ENGAGING PATIENTS THROUGH THE PERSONAL HEALTH RECORD AND DIRECT MESSAGING

Kathy Ray
Navajo Area CAC
Objectives

1) Describe the personal health record, including roles and responsibilities for clinic staff and patients

2) Discuss the benefits of online personal health records, including patient engagement in their own health care

3) Encourage use of the personal health record to engage patients in their own health
The Personal Health Record (PHR) is a website where you can view your health information. Your PHR is at:

https://phr.ihs.gov

You need to have access to the Internet or a data connection to use the PHR. You also need to sign up for your PHR.

What can you do with PHR?
- View your lab results
- Learn about your medications.
- Keep track of your health issues.
- View a list of your medications.
- Save a copy of your health information.
- Send an e-mail message to your health care team.
- Make sure the information in your medical record is correct.
- View a record of your immunizations.
- Share your health information with a caregiver or family member.

Is your health information safe?
Yes, your health information is secure. Be cautious when viewing or downloading your health information to a public computer. Always log out when you are finished looking at your PHR.

https://phr.ihs.gov
How to sign up for your PHR

Step 1: Create a PHR account
2. Click the button labeled "Register to use PHR."
3. Choose a username and password that you can remember.
4. You will be asked to enter some information about yourself. When you are finished, you will get a message asking you to go to your hospital or clinic to finish the registration process.

Step 2: Meet your PHR Registrar
You will need to meet with the hospital or clinic’s PHR Registrar. This person will activate your account. Please bring a photo ID if you have one.

Step 3: Login to the PHR
After you talk with the PHR registrar, your PHR account will be ready.
2. Enter your username and password.
3. Select the health record you would like to view.
4. You can now view your health information.

For more information, visit the Indian Health Service at http://www.ihs.gov
Administrator Roles and Responsibilities

- Three level of Administrators – National, Area Office, and Service Unit/Facility
- Each Level Manages/Works with the Level Below
- Manage Onboarding (Agreements)
- Certificates
- Set up and Manage Facility Domain Names
- Ensure Mapping and Publishing of the Certificates
- Provide Support
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Roles

Service Unit/Facility Administrator
- i.e. Facility Manager
- Manage and grant RPMS DIRECT Messaging user access and complete identity vetting at LoA 3 for Healthcare Providers and other Professionals, including Message Agents and PHR Registrars.

• PHR Registrar
- i.e. Patient Registrar or Front Desk
- Perform Patient’s PHR and RPMS DIRECT Messaging registration by following PHR registration procedure (i.e. Identity Vetting, IHS-810 Form)

• Message Agent
- i.e. Front Desk or Patient Check-in
- Initial responder and distributor of the secure messages for assigned patient and/or patient group.
Service Unit/Facility Administrator

• Coordinate Onboarding with Area
• Create and Designate Facility and Message Agents’ Accounts
• Ensure Mapping of DIRECT Facility and Message Agents’ Addresses
• Manage Access and Training for Direct Users and Administrators
  • Includes PHR Registrar and Message Agent
• Provide Tier 1 and Tier 2 Support
• Relates to Own Service Unit Only
• Create, read, update, or delete Users
• Perform Auditing
PHR Registrar

- Responsible for Managing Patients’ and Personal Representatives’ Access to Their PHR Account
- Responsible for Completing Registration Process
- Responsible for Providing Tier 1 and Tier 2 Support
  - Identity Proofing
  - Linking and Unlinking Patient’s Records
- Responsible for Notifying Administrator to Remove or Terminate Account When Requested
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Anyone with a RPMS DIRECT Messaging account will be associated with an organization certificate.

- Certificates are attached to your organization Domain name, to prove the identity of the organization you belong to and prove that your address is a valid, trusted address under that organization.

- Certificate help to make the email messages secure.
Hello Kathy Ray,

Indian Health Service has requested a certificate for use with Directed Exchange messaging they manage for your organization. Before DigiCert can issue this certificate, DirectTrust requires that your identity be verified.

Please visit the link below to ensure that your personal information is correct and to give Indian Health Service permission to manage this certificate on your behalf.

https://www.digicert.com/direct/contact-update.php?token=tsz50793x823wpd70s

If you have any questions please contact DigiCert Support or your account manager at Indian Health Service.

To learn more about DigiCert's role in Directed Exchange please visit this link.

www.digicert.com/direct-project/what-is-the-direct-project.htm

To learn more about DirectTrust please visit this link.

www.directtrust.org/directtrust-101/

Thank you,

DigiCert Support
Online: www.digicert.com
Support: support@digicert.com
Phone: 1-801-877-2100
Toll Free: 1-800-896-7973 (US & Canada)
Fax: 1-866-842-0223 (Toll Free - US & Canada)
RPMS DIRECT Messaging Readiness Assessment Form

The following information will need to be completed by the site requesting access to the IHS RPMS DIRECT Messaging. Once the form is complete, please return completed form to Glenn.Janzen@ihs.gov, Meghna.Patel@ihs.gov, and Coleman.Rozsyai@ihs.gov

Service Unit/Facility Name: 

Service Unit/Facility Legal Name (if different from above): 

Service Unit/Facility Governance: IHS □ Tribal □ Urban □

Area: Select One 

If you have selected "Other" provide reason: 

RