) incentive program required providers to demonstrate their ability to supply to Common Clinical Data Sets, including date of birth, race, ethnicity, vital signs, medications, lab tests, values, results, immunizations, assessments, and plan of

treatment, via an application programming interface (API.) Stage 3 of the Merit-based Incentive Payment System (MIPS) and MU required making APIs available to patients.

Throughout 2015 and 2016, there was significant concern that industry was not capable of complying with these regulations. In October 2016, the requirements for these programs were relaxed when the Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator for Health IT (ONC) released the final rule for the Medicare Access



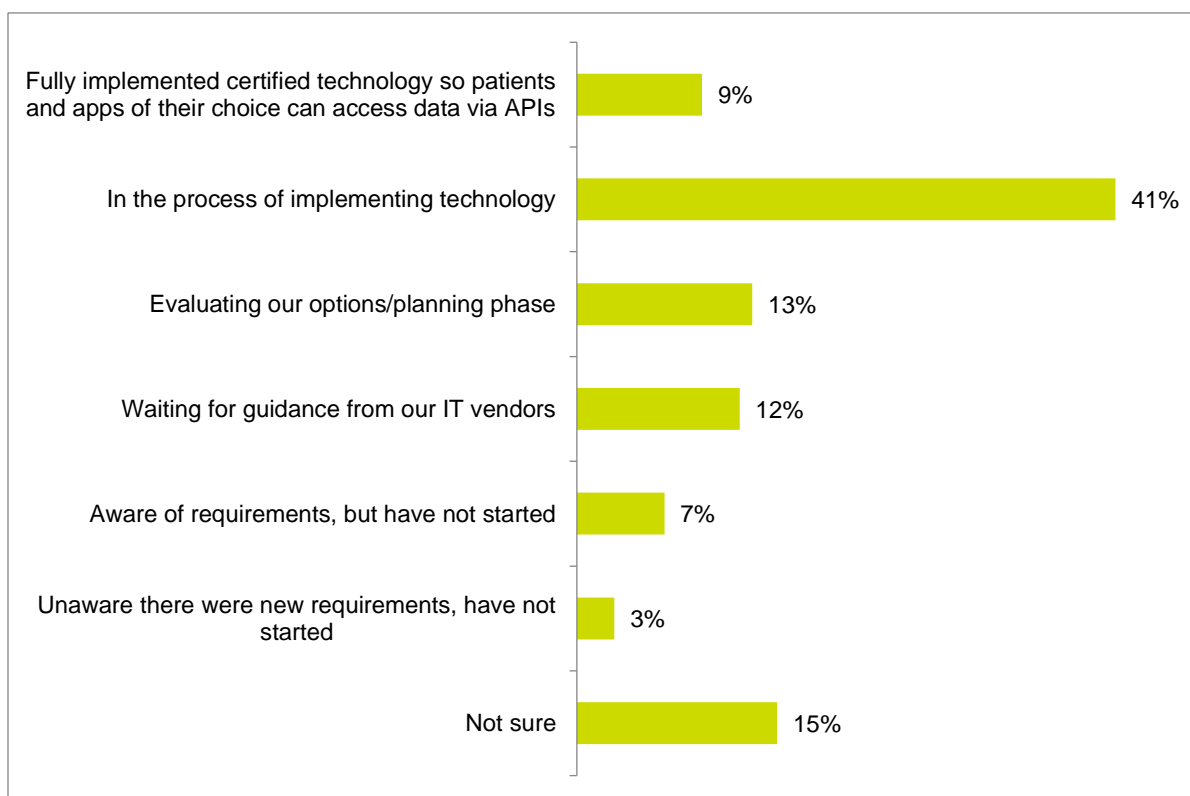
and CHIP Reauthorization Act of 2015 (MACRA) which allowed for more flexibility, lowered the reporting burden for providers and focused on the exchange of health information and use of technology to support patients.



■ PROGRESS MEETING 2015 PATENT ACCESS REQUIREMENTS

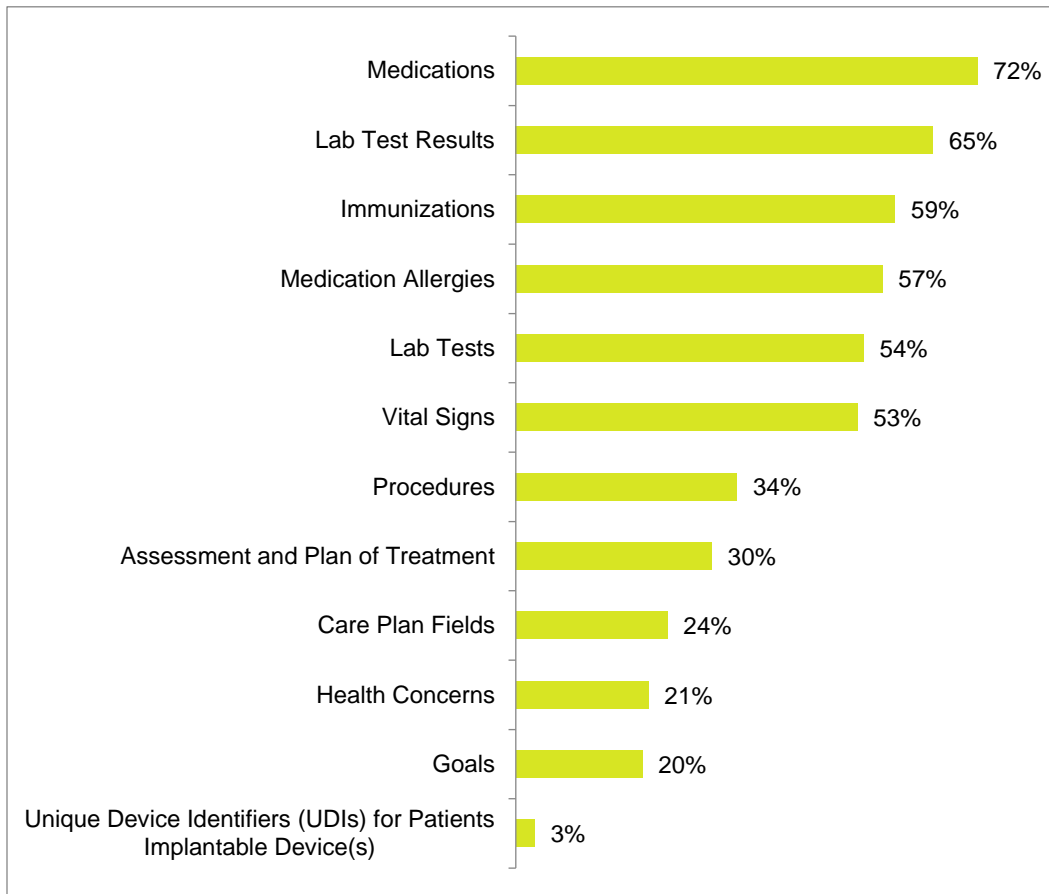
This survey revealed that most organizations had not made progress with MACRA, MIPS, and MU requirements. Figure 3 demonstrates that **41% of respondents reported being in the process of implementing the necessary technology and only 9% have fully implemented certified technology.** The remaining 50% of providers were evaluating their options or in a planning phase, waiting for guidance from their IT vendors, aware of requirements but had not started, were unaware of new requirements, or unsure.

Figure 3. Providers were asked how far along they were in complying with the 2015 patient access requirements



Participants were also asked to select which data sets they were implementing from a sub-set list of clinical data sets required in the 2015 ONC guidance. **Most commonly reported were medications (72%), lab test results (65%), immunizations (59%) and medication allergies (57%).** Figure 4 contains the full list of responses.

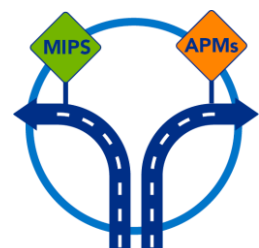
Figure 4. Providers were asked, of the subset of clinical data set values required in ONC 2015, which have been implemented and to select all that apply



Key Finding 3: Changing federal requirements, and the costs associated with them, are causing great concern among providers

The changing requirements and expectations over the last few years have left a negative impression on providers

- 72% report being very concerned about changing federal regulatory requirements and their associated costs
- 71% agree that additional federal incentives need to be created and/or redesigned to enable delivery system transformation



Many providers support the creation of additional “incentives,” however there are mixed thoughts about who should regulate those rules:

- 47% of respondents stated that the healthcare industry should self-regulate technology, devices and standards
- **Only 29% of respondents believe that current federal policies, committees, and regulations are sufficient to help the nation attain meaningful interoperability by 2020**

Key Finding 4: Current interoperability solutions do not meet the needs of providers

As the industry moves towards value-based care, **79% of respondents agree that strong interoperability capabilities are a key IT requirement for a successful transition to value-based care.** Many providers are optimistic about their in-house data collection and analytics tools, and view them as beneficial, 66% said tools are driving some or significant benefits for value-based care outcomes.

