

Patient Gateway Advisory Council

Jon Wald, MD
Product Manager
December 8, 2004, 7:00 – 8:30 am
Several Videoconference Locations
Partners Healthcare



Agenda

(Following each agenda item we will take questions)

- Product Status (15 min)
- PACCT Overview (5 min)
- PACCT Launch (45 min)
 - Physician Experience (20 min)
 - Patient experience (15 min)
 - Practice Requirements (10 min)
- Q & A (15 min)



FY'05 Projects

PACCT	Study of pt portals in primary care – February 2005
OSL	Pilot of in oncology with 'multipractice' – July 2005
Passport pilot	Pilot of new services for patients – October 2004
Core	Enhancements funded by MGH - (not started)
Product maintenance	Ongoing "Lights on" fixes, testing, system upgrades, support improvements
Support	Handle issues from patients (400/month) and practices (5-10/month)
Passport scalability	Planning project to estimate expansion requirements
Other research	Derm e-visits; LMR waiting room history-taking; MGH Ambulatory Practice of the Future

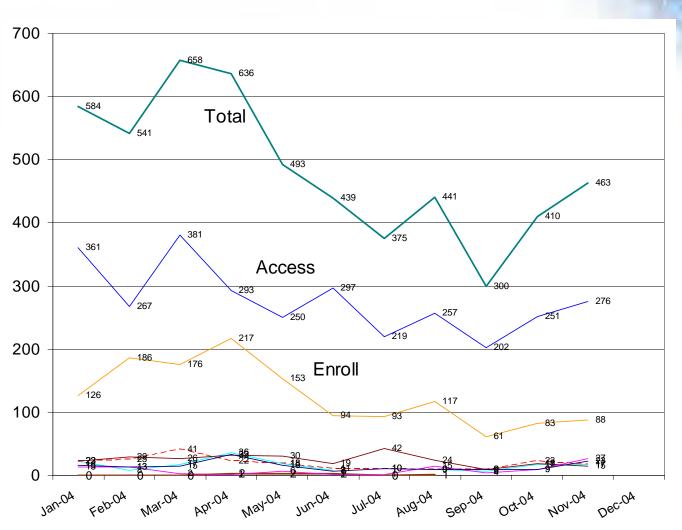


Usage of Patient Gateway

- 19,600 Patients
 - Enrolled as of 12/1/2004
- 14 Practices (150+ physicians)
 - BWH, MGH as part of PACCT study
 - NWH Family Medicine, BWH Norwood as part of Passport pilot
 - Senior Health as part of early PG pilot
 - Oncology Service Line pilot ~ July 2005
 - Pilot at DFCI/BWH and MGH Cancer Center (8 physicians, 500 patients)



Patient Support Issues



All Issues ~460/mo (requires about 1.0 FTE plus development)

Subsequent ~275/mo Username/ password/ technical/

Initial ~80/mo Username/ password/ technical/



Recent Software Releases

- Improvements to reduce support workload
 - Access
 - Select own Username (for patients)
 - MMN removed from PW recovery
 - Enrollment
 - form and tools enhanced
- System certification and testing
 - XP sp2 issue
 - Win2k sp4 testing
 - EMPI Services testing
 - Ongoing testing tool enhancements
- BWH added links to Welcome page
 - To market Hospital e-Newsletter



FY'05 Development Work

		<u>Effort</u>
•	Support Bulfinch move	M
	— Consolidation of practice locations	
•	Display all appointments for the patient	L
•	Ongoing system certification/testing	M
	 Needed as systems are upgraded 	
•	New feature "top priorities" (if funded)	
	 Lab results pilot 	M/H
	— Proxy (pediatrics & adults)	H
	Self-Registration	H



Usage as of Dec 1, 2004

		Patient		Pts with	Msgs	Msgs	Pts with	Accts	Practice
Practice Name	LiveDate	Accts	MDs*	Sessions	4 Wks	Total	Msgs	per MD	Marketing
BWH BIMA	Jun 2003	1098	55+	52%	96	1555	29%	20	+
BWH BPG	Apr 2003	1259	11	60%	83	1728	35%	114	++
BWH BPP	Mar 2003	908	8	52%	93	1435	38%	114	++
BWH Norwood	Feb 2002	1604	4	65%	311	5251	47%	401	++++
BWH SJP	Dec 2003	119	8	51%	9	94	29%	15	+
BWH WH	Jun 2003	809	9	55%	14	930	34%	90	+
MGH Beac Hill	Jun 2002	2579	12	63%	247	5140	46%	215	+++
MGH BMG	Mar 2002	4610	19	65%	521	8388	42%	243	+++
MGH Charlestown	Oct 2003	550	13	49%	35	853	33%	42	+
MGH Downtown	Apr 2003	2879	4	61%	238	7693	46%	720	++++
MGH Rev (BRD)	Mar 2003	425	4	53%	63	799	37%	106	++
MGH Rev (OCN)	Sep 2003	365	12	59%	22	479	34%	30	+
MGH WH	Jun 2003	2116	20	56%	260	4388	41%	106	++
Total		19321	180+	60%	1,992	38,733	41%	107	



PATIENT
ACCESS TO
CARE AND
COMMUNICATION
TECHNOLOGY



Grant Overview

Patient Access to Care and Communication Technologies

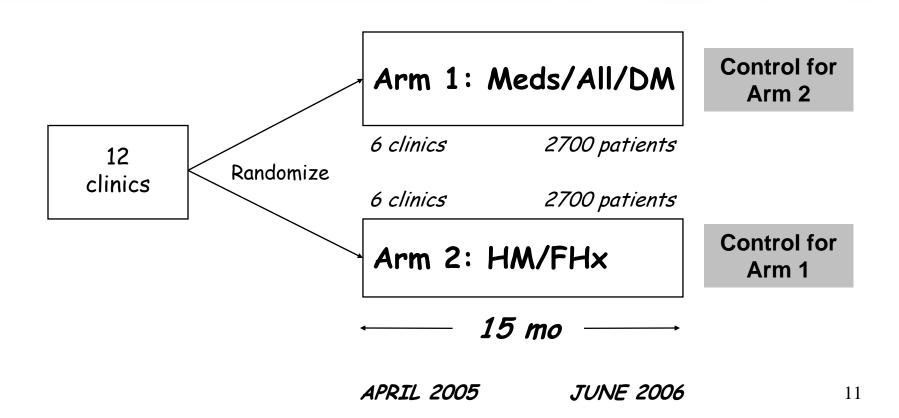
- AHRQ 3-year, \$1.7 Million
 - "Shared Online Health Records for Patient Safety and Care"
 - Blackford Middleton, MD (PI)
 - Jon Wald, MD (Co-PI)
 - Tejal Gandhi MD, Eric Poon MD, Jeff Schnipper MD, Richard Grant MD, James Meigs MD, David Bates MD
- Focus: Quality of Care with use of Patient Portal
 - Encourage patients, pre-visit, to complete a Journal
 - Encourage physicians to look at it
 - Measure clinical outcomes (primary) and process outcomes (secondary)



Compact Study Design

Interventions: (Arm 1) Medication Tracking and Diabetes Care

(Arm 2) Prev. Care Reminders and Family History





Arm 1 and Arm 2

- Arm 1
 - Medication Safety
 - Diabetes
 - Arm 1 Practices
 - <u>MGH</u> Charlestown, Bulfinch Medical Group,
 - <u>BWH</u> BIMA, Norwood, Women's Health
- Arm 2
 - Care Reminders (Health Maintenance)
 - Family History
 - Arm 2 Practices
 - <u>MGH</u> Beacon Hill, Downtown, Revere, Women's Health
 - <u>BWH</u> BPG, BPP, Southern Jamaica Plain



Meds/Allergies (Arm 1)

- Prompt patient to
 - Edit/revise medication list, allergies, and alternative therapies
 - Say why they are taking the medication and who prescribed it
 - Provide links to patient information
 - Identify concerns or side effects
 - What they are
 - How long they've lasted
 - Whether they've been communicated to PCP/other



Diabetes (Arm 1)

- Address management of:
 - Blood sugar
 - Blood pressure
 - Cholesterol
 - Referrals
 - Retinal, Foot, Nutrition
 - Suggested prescriptions
 - Aspirin, Exercise, Smoking cessation



Health Maintenance (Arm 2)

