

Engaging Patients Through Access to Their Medical Records

AHA/AHIMA Webinar
November 15, 2016



**American Hospital
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American Health Information
Management Association®

PROVIDERS' OBLIGATION TO PROVIDE PATIENTS WITH ACCESS TO THEIR MEDICAL RECORDS

Two legal bases underlying the obligation:

HIPAA Regulations – 45 CFR part 164

http://www.access.gpo.gov/nara/cfr/waisidx_07/45cfr164_07.html

Meaningful Use EHR Incentive Program Regulations – 42 CFR part 495

<https://www.gpo.gov/fdsys/pkg/FR-2016-11-14/pdf/2016-26515.pdf>



HIPAA § 164.524 Patient's General Right of Access

“To inspect and obtain a copy of protected health information (PHI) about the individual in a designated record set, for as long as the protected health information is maintained in the designated record set”

Covered entities:

- May require that requests for access be made in writing, provided that patients are informed of the requirement.
- Must act on a request for access no later than 30 days after received; may have only one 30-day extension of time to act on access request (if provide written statement of the reasons for the delay and the date by which will complete action on the request).
 - Important to remember: OCR views 30 days as an outer limit
 - OCR interprets the requirement to mean as soon as possible
 - OCR may find that waiting 30 days to provide access is a violation of the HIPAA requirement**



HIPAA § 164.524 Patient's General Right of Access (cont.)

Covered entities:

- Must provide access in the form or format requested by the individual, if it is readily producible.
 - If not, in a readable hard copy form or such other form or format as agreed to by the covered entity and the individual



EHR Meaningful Use § 495.22(f)(8)(ii) Patient electronic access (view, download and transmit)

Eligible Hospitals and Critical Access Hospitals (CAHs) must attest under the EHR Incentive Program to meeting specific measures related to providing patients with timely access to view online, download, and transmit to a third party the patient's health information

Timely = within 36 hours of hospital discharge



EHR Meaningful Use § 495.22(f)(8)(ii) Patient electronic access (view, download and transmit)

(cont.)

Modified Stage 2 Requirements

- Mandatory for CY 2017
- *Measure 1*: More than 50 percent of all patients who are discharged from the inpatient or emergency department (ED) of an Eligible Hospital or CAH are provided timely access to view online, download, and transmit to a third party their health information.
- *Measure 2*: At least 1 patient (or patient authorized representative) who is discharged from the inpatient or ED of an eligible hospital or CAH during the EHR reporting period views, downloads or transmits to a third party his/her health information during the reporting period.



EHR Meaningful Use § 495.22(f)(8)(ii) Patient electronic access (view, download and transmit)

(cont.)

Stage 3 Requirements

- Optional for CY 2017 but Mandatory for CY 2018
- For **more than 50 percent** of all unique patients discharged from the eligible hospital or CAH inpatient or ED: (1) the patient (or the patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; **and** (2) the provider ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the APIs in the provider's certified EHR.



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Patient Access to Health Information

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1.72 M
outpatient visits
annually

59,000+
admissions
annually

130,000+
ED visits
annually

180,000+
Patient portal
users

1,500+
attending
physicians

800+
residents and
fellows

4,300+
registered nurses

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Release of Information Process

- Overview of hospital release operations
 - Volume, Turnaround, Types of requests
- Vendor relationships
 - Training and support
- Available anytime & anywhere
- Release of Information patient survey
 - Customer satisfaction and education

Patient Access to Health Information

- Evolution of Patient Portal
 - Homegrown to integrated EMR module
 - Reactive to proactive
- Addressing inpatient access
 - Full tablet implementation & AHRQ research study
- Future plans and considerations
 - Improve experience & self service
 - Regulatory requirements



Saint Luke's
HEALTH SYSTEM



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Patient Access to Health Information

- Integrated healthcare delivery system – KC Metro
- Two states – western MO and eastern KS
- 10 hospitals – soon to be 11 (inpatient rehab)
 - Acute care
 - Behavioral Health
 - Heart Institute
 - Cancer Institute
 - Brain and Stroke Institute
 - Transplant program
- Over 130 clinics and growing – all specialties
 - New Convenient Care Clinics in Grocery Chains
- Homecare/Hospice plus inpatient Hospice House
- 10,500+ employees

Current Program Situation

- **Pt Portal**

- ❖ Currently have 5 versions – eventually all mySaintLuke's (MSL)
- ❖ Progression: Hospital (limited) 3/2014, then ambulatory 8/2015, revenue 2/16
- ❖ MSL – Full portal: partial record, billing, messaging provider/RN, appointments, Rx refills, copies of MSL or other records, proxy program

- **EMRs** (100% Epic by 2018)

- ❖ Epic, CPSI, Allscripts, Centricity, NextGen, ??

Challenges

- **Amendments**
 - Increased significantly with patient portal go live
 - Patient Education - Amend vs. Update
 - Misunderstanding Dx
- **ROI**
 - Requests for DRS
 - Attorney requests and fee challenges
- **Portal**
 - Increase use of MSL and increase available PHI
 - Enhance promotion through staff
 - On-line portal account activation – seen first
 - PHI in wrong account
 - Parents upset - cut-off for minor teens
- **ID Fraud/Theft**
- **Threat of Hacking (ease of access vs. security - balance)**

Future Ventures



- eAuthorization and electronic ROI Requests (through portal)
- Epic CareEverywhere – International Queries
- Kiosks at Registration (clinics)
 - Allow patients to self check in
 - Station for patient to view record
 - Hospitals – Smart TV – can view parts of current record and MSL
- Adding to Portal ??
 - Mother/Baby - delivery documents
 - Notes
 - Dx Management – pre-ordering labs, alerts for out of compliance

QUESTIONS?



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