

Hospitals Look to Patients for Portal Priorities

By: Ben Dillon, Vice President & eHealth Evangelist, Geonetric



Patient portals represent the next frontier for eHealth and play an important role in many of the current healthcare changes — from helping organizations achieve “meaningful use” under the American Recovery and Reinvestment Act (ARRA) to providing a foundation for future healthcare delivery models. Yet patient portal adoption by the healthcare industry has been limited.

Geonetric sought to find out how quickly we can expect the industry to embrace patient portals in our August 2009 eHealth Insight survey. This brief survey, sent to healthcare organizations around the country, focused on finding out:

- Who is implementing patient portals?
- What are they doing with them?
- What do they hope to accomplish?
- Why are they adopting this technology?
- What is holding back broad adoption?

More than 75% of survey participants represent hospitals or health systems, and the majority of the remainder represents clinic groups. A small number of participants work for pharmaceutical manufacturers, biotech firms and clinical laboratories, which indicates the breadth of interest in this topic.

More than 60% of our respondents understand the value of having a patient portal. Of the respondents:

- 26% have a patient portal,
- 11% are in the process of deploying a patient portal, and
- 32% hope to begin deployment of a portal within the next year.

We asked these organizations a few questions about their plans, specifically who owns the portal, how much do they invest in the technology and what are their goals and priorities.

Portal Ownership

According to respondents, the majority of patient portal initiatives are owned by the information systems department. (Figure 1) This indicates most organizations are focusing initially on the technical aspects of their portal projects, such as systems integration, rather than patient communications or user experience.

Portal Investment

The budget and staff invested into patient portal initiatives vary greatly between organizations.

For example, organizations spend an average of \$403 per bed on their portal initiatives, but the amounts range from \$100 per bed to \$1,500 per bed. (Figure 2)

Similarly, organizations employ an average of one employee devoted to their portal initiatives for every 408 beds; however, the individual responses range from one employee for every 120 beds to one employee for every 1,100 beds. (Figure 3)

What department has ownership of your Patient Portal initiative?

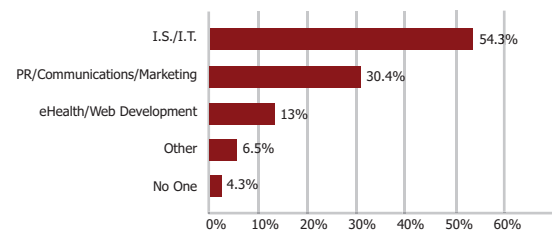


Figure 1

What is the budget for your Patient Portal initiatives?

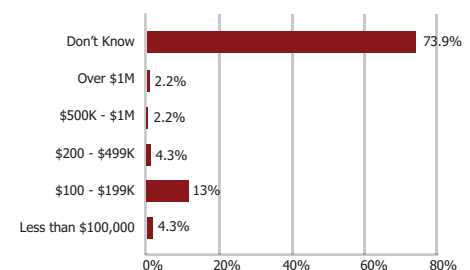


Figure 2

Portal Goals

Respondents indicate a variety of goals for their patient portals. The most popular goals: to improve the overall experience, improve quality of care, empower patients to make better decisions, and personalize care delivery. The mid-tier goals consist of differentiating the organization from competitors and offering more self-service capabilities.

Among the least popular goals (which are not shown in the related graphic): to grow service line volume, improve the payer mix of patients, and raise switching costs for patients (i.e., build loyalty by making it painful for patients to switch to another provider). (Figure 4)

The focus on aspirational goals is likely one of the factors inhibiting adoption. Organizations are experiencing pressures from the current economic environment and have many competing priorities for investments. Therefore, organizations are putting their resources into initiatives that solve immediate problems and deliver clear, measurable value, rather than focusing on initiatives such as a patient portal that they justify largely by good intentions.

Portal Priorities

Organizations are taking a more pragmatic focus when selecting functionality for their patient portals.

The most prevalent functional priority is the information organizations offer in the portal, for example, medical information, physician finders and patient education. Also key is the ability to engage health consumers and promote loyalty with capabilities like pre-registration, bill payment, event registration, and appointment requests with reminders.

Among the mid-tier of functional priorities are more personal and integrated capabilities, such as a portal login, the integration with HIT systems, and the presentation of bills and lab results. Also included in the middle are clinical capabilities, such as Health Risk Assessments (HRAs), health reminders, prescription renewals, wellness tools and secure messaging.

The least popular functional priority relates to the personal tracking of information and items likely to impact quality of care and patient outcomes. These include disease tracking, family health tracking, immunization tracking, and e-visits. This is likely due to the difficulty in implementing this technology and related reimbursement issues. However, respondents indicated an important goal of the portal is to improve care, so the gap between goals and priorities is significant. (Figure 5)

How many FTEs are devoted to your Patient Portal?

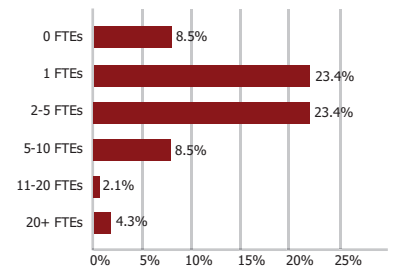


Figure 3

Top 10 Goals for Patient Portals Ordered by "Very Important", Descending

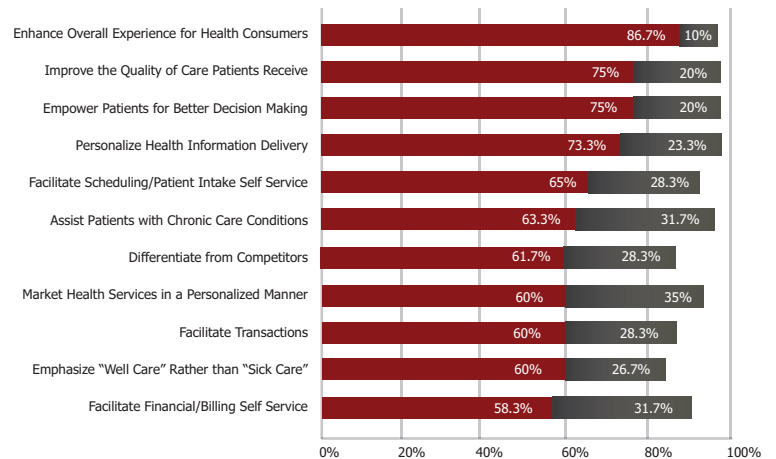


Figure 4

Top 10 Patient Portal Functional Priorities - Projected

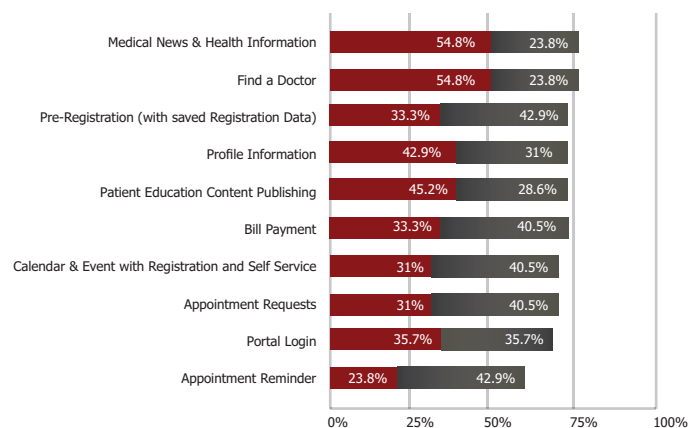


Figure 5