• Identify care that is due or almost due

<u>Condition</u> <u>Test/procedure</u>

Colon ca Colonoscopy

Breast ca Mammography

Cervical ca Pap smear

Influenza Flu shot

Pneumonia Pneumovax

Tetanus Tetanus shot

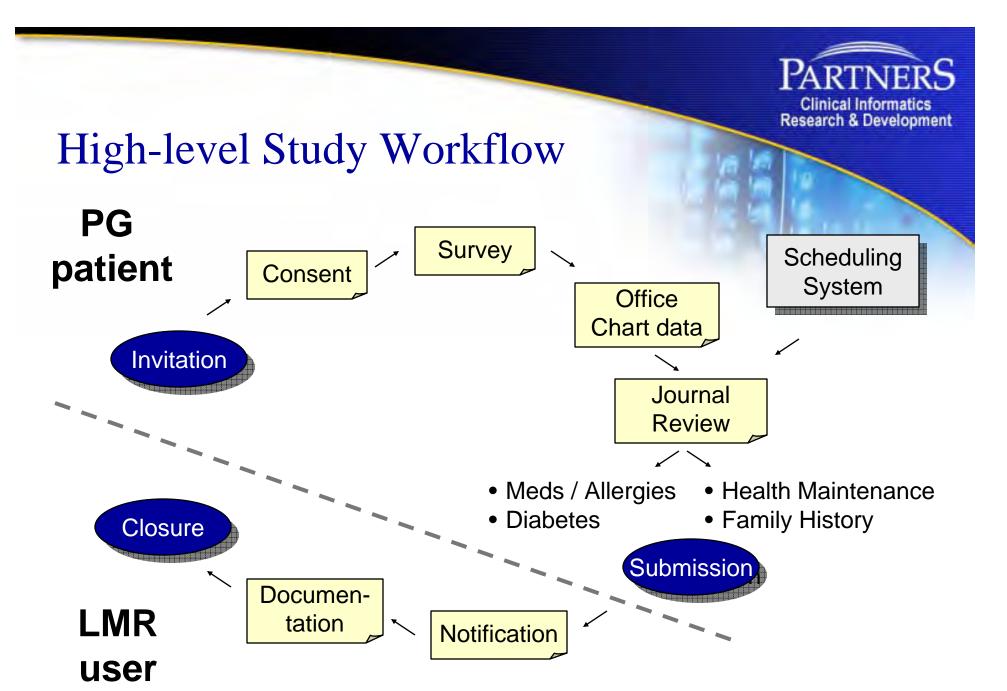
Heart disease Cholesterol

Osteoporosis Bone density scan



Family History (Arm 2)

- Personal or Family History of:
 - Colon Cancer
 - Breast Cancer
 - Coronary Artery Disease
 - Diabetes Mellitus, type II
 - Osteoporosis
 - Glaucoma



Visit Workflow Clinical Informatics Research & Development Online 3 weeks Journal before routine visit Invitation Arm 1 Arm 2 content content Scheduling System Meds / Allergies Health Maintenance Family History Diabetes (Patient) (Physician) Only 1 Complete/ per visit Capture Info **Submit** Closure **Allowed** As Text Structured **Notification** Via Tracker Document **Navigation** Visit in LMR Via Chart **LMR** Via Schedule New View/Print **LMR Journal Tools** 18



Data Collected from Patients

A R M 1

A

R

M

2

Meds/Allergies:

- Accuracy, concerns
 - Monographs available (but no DDI checking)

Diabetes:

- Due items, Target attainment
 - Health education information available

Care reminders:

- Due items
 - Health education information available

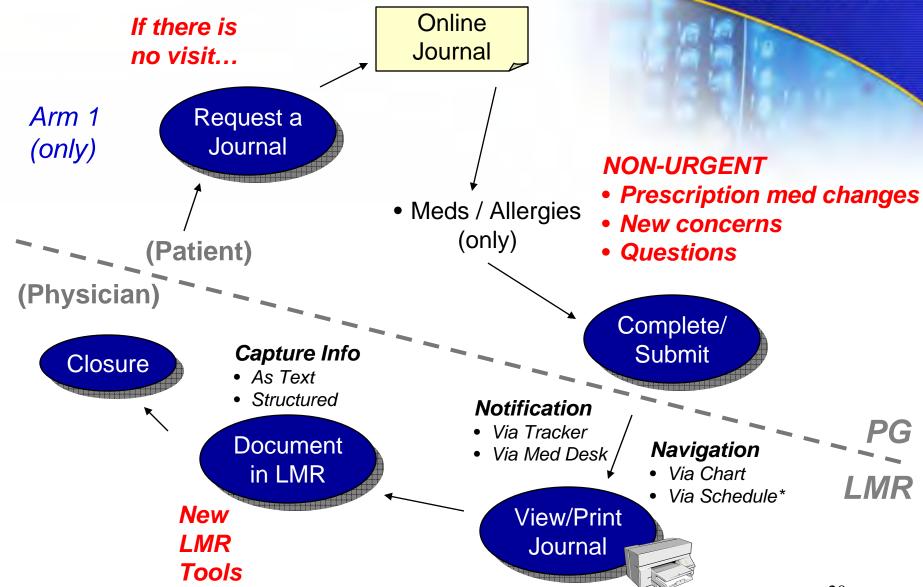
Family history:

- Document their family info
 - Health education information available

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Non-Visit Workflow







Non-Visit Update Request

ARM 1 only: Medications and Allergies only

Thank you for requesting this medications/allergies update.

NOTE: For urgent care needs, or emergency care, please contact your doctor's office by telephone or dial 911 immediately.

Please confirm that this is not an urgent request:

This is not an urgent request

Please mark the reason for this request (check all that apply):

I have changes to my prescription medications or allergies to add to my chart

I am reporting new medication side-effects or problems that are non-urgent

I have some non-urgent questions about my medications I want to discuss with my doctor'

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Estimated/Target Volumes

- Offer study to 20,000 PG users
 - *Target:* 5400 patients who each submit a *Journal*
- Since Journal use may be related to physician marketing of Patient Gateway:
 - Target: 100+ PG accounts per physician
- Expected Journals/MD/week:
 - <1 on average



Modest Journal Volume

		Patient		% of	Journal	J per	J per MD
Practice Name	LiveDate	Accts	MDs	Accounts	Allocation	Week	per Week
BWH BIMA	Jun 2003	1098	55+	6%	307	6	.11
BWH BPG	Apr 2003	1259	11	7%	352	7	.62
BWH BPP	Mar 2003	908	8	5%	254	5	.61
BWH Norwood	Feb 2002	1604	4	8%	448	9	2.16
BWH SJP	Dec 2003	119	8	1%	33	1	.08
BWH WH	Jun 2003	809	9	4%	226	4	.48
MGH Beac Hill	Jun 2002	2579	12	13%	721	14	1.16
MGH BMG	Mar 2002	4610	19	24%	1288	25	.30
MGH Charlestown	Oct 2003	550	13	3%	154	3	.23
MGH Downtown	Apr 2003	2879	4	15%	805	15	3.87
MGH Rev (BRD)	Mar 2003	425	4	2%	119	2	.57
MGH Rev (OCN)	Sep 2003	365	12	2%	102	2	.16
MGH WH	Jun 2003	2116	20	11%	591	11	.57
Total		19321	180+	100%	5,400	104	.58



Project Milestones

- Development Progress
 - Pilot: Completed (Aug/Sep 2004)
 - Special thanks to: Norwood, Beacon Hill
 - Patient Usability test: Completed (Nov 2004)
- Important Dates
 - Study Enrollment for Patients
 - Feb '05 Jun'05
 - Journals available
 - *Apr'05 Jun '06*



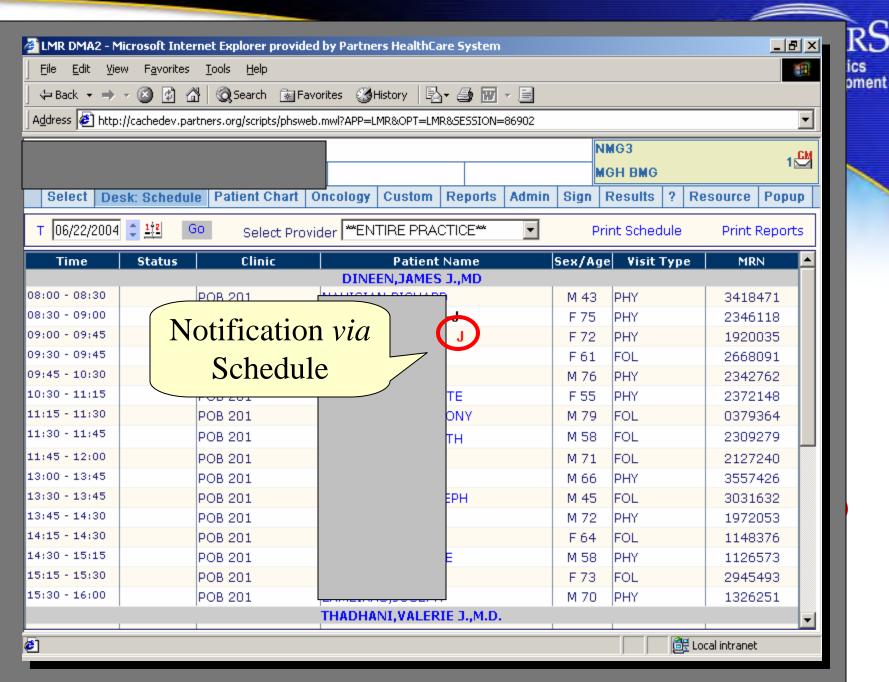
Physician Experience

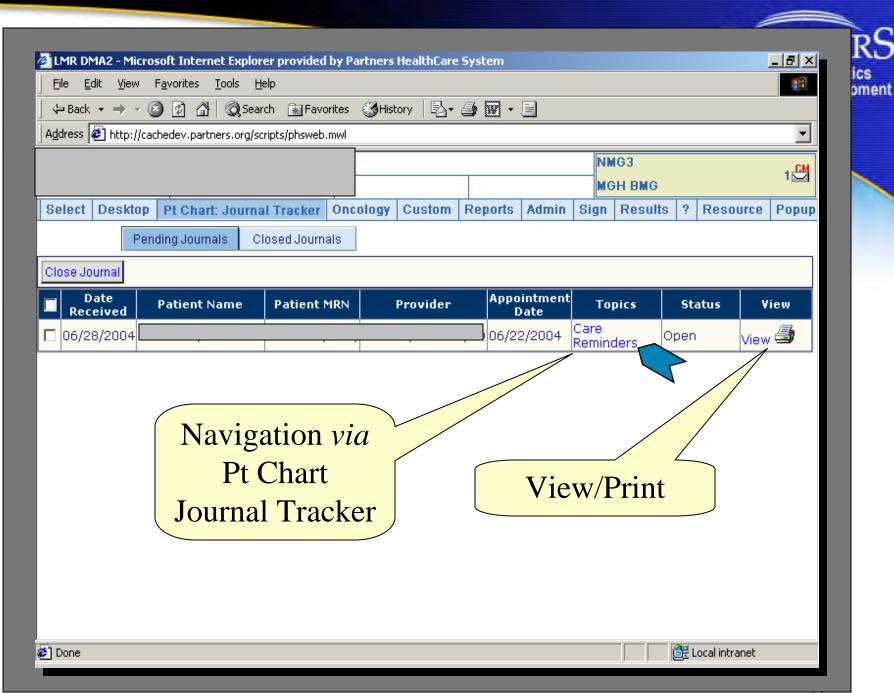
Using the Patient Journal

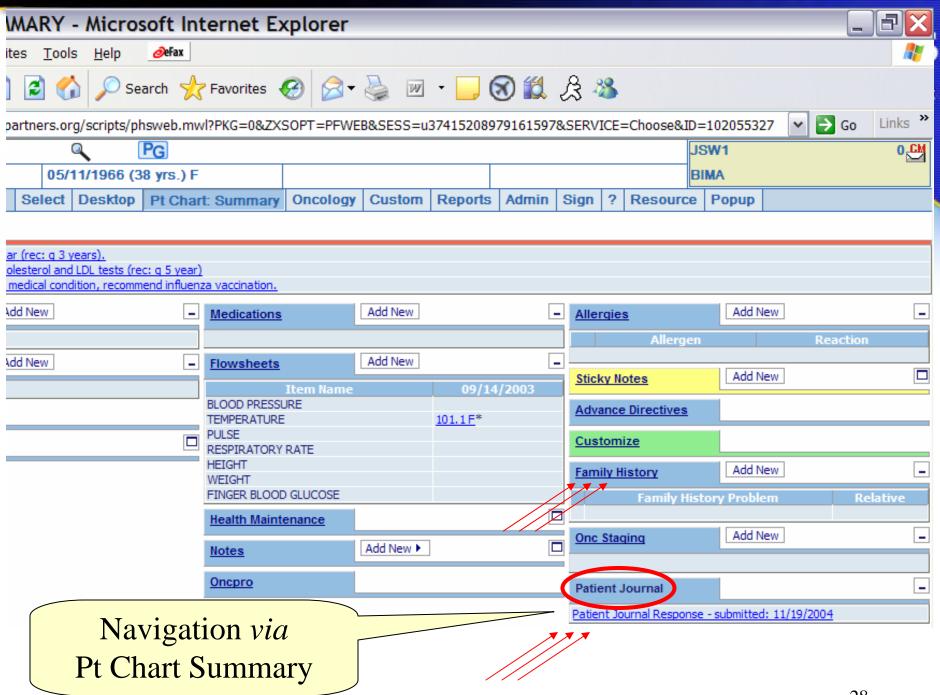
Navigation/Notification

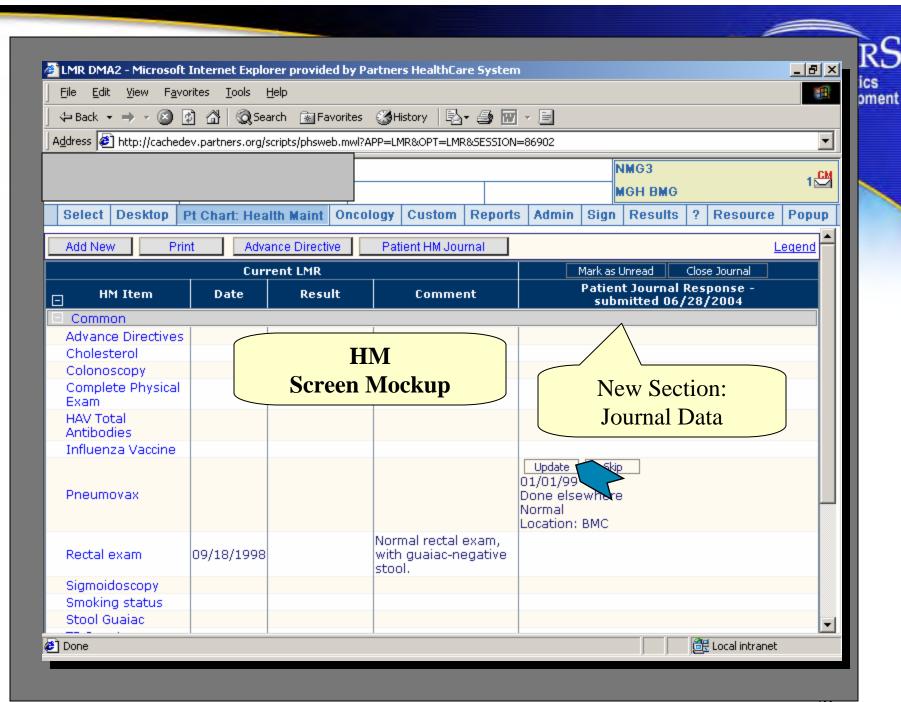
View/Print

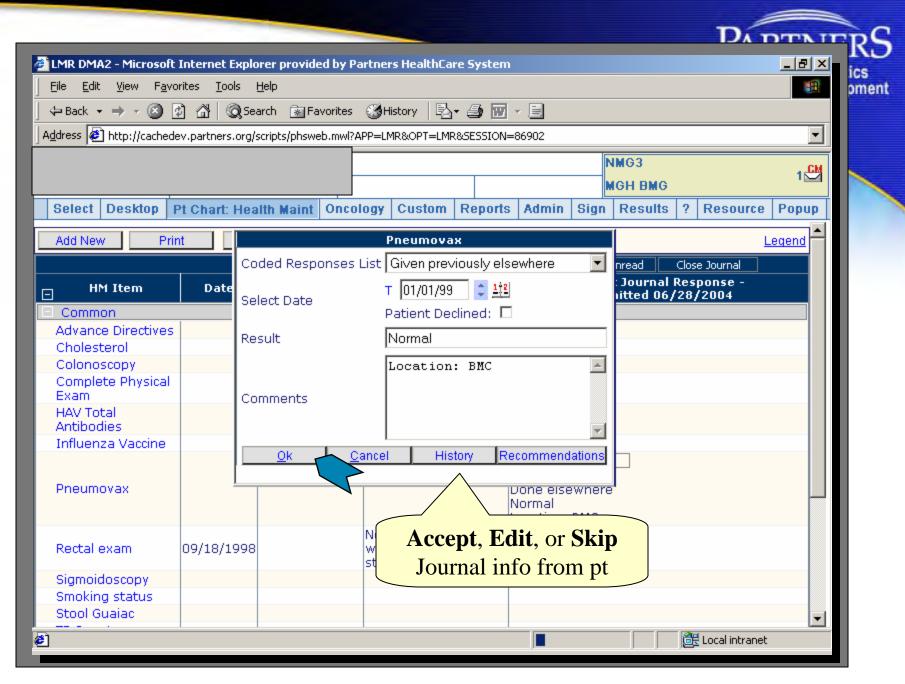
Document in LMR

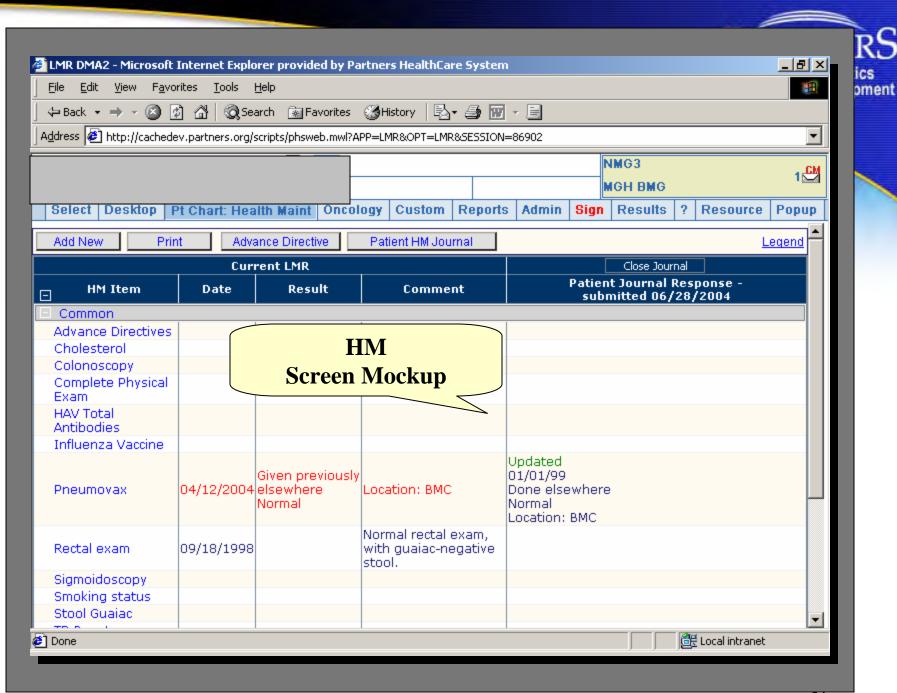


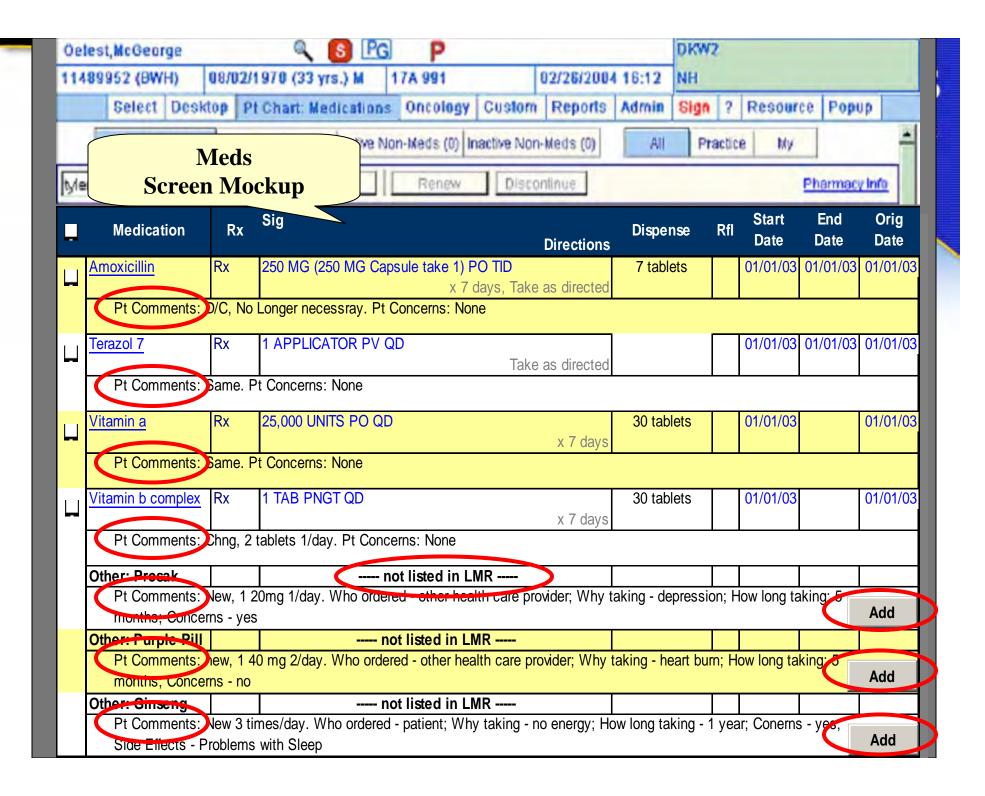






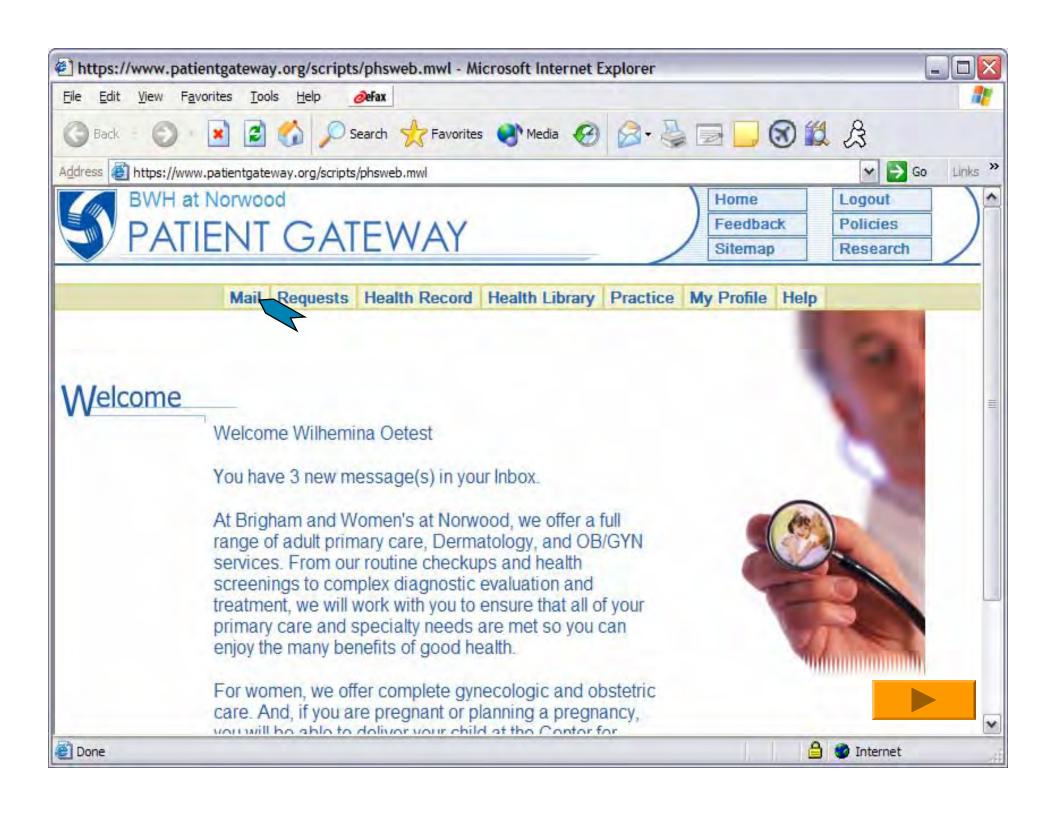


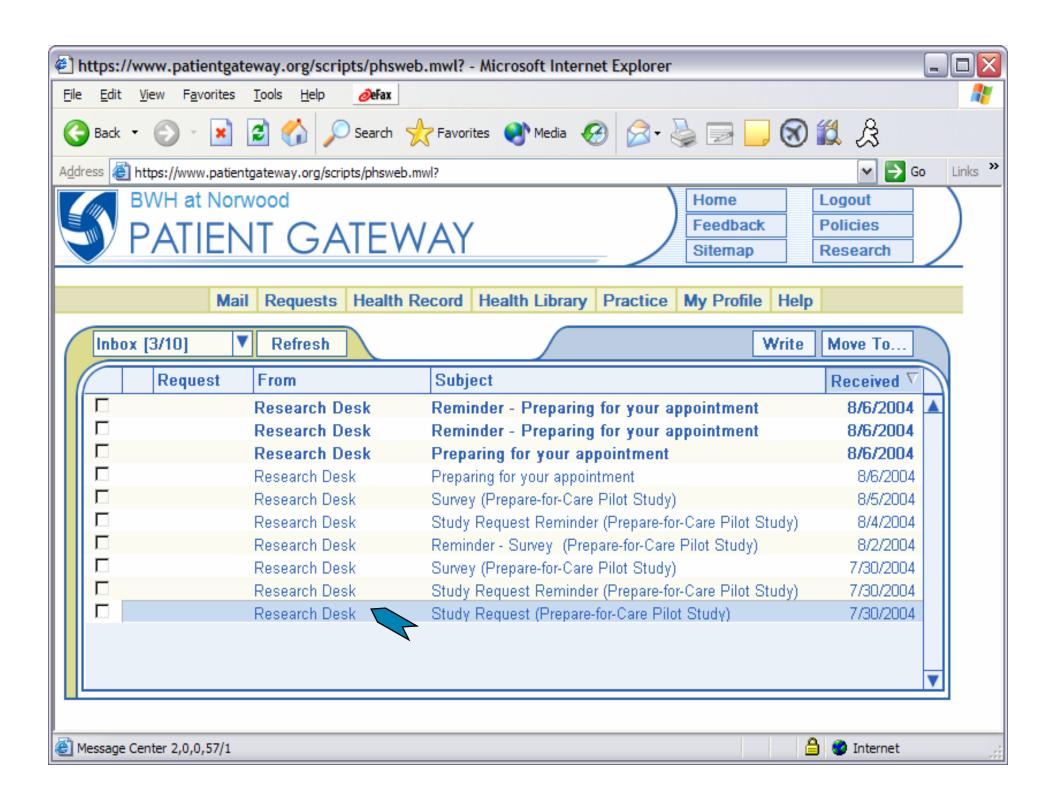


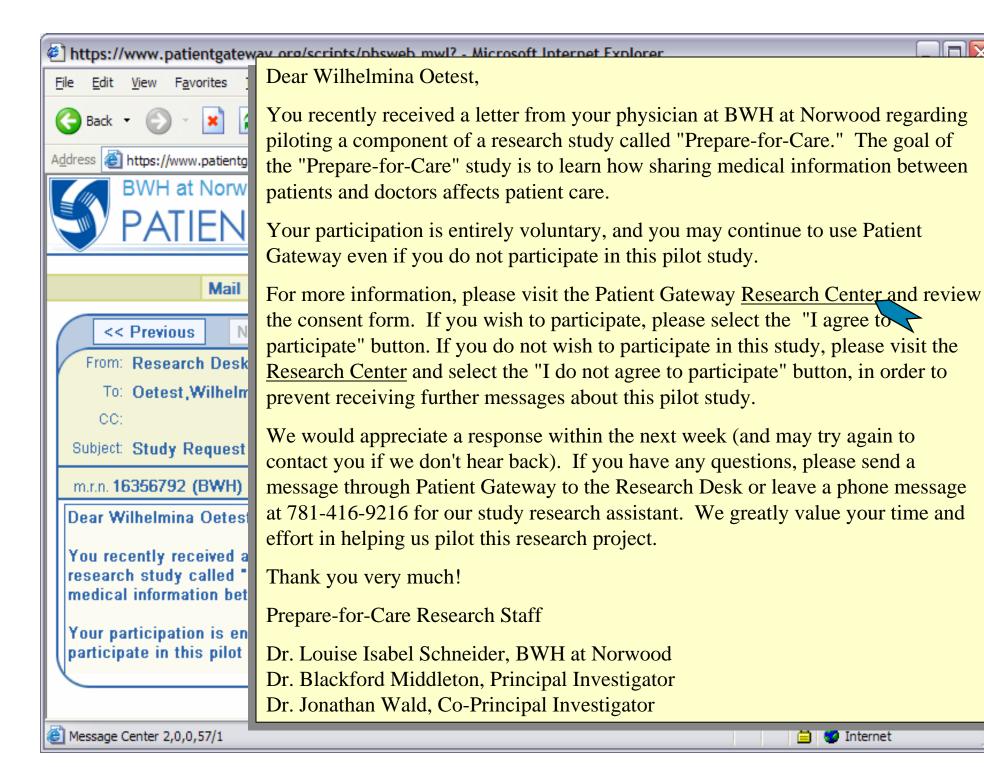


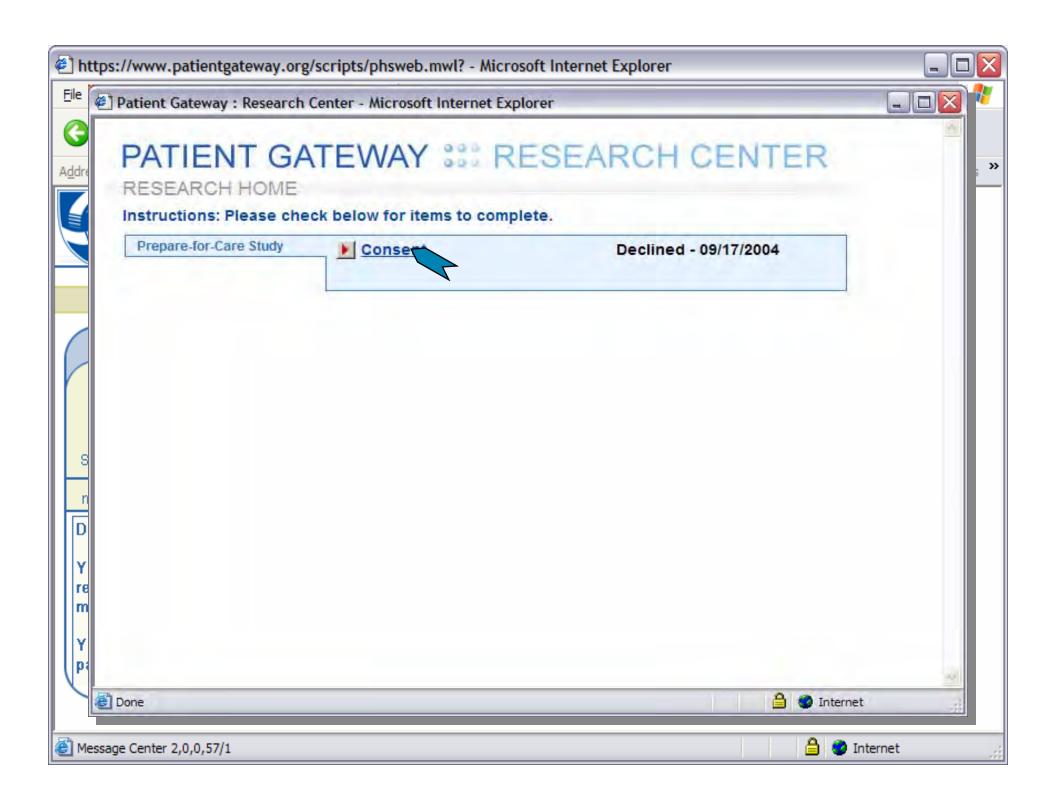


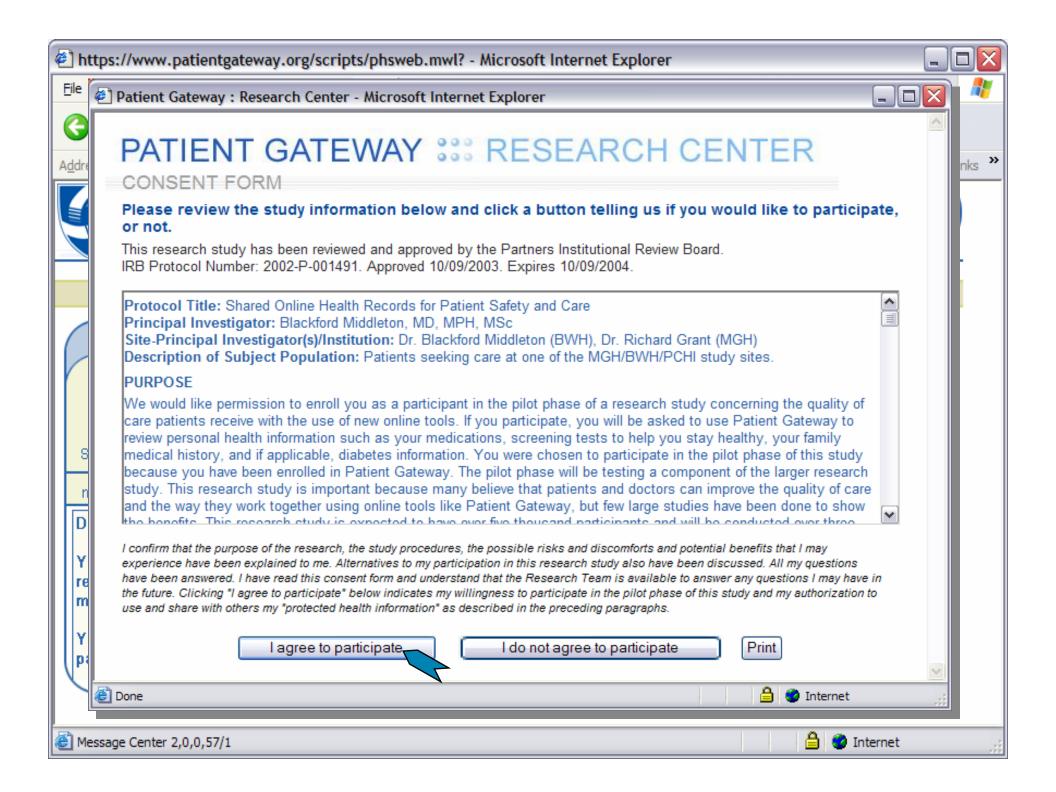
Patient Experience

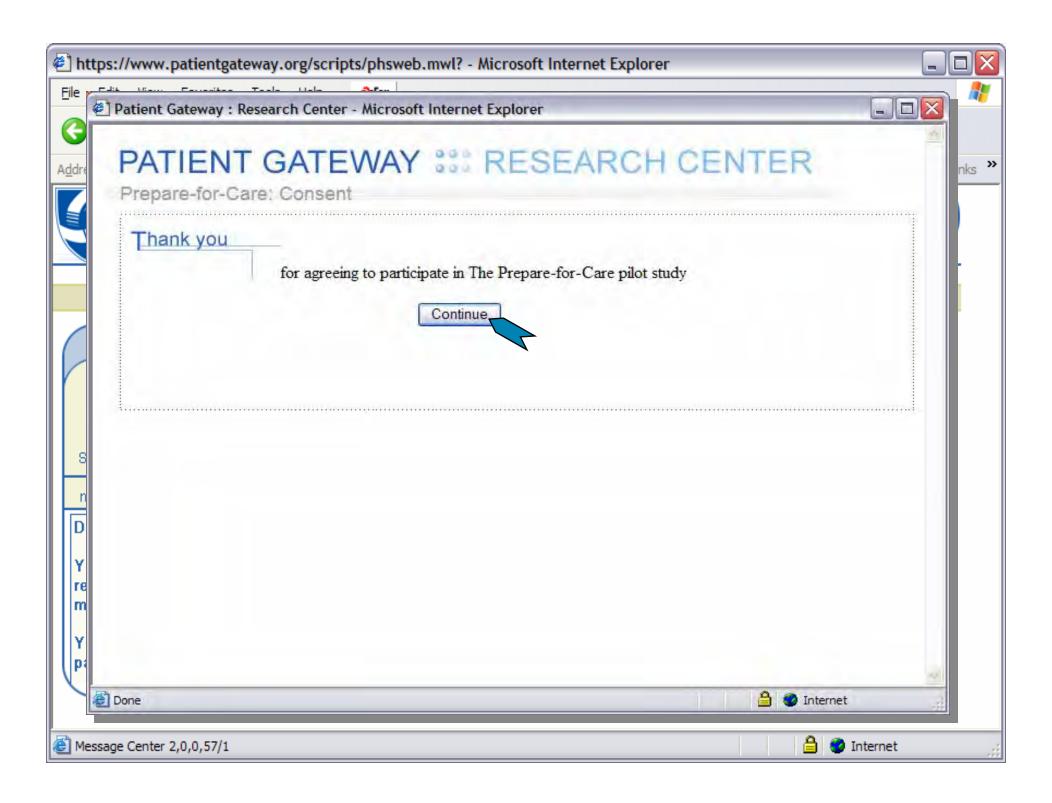


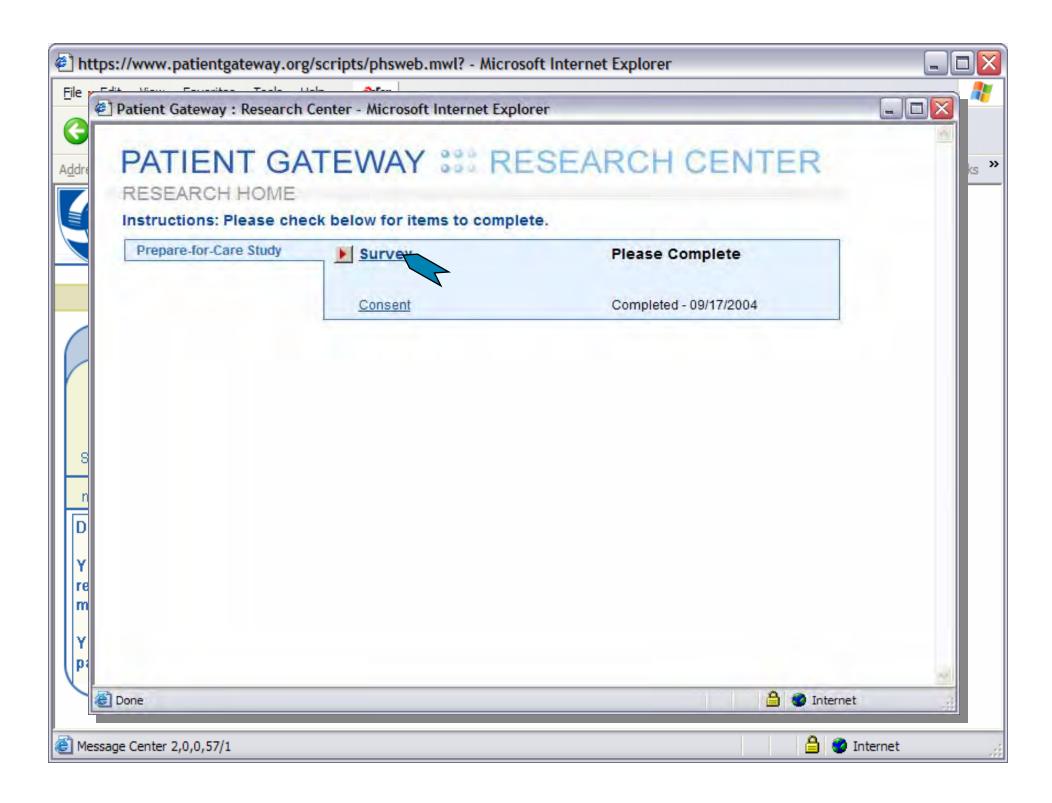


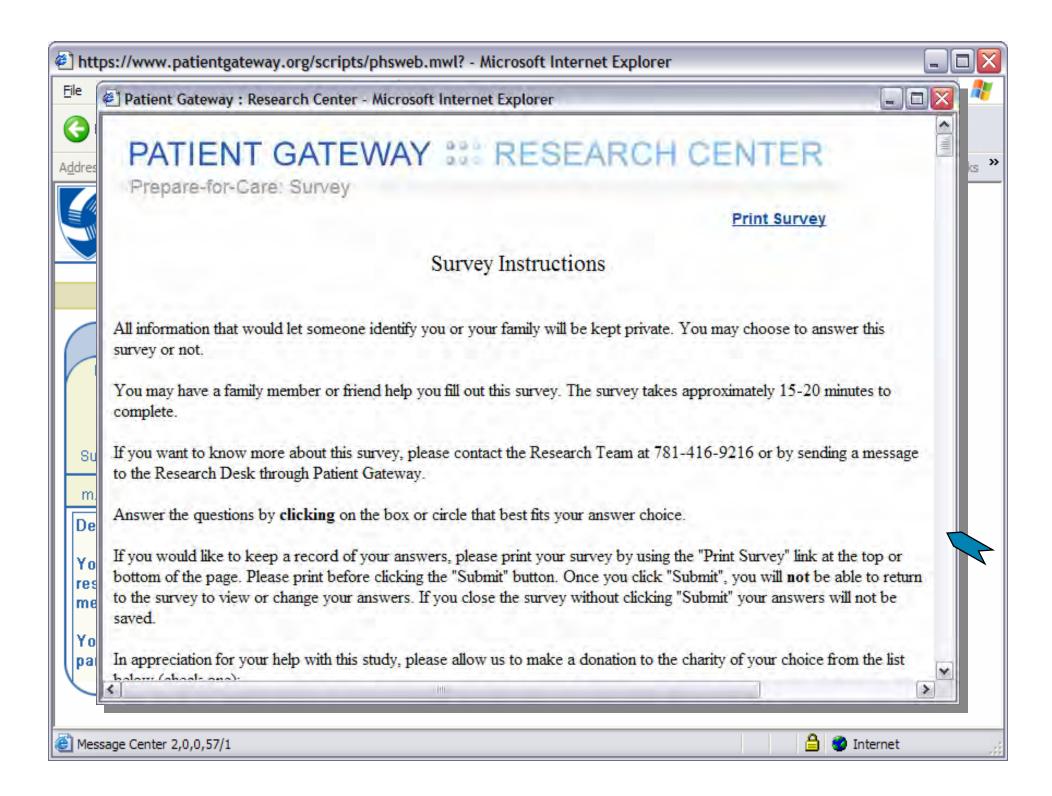


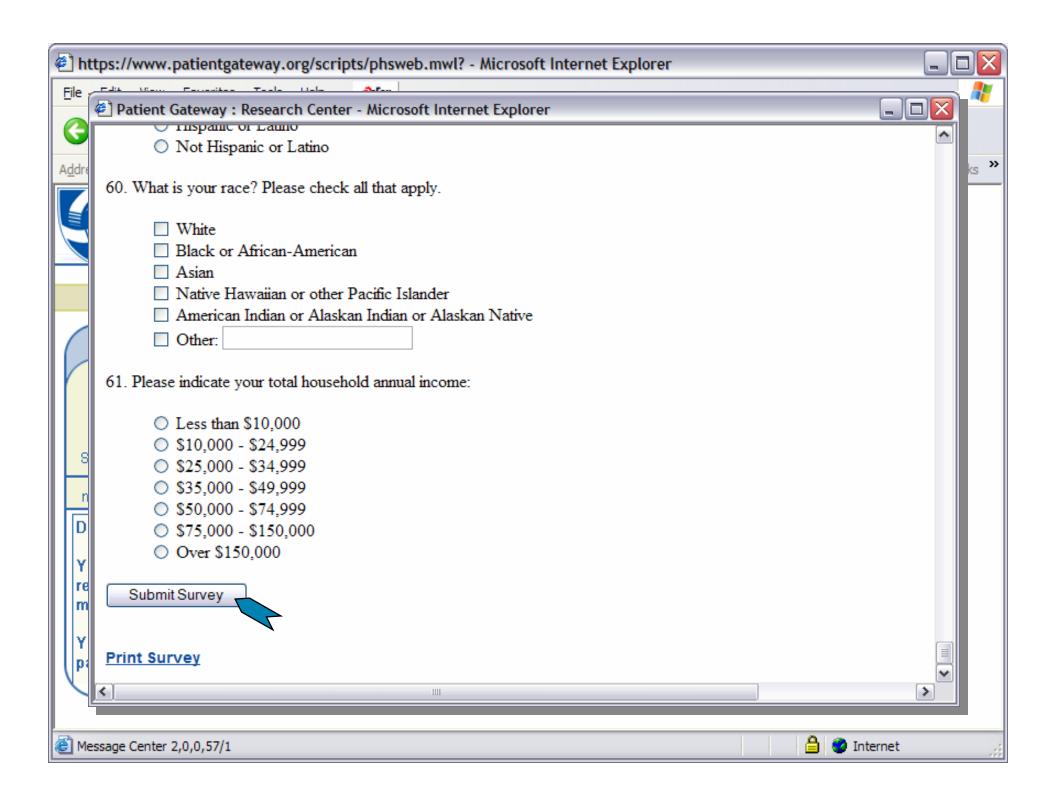


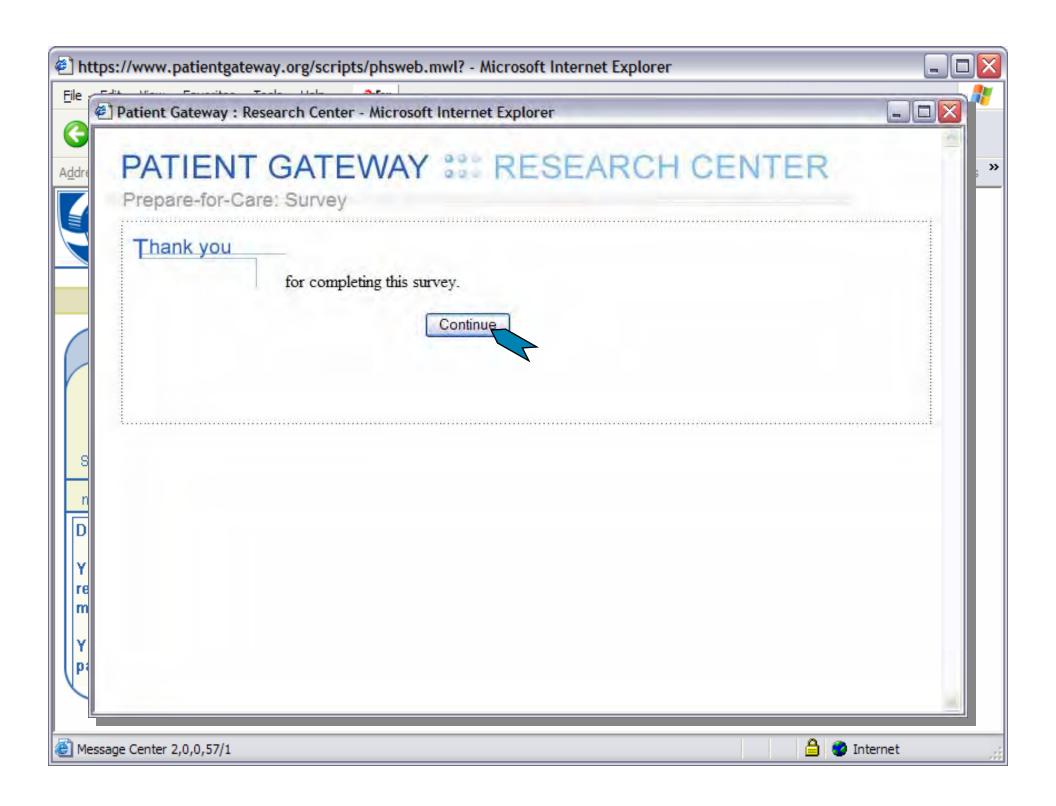






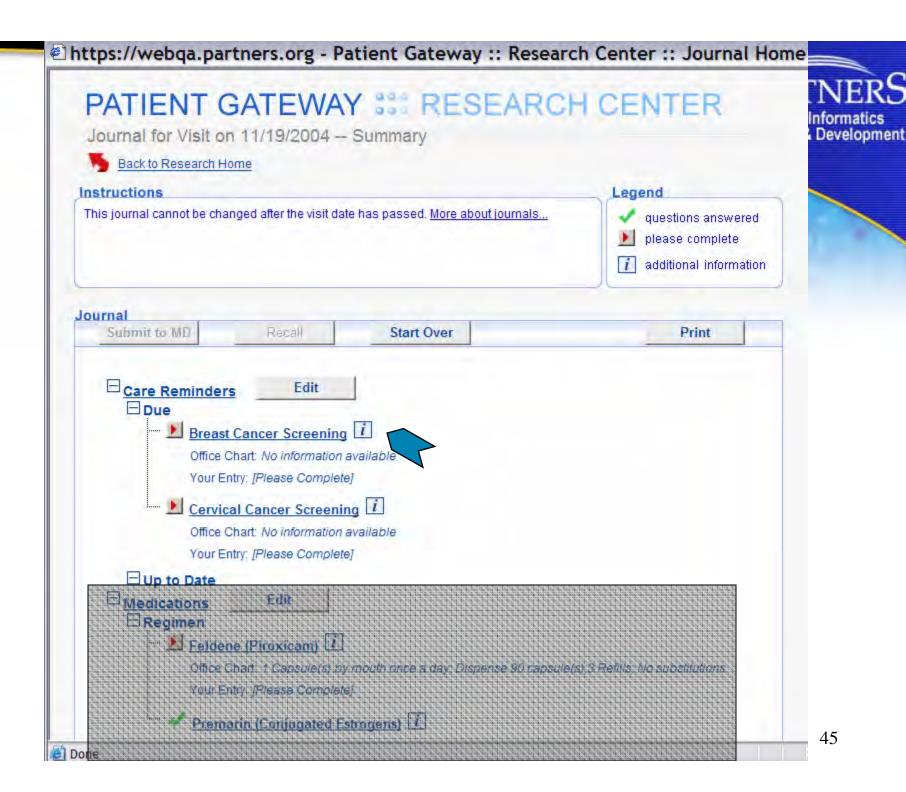


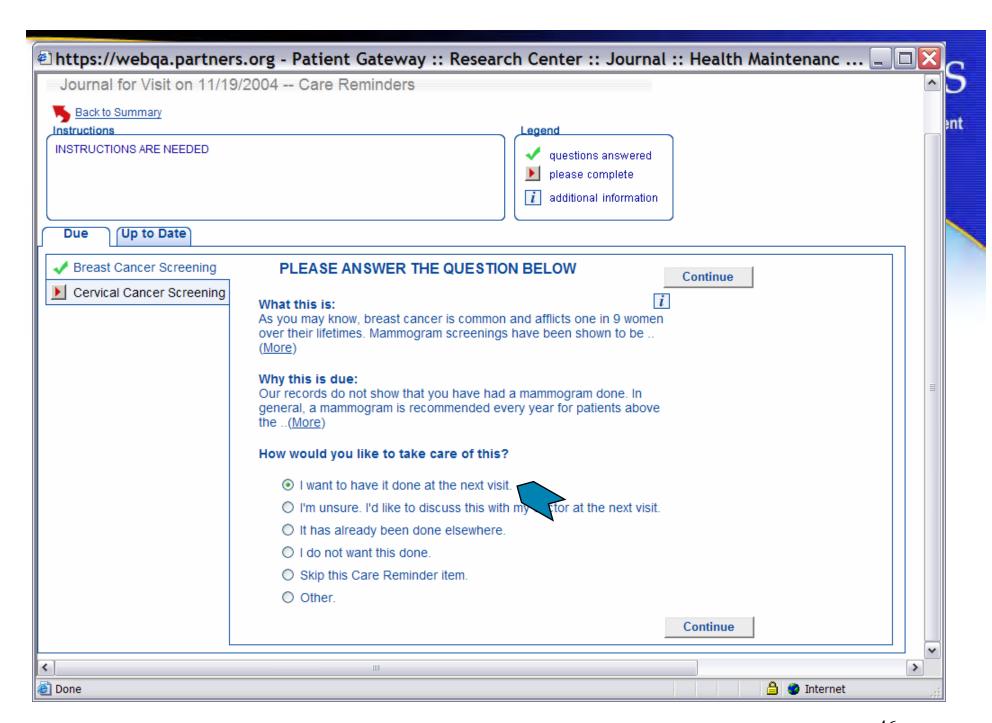


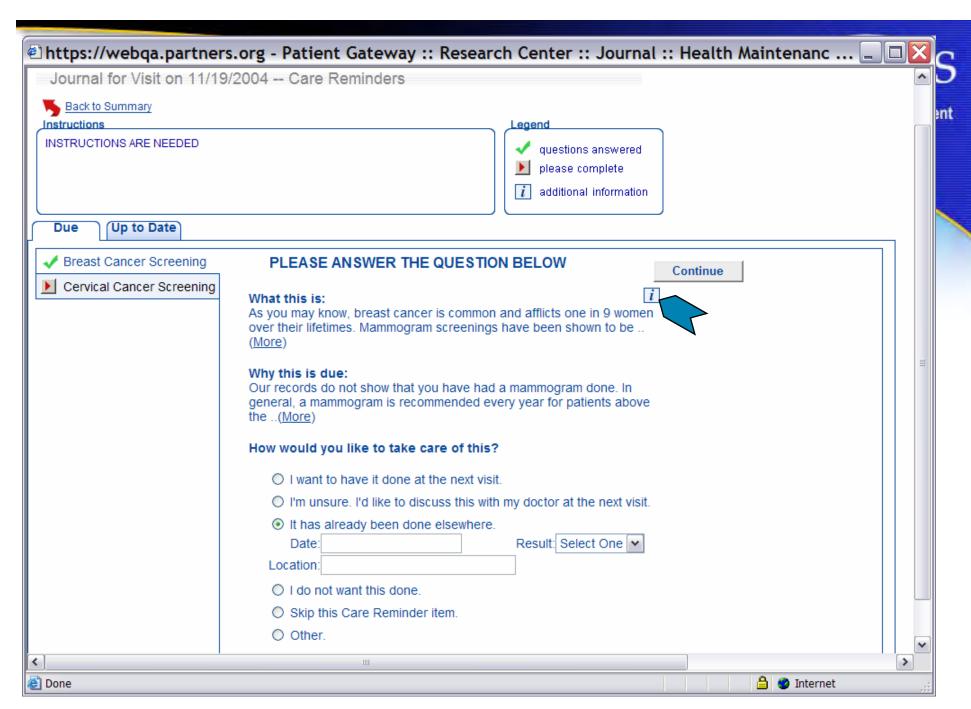


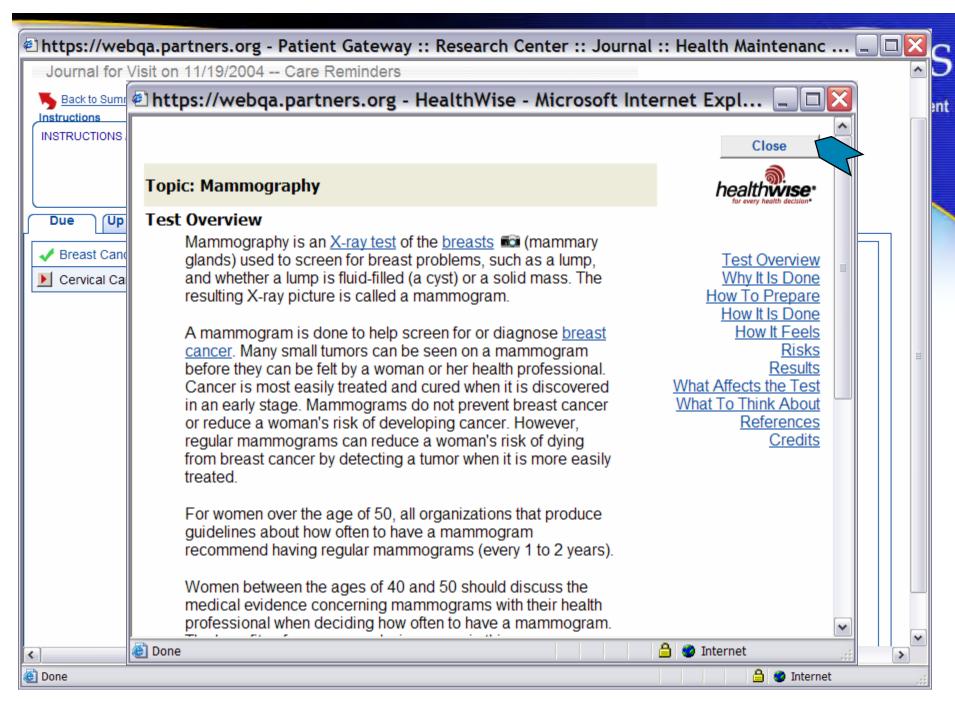




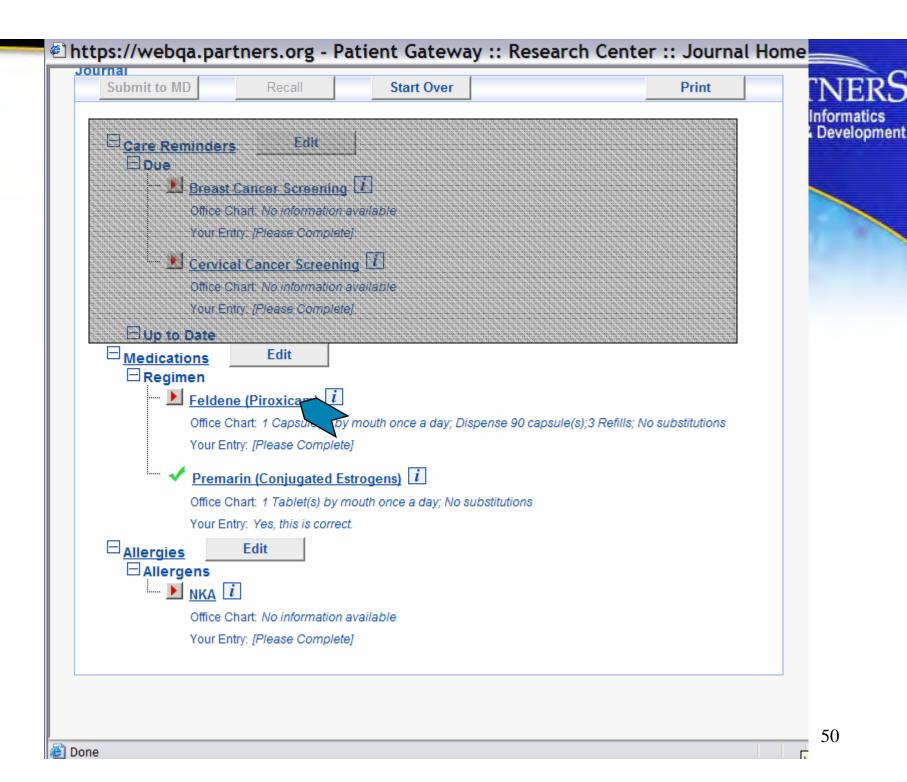


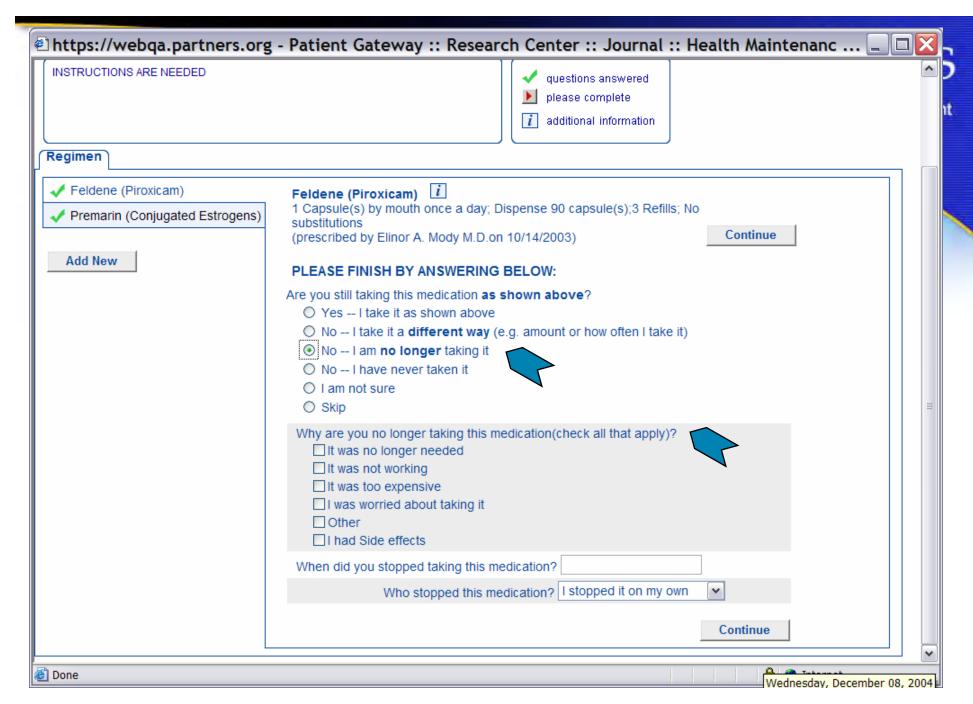


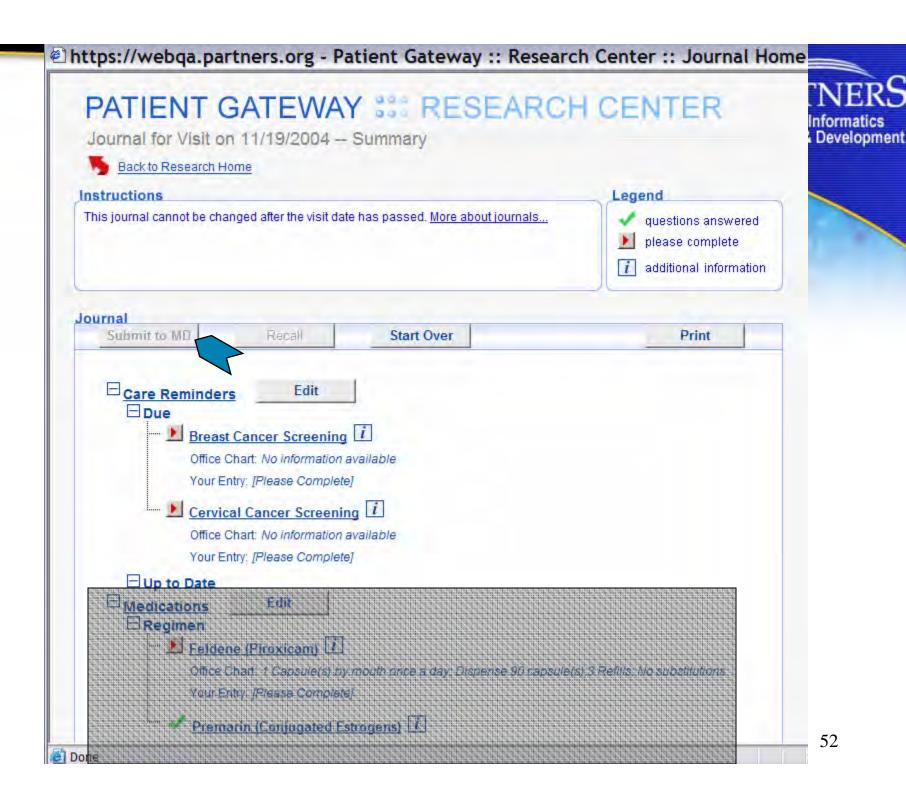














PACCT:

Practice Requirements

