Some come, fewer see…and ever fewer come back. Such is the state of patient portals and electronic health records as we start 2013.

Many studies and advocates have extolled the potential benefits of patient engagement in health care and disease management through the use of patient portals. As a clinician who sees the benefits of portal use and enhanced levels of patient engagement, I often find myself asking my patients to sign up for the portal. I tell them that they can see their lab results online, make appointments, request refills, and e-mail me directly, bypassing the wait time that they often experience on the phone. All of this is available 24 hours a day. No brainer, right?

Not really. Even in practices that offer patient portal access, uptake is slow and fragmented at best. That’s not to say we should not offer this! But patient portals have not proven themselves to be a magic bullet for patient engagement, with only 7% of patients using them.1 People only go to websites if they have a need or the site provides them with something they cannot get elsewhere.

Though patients may not access portals to be involved in their own health care, we know they are accessing websites for health information. And patients are doing this all over the places and on the go—the Pew Center recently released data showing that a third of cell/smartphone owners used their phone to look up health information.2 The report pointed out that “in 2010, when the same percentage of US adults owned cell phones, 17% of cell phone owners reported using their phones to access health information. Today, that number stands at 31%, almost double the previous figure.”

There is concern that the use of portals could potentiate already existing health disparities or worse—create new ones. Drs. Mita Goel and Urmimala Sarkar have covered this well in a prior issue of Forum.3 Several studies have shown that many portal enrollees are white, insured English speakers with health insurance. But here is the interesting thing: The patients who are enrolling and using online health portals are not the same group of patients who use cell phones to access information. The Pew data show that 27% of white non-Hispanics, 35% of Black non-Hispanics, and 38% of Hispanics use their cell phones to look up health information. Before reading on, ask yourself:

- When was the last time you discussed results or information or connected your patient to a website during an office visit?
- When did you or your office staff turn the screen around on a laptop, or share it on a desktop, to engage the patient electronically?
- Have you ever had a discussion with a patient using his/her cell phone?

Data indicate that one in three people in the United States is using a screen (without a physician) outside the office. Additionally, the phones they use to access information are probably in their pockets and handbags as you talk to them at their appointment. Maybe we should be using phones as a bridge and tool for engagement.

I don’t think anyone fully understands why there is a difference among demographic groups regarding portal versus cell phone use. The situation is clearly multidimensional, but there are some early lessons that our patients are teaching us:

1. Lots of health care institutions have portals and other forms of electronic access available. Simply providing it does not mean patients will use it.
2. A third of our patients are using phones to access health information.
3. Patients are using phones—not portals—for health information for a reason(s). Identifying these reasons is key to patient engagement.

Where I work, the portal is only available in English, despite the fact that a very large majority of my patients speak Spanish. And when patients view results or medicines, there is no link beside the result that explains the result or what the medicine is used for. These are key opportunities to further engage patients at the level of electronic health record development.

Everything has to start somewhere, and there is much work to be done to fully engage patients. Until we link patient portals and...
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Electronic chart access with patient-level education, we will not see full patient engagement. The Internet and cell phone engagement are helpful ways to access health information technology while portal use becomes truly meaningful. The possibilities are exciting. But most people who use portals in 2013 are saying, “I came, I saw, and I’ll be back when this is more useful.”

References