Patient Engagement: Beyond the Buzz

HIMSS Analytics Study Sheds Light on the Challenges Ahead

Patient engagement is grabbing plenty of healthcare headlines. To get beyond the buzz, HIMSS Analytics conducted a study on the state of patient engagement commitment and investment at healthcare organizations across the United States. The research, which consisted of an online quantitative survey of executives from 114 healthcare organizations and a qualitative focus group that involved nine of these leaders, closely examines the state of patient engagement in the industry.

Overall, the study, sponsored by InterSystems, found that healthcare organizations are embracing patient engagement through strategies and investments centered on patient portals. However, an in-depth analysis of the results reveals that when leaders pause to consider patient engagement, they question whether or not they are currently on a trajectory that will lead to the increased patient involvement required to improve clinical outcomes and reduce costs.

Patient engagement: Definition

Although the concept is evolving, HIMSS Analytics offered the following patient engagement definition: “An organization’s strategy to get patients involved in actively and knowledgeably managing their own health and wellness and that of family members and others for whom they have responsibility. This includes reviewing and managing care records, learning about conditions, adopting healthy behaviors, making informed healthcare purchases, and interacting with care providers as a partner.”

In contrast to some earlier definitions, this explanation indicates that patient engagement is much more than simple compliance, which typically involves following orders (i.e., taking a drug as prescribed). When patients are truly engaged, they are actively involved in identifying and managing their own needs. In essence, they are entering into a partnership with the provider.
Focus group participants, however, still found that the description was lacking one element.

“What I didn’t hear in that definition was anything about responsibility,” said a CMIO from a West Coast hospital. “One of the things lacking in patient engagement is the transferring of responsibility from a financial perspective. You need to make it attractive for people to get engaged, but if they don’t have skin in the game, it is not as valuable.”

**Patient engagement: Strategy**

Despite the fact that the commitment to patient engagement is still unfolding, organizations are moving forward. According to the quantitative survey, which included responses from executives at multi-hospital integrated delivery systems (44 percent), academic medical centers (21 percent), hospitals (21 percent), ambulatory clinics (13 percent) and critical access hospitals (1 percent), nearly nine of 10 organizations currently have a patient engagement strategy in place.

These strategies are driven by the mission to enhance and improve the health of the community (77 percent), the quest to build a loyal brand for patients (77 percent) and to meet meaningful use requirements (60 percent). However, these strategies might not be fully baked, according to the focus group’s discussion. Indeed, some participants questioned their patient engagement plans.

“As we talk, I’m realizing we don’t really have a true patient engagement strategy, just a portal project,” said one executive. Another chimed in with the following: “We say we have a patient engagement strategy, but it is really just part of other strategies – wellness, health improvement, population health.”

Such comments are a cause for concern. Kathleen Aller, Senior Healthcare Information Professional at InterSystems, pointed out that while leaders are expressing that they have a strategy, in reality, they may just be moving forward with a tactical plan.

“Even if organizations have a vision for real patient engagement, many are 100 percent consumed with checking the boxes for meaningful use,” Aller said. “Unfortunately, in some cases, they are focusing on things that aren’t actually moving patient engagement forward. They may only have capacity to get people to log into a portal, which doesn’t necessarily mean that true engagement is occurring. The short-term focus on meaningful use has often forced providers to take a sub-optimal path to the long-term goal.”

**Patient engagement: Leadership**

With patient engagement strategies still evolving, it’s readily apparent that someone needs to take the helm. The study, however, reveals that patient engagement initiatives are lacking definitive leadership. Consider the following: According to the survey results, multi-departmental/multi-role committees are the most common owners of an organization’s patient engagement strategy (26 percent). Other owners of the strategy include the chief marketing officers (15 percent), chief information officers (10 percent) and CEOs (8 percent).

However, when focus group members examined who is in charge of the purse strings, it became apparent that these strategy “owners” might not have the financial wherewithal to effectively move initiatives forward.
The roadblock: Spending on patient engagement is spread across organizations—with information technology typically buying the tools, ambulatory departments paying for the costs associated with the program administration, and marketing shelling out the money for promotions.

“I guess I am coming to the conclusion that maybe we don’t actually have an organizational strategy around patient engagement if we have not set up a budget that owns all aspects of it,” said one of the executives.