- All PG patients in the practice are invited to participate
- All physicians or staff who receive a *Journal* from a patient are willing to look at it
- Practice staff and physicians can answer or triage <u>basic patient questions</u> about Journals
- Practice staff and physicians continue to market Patient Gateway to their patients



PACCT:

Next Steps

- Individual meetings with each practice
 - December 2004, January 2005
 - PACCT Team to meet with the practice Medical Director & Team
- Training will be scheduled with practices
 - March 2005
- Further Questions about PACCT?
 - Jon Wald MDjwald@partners.org781-416-8540
- Next Advisory Council Meeting
 - 7:00 8:30 am, February 9, 2005





PACCT Results of Pilot

Jon Wald, MD, MPH
Co-Principal Investigator
Product Manager

Lisa Nelson Corp Team Lead



Phase 1 Pilot – Software Goals

- Beta Test for Patients and Practices
- "Beta" process for joint development group (LMR and PG) coordination of work
 - Will help us plan subsequent releases
 - Validate operational environment
 e.g. Validate the scheduling, reporting data
- Usability feedback



Phase 1 Pilot – Research Goals

- Pilot the data gathering process
- Pilot the research support process
- Finalize workflow and patient recruitment processes
 - How invitations for the pilot were determined:
 - Identified appointments during 6-week period in late August/September
 - AND patients with at least one overdue HM item
 - We invited those patients (49) to the pilot via letter and PG



Pilot Findings

• 49 invites mailed, and sent via PG

—8 responded with a consent	16%
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- —16 responded with a refusal 33%
- —25 had "no response" 51%
- Telephone f/u with non-responders
 - —4/5 patients reached, were interested in study
 - Access issues: "don't have password"; "not computer savvy"
 - Timing: "just returned from vacation"; "I was busy"



PACCT Pilot Activity

	8	who	consented
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—All 8 have taken survey

—7 have edited the journal

—5 have submitted the journal

Among all PG users

—60% have activated their password

—41% have sent at least one request

15%

15%

14%

10%



PG User Activity Groups

Roughly

- Actively engaged
 - —Sent a request
- Passively engaged
 - —No requests, but did activate their password
- Not engaged

—Requested an account, only

1/3

1/3

1/3