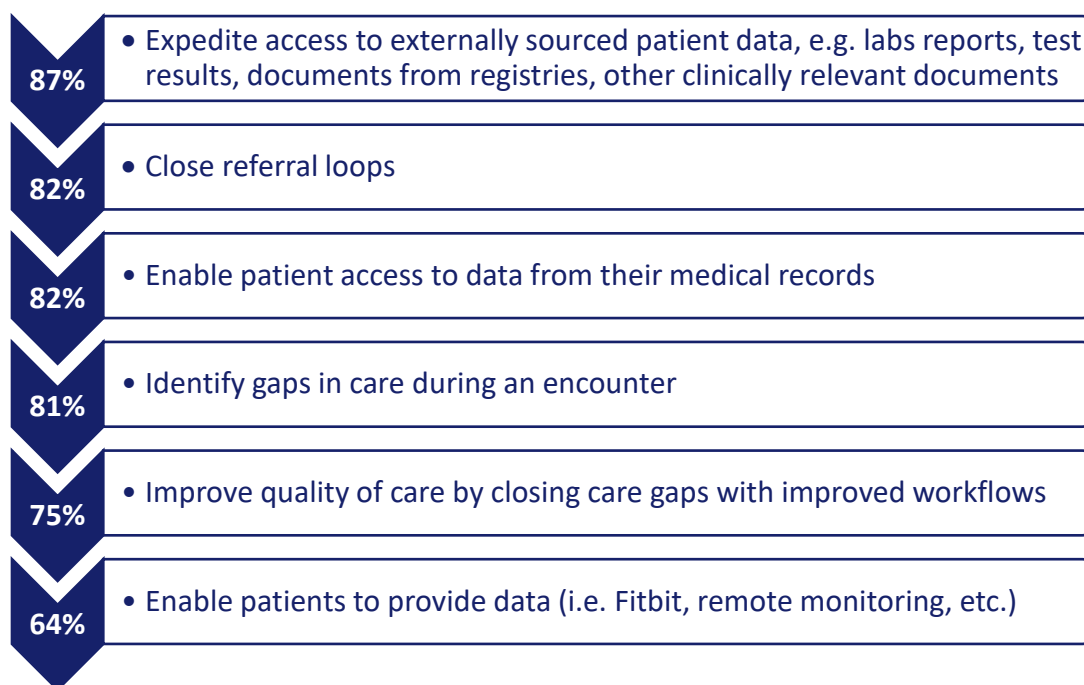
Despite the consensus around the importance of interoperability, respondents were unhappy with available solutions. Providers have high expectations for interoperability solutions and **68% percent agreed that solutions on the market did not meet their needs,** as they transition to value-based care.

■ FUNCTIONS INTEROPERABILITY CAN IMPROVE

Most participants report that interoperability would have some or significant impact on the functions related to sharing patient information in Figure 5. These findings demonstrate the value and the expectations provider-related organizations place on interoperability.



Figure 5. Providers were asked if they believed interoperability would have some or significant impact on the following



When asked how their interoperability budget was likely to change over the next two to three years, 58% reported it was likely to increase, 8% reported a likely decrease, 18% selected “no change,” and 16% selected “don’t know.”