**Patient engagement: Technology**

While organizations might lack a cohesive financial strategy, information technology departments are turning to patient portals as the go-to tool.

Indeed, 71 percent of respondents who have an engagement strategy are using portal technology to meet the current minimum meaningful use requirements for functionality and data sharing from a single source; 54 percent are using portals that offer a combination of patient services, technology and content; and 51 percent are using portals as a configurable interoperable information exchange platform with data sharing from multiple sources. Overall, about two-thirds of these respondents are using portals provided by their EHR vendors.

When asked to assess how committed their organization is to “going beyond the basic meaningful use criteria,” respondents averaged a 4.35 ranking on a 1 (least committed) to 5 (most committed) scale. However, when the rubber meets the road, they might find it difficult to do so. When queried about confidence in their vendor’s ability to provide the functionality needed to meet more advanced patient engagement goals, they ranked their confidence at 3.33 level on the 1 to 5 scale.

Not surprisingly, focus group participants expressed concerns about their portal solutions. “One of the problems is that if you actually look at the portals, they don’t really align well with the definition of patient engagement,” one leader said. “They are great for convenience but they don’t actually help people manage chronic diseases, improve their health or give them resources needed to move toward healthier behaviors. Most of the tools out there just don’t deliver on that promise.”

Backing up the focus group observation, the survey results also showed that organizations are currently using portals to offer convenience functions such as access to patient records (92 percent), lab and test result distribution (90 percent), secure e-mail/text with providers and medication refill requests (63 percent).

In fact, while these portals might provide convenience as well as the functionality needed to comply with meaningful use, many of them are unlikely to actually result in significant engagement, according to P. Nelson Le, MD, clinical advisor at InterSystems.
“Patients might log into the portals once, but real adoption is pretty poor because the portals are not providing the right services to patients,” Le said. “Most of the portals are ‘read only’ and don’t provide the opportunity for patients to truly interact with their healthcare providers. They offer little or no opportunity for them to add relevant follow-up information on their current condition, reactions to drugs or treatment, or other indicators of their health status.”

Another potential snag: Each organization that touches a patient is likely to have a separate portal, with each requiring different registrations, log-ins and passwords, and showing a wide range of data displayed differently. A patient with complex conditions might have records with inpatient and out-patient providers, specialists, laboratories and others. The multiplicity of portals makes it difficult for patients to actually access a unified view of their medical information.

**Patient engagement: Possibilities**

To fully engage patients, leaders are looking for next-generation portals to offer the functionality that will enable patients to become partners in their own care. More specifically, they are seeking functionality such as e-visits or e-consultations (80 percent), interoperability across multiple providers (70 percent), health evaluation and coaching (70 percent) and tele-visits (50 percent).

Game-changing patient engagement will give patients timely, comprehensive information enabling them to partner with their care providers – and to truly manage their health.

With such engagement, organizations could gather the information needed to help fuel population health efforts as well, making it possible to improve clinical outcomes for a group of patients and to succeed under value-based care models. While most healthcare organizations are not yet at this level of patient engagement, some healthcare organizations are testing the waters by implementing aggressive wellness and engagement programs with their employees, according to focus group participants. These patients are motivated to become involved because the healthcare organization offers an incentive in the form of reduced insurance premiums.

To support such strategic patient engagement and population health efforts, though, what’s needed is a data platform that can create composite health records that aggregate patient data from across the continuum of care and can securely share information among clinicians, patients, and other healthcare professionals.

In the final analysis, with such complete and comprehensive information, patients can easily log into their patient portal not only for convenience, but to truly manage their health in partnership with their providers; organizations can share information both internally and externally to better manage the delivery of care across the continuum; and healthcare entities can leverage composite data to improve the overall health of a defined population.

---

**About InterSystems:**

InterSystems is a global leader in software for connected care, with headquarters in Cambridge, Massachusetts, and offices in 25 countries. InterSystems HealthShare® is a health informatics platform that enables strategic interoperability and analytics for action across a hospital network, community, region or nation. InterSystems’ products are used by thousands of hospitals and laboratories worldwide, including all of the top hospitals on the Honor Roll of America’s Best Hospitals as rated by U.S. News and World Report. For more information, visit InterSystems.com.