Key Finding 5: Patient security, privacy and confidentiality remain top concerns amongst providers



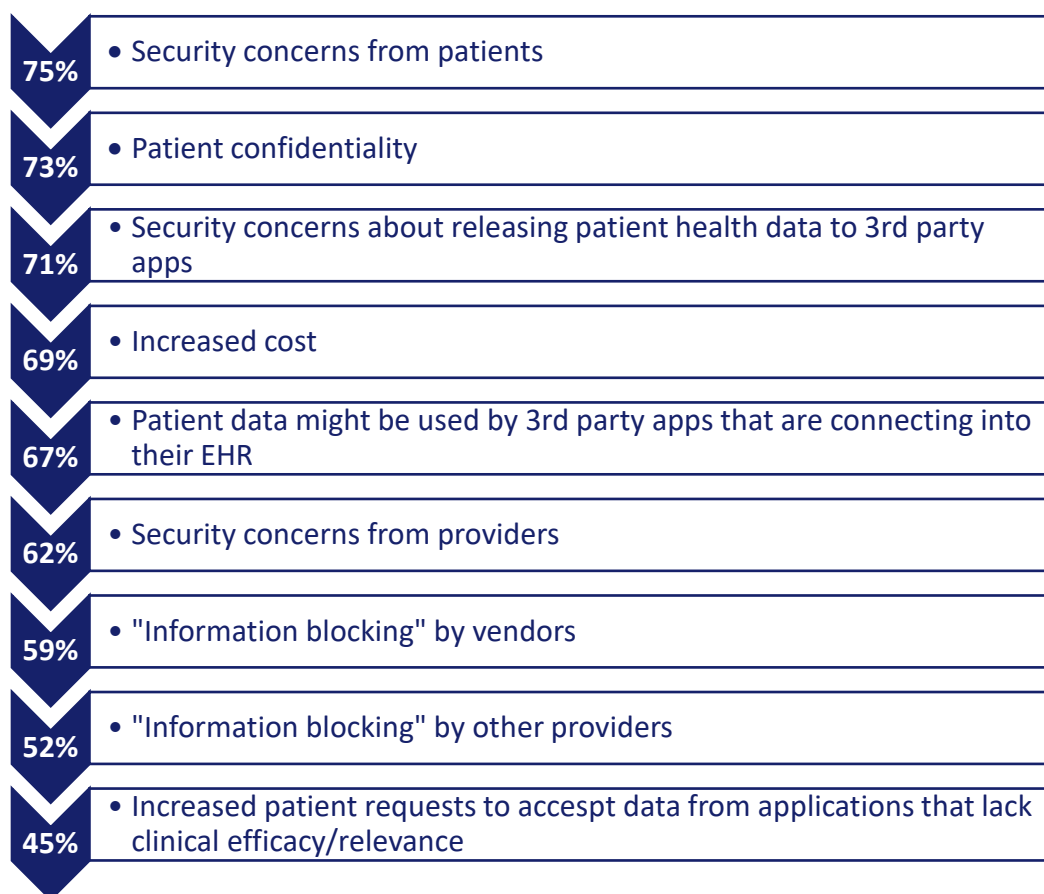
Cybersecurity has emerged as a key issue in healthcare. High-value medical information, including social security numbers, policy numbers, and billing information are attractive to criminals. In a 2017 survey of healthcare providers and health plans, 47% reported instances of security-related HIPAA violations, or cyber-attacks, that compromised their data during the last 24 monthsⁱⁱⁱ.

Several large breaches at major healthcare provider organizations, over the last few years, have documented the disruptive nature of security breaches. Costs in the U.S. average \$380.00 per compromised record^{iv}. Prevalent in the survey findings was concern about privacy and security.

■ TOP CONCERNS & PRIVACY REQUIREMENTS

When respondents were asked what they experienced moderate or major concern about, **75% said security concerns from patients, followed by 73% stating patient confidentiality, and 71% indicating security concerns over releasing patient health data to 3rd party apps.**

Figure 6. Providers were asked what they experienced moderate or major concern about



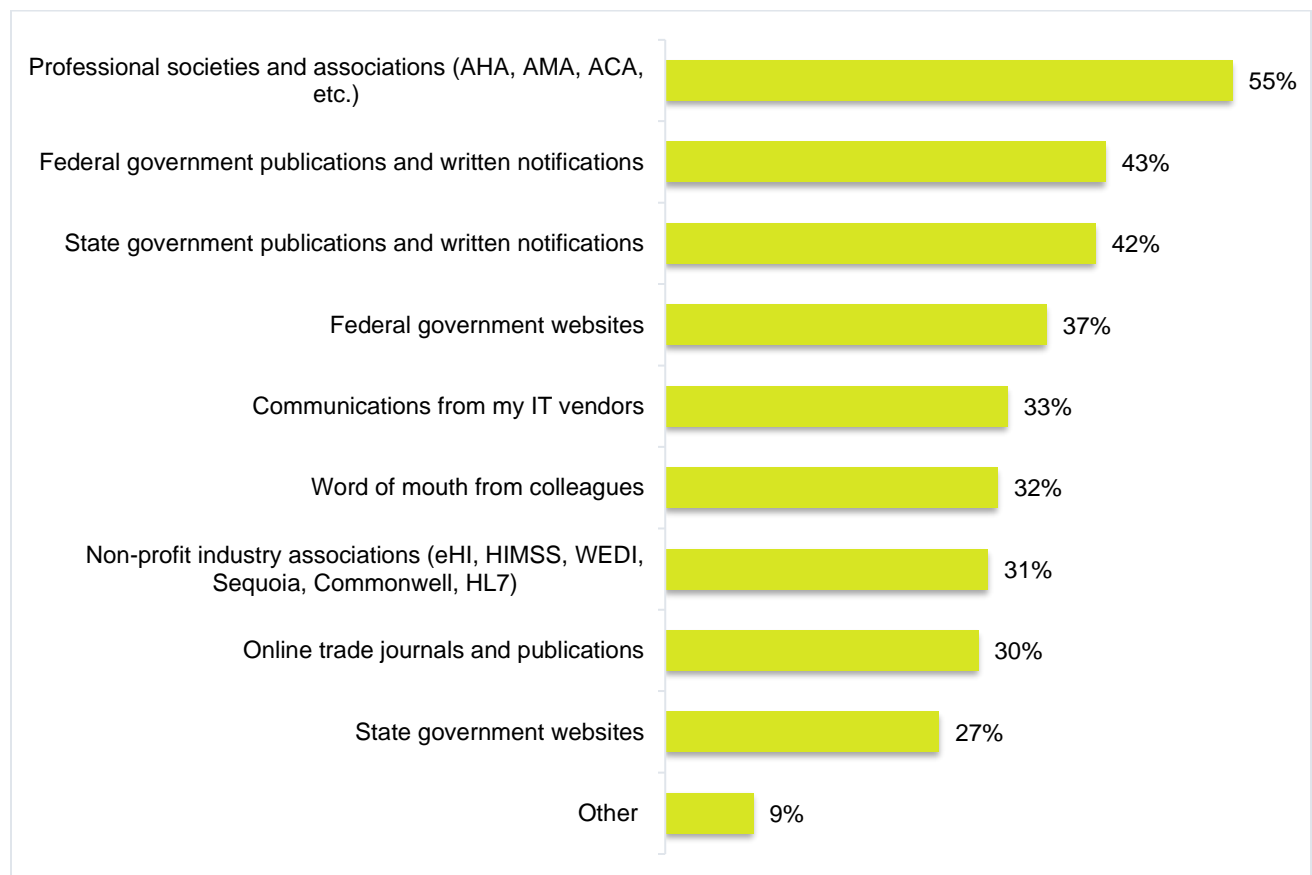
Providers do not clearly understand how patient clinical information should be shared. **Only 35% of respondents agreed that providers know which clinical information can be legally shared with other providers and payers.** More education is needed on this topic.

Key Finding 6: Professional societies and industry groups play a key role in educating providers on new regulations



It is important to understand how, and where, providers get their information about new regulations. **Professional societies and associations, such as American Hospital Association and American Medical Association, were the most reported source of education about new regulatory requirements (55%), followed by publications and written notifications from federal (43%) and state (42%) government.** Societies and associations can be used to voice the needs of industry when expressing a misalignment of regulations and business needs.

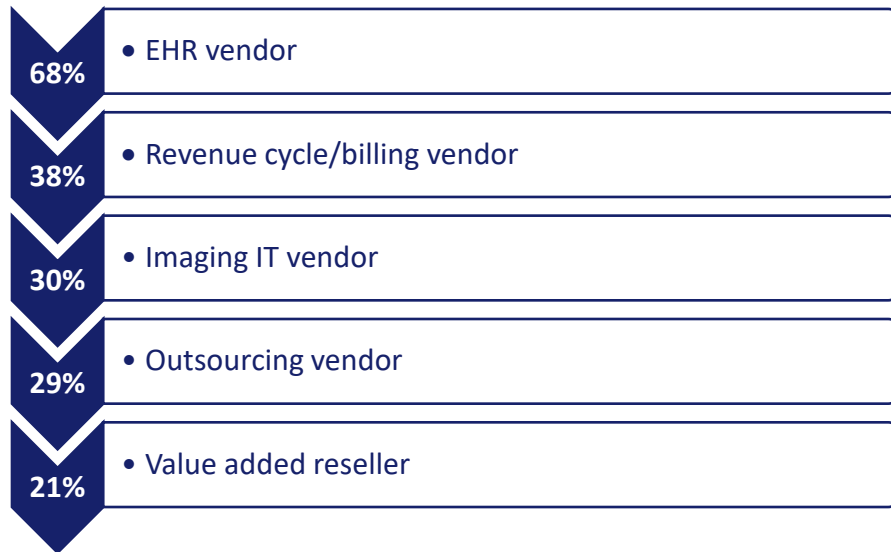
Figure 7. Respondents were asked how they learned about new regulatory requirements and to select all that apply



Key Finding 7: EHR vendors are viewed as “helpful” in addressing current patient access regulatory requirements

Almost 70% of respondents mentioned EHR vendors as the most “helpful” to providers in the critical role of understanding patient access regulatory requirements.

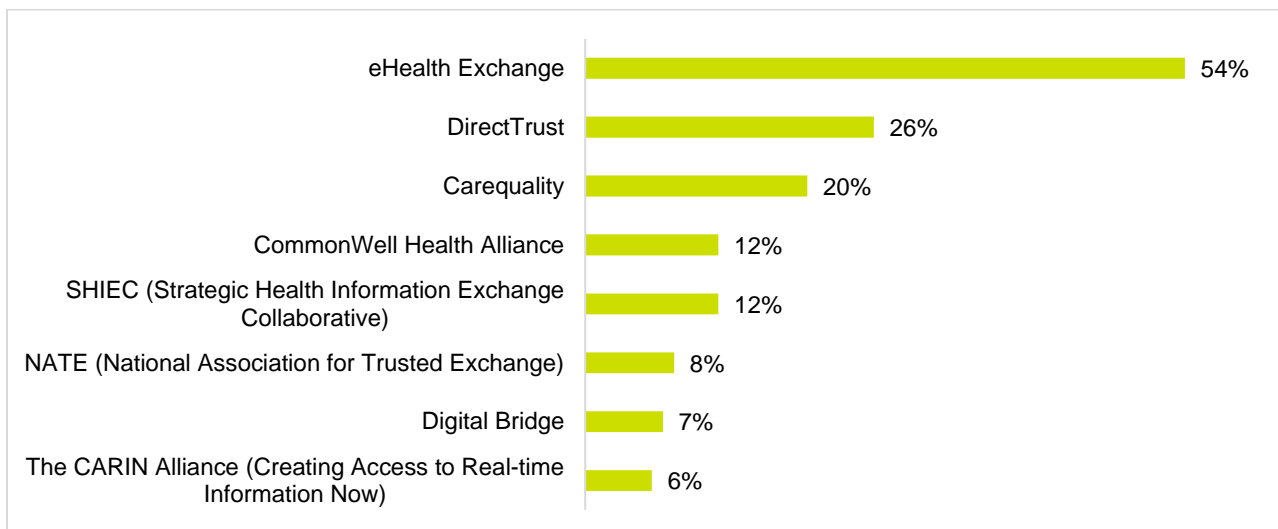
Figure 8. Respondents were asked which IT vendor is helping them address the current patient access regulatory requirements?



Key Finding 8: Providers are engaged in a variety of alliances and participate in different interoperability frameworks

Although 54% of respondents reported that their organization participates in eHealth Exchange, followed by Direct Trust (26%), and Carequality (20%), it is important to consider whether data traffic is flowing.

Figure 9. Respondents were asked which of the following frameworks and alliances their organization participated in or used and to select all that apply



Key Finding 9: Providers prioritize connectivity in a variety of ways

Providers and executives often tout the importance of different connectivity linkages, such as provider-provider vs. provider-payer. Participants were asked to rank the importance of the connectivity areas. Although there is very little difference between the weighted scores, this result could be interpreted as a recognized need for interoperability across all connectivity areas. This is an area for future exploration.

*Table 1. Providers were asked to rank the following connectivity areas based on their priority for their organizations
1= least important, 4= most important*

| Connectivity Areas | 1 | 2 | 3 | 4 | Weighted Score |
|--|-----|-----|-----|-----|----------------|
| Reporting: Exchange data for regulatory reporting/industry wide data for research purposes | 29% | 26% | 19% | 25% | 2.59 |
| Payer-Provider interoperability: Close care gaps via access to missing information from payer | 24% | 31% | 24% | 21% | 2.57 |
| Interoperability within the practice/provider organization: Access patient data within the provider organization via several interfaces (labs, patient portal, 3rd party modules, etc.) to build complete patient record, but still practice | 21% | 25% | 23% | 31% | 2.36 |
| Interoperability across providers: Use interoperability to gather data across different provider organizations to support a holistic view of the patient and accountable care collaboration (Population Health Management Interoperability) | 14% | 19% | 37% | 30% | 2.18 |

Thoughts on Moving Forward

As this year's survey illustrates, patients are increasingly engaged in tracking and sharing their own clinical data. Providers are rising to the challenge and increasing the availability of different data types. This step forward in-patient engagement should be viewed positively by providers and patients, who expect improved quality of care and patient satisfaction as a result.

■ **SUPPORT CLEAR REGULATIONS THAT ALIGN BETTER WITH BUSINESS NEEDS & WORKFLOW**

Many challenges remain associated with exchanging data and making it available. Specifically, providers are struggling with meeting federal regulations, as the costs and resources associated with regulatory changes add up and many do not align with their business needs and workflow. Uncertainty around new regulations demonstrated the biggest concern from respondents. Industry leaders should work with policymakers to ensure clear regulations are communicated. Giving providers adequate time to prepare can also help address their ability to meet regulatory changes.

■ **LEVERAGE NONPROFITS & PROFESSIONAL SOCIETIES FOR SUPPORT AND FEEDBACK ON POLICIES**

The importance of professional societies and associations (as educators and a key voice for the healthcare industry) was pronounced. Groups like eHealth Initiative and other nonprofits have a vital role to play in adoption of regulations and success with interoperability. These groups can be utilized as educational extenders to confirm providers have critical information about regulatory changes. More importantly, these groups can serve as a feedback loop to policymakers. Policymakers should tap into nonprofits and professional societies, in a more regular fashion, to ensure policies are positively impacting patients and do not disrupt care delivery.

■ **COMMUNICATE THE VALUE OF PATIENT INFORMATION IN TRANSFORMING CARE**

Healthcare leaders are focused on transforming care delivery to improve patient outcomes and lower costs. Improving access to patient information is one component to this transformation. With improved access to their own health information, patients will better understand their diagnoses and treatments, and providers and clinicians can play a critical role in helping to educate patients. Promoting the value of sharing patient information can create more momentum in patient education efforts. By sharing information more openly, clinicians positively impact the key components of transforming care, patient engagement, compliance with treatment, and outcomes.

Methodology

The 2017 *Survey on Access to Patient Information* was launched on September 8, 2017 and closed September 22, 2017. Announcement of the survey was communicated through e-mail lists and meetings to audiences that included the Accountable Care Organizations (ACOs), provider organizations, and Health Information Exchanges (HIEs).

The survey consisted of 47 multiple-choice and open-ended questions. Participants were not required to answer every question in the survey. Each response was reviewed carefully and significantly incomplete responses, duplicates entries, and responses from organizations not directly involved with patient-related interoperability solutions were excluded.

After review, a total of 107 respondents were included in the results. **This survey should be considered a snapshot of industry perspectives.** Gift cards of small monetary value were offered as incentives to complete the survey in its entirety.

Acknowledgements

eHealth Initiative Foundation is grateful to GE Digital Healthcare for their critical support of our research & education efforts related to interoperability and provider access to patient information. A report of this breadth and scope would not be possible without their generosity. In addition, several key staff were instrumental in the development of this report, special thanks to Claudia Ellison, Kayli Davis, and Nekose Wills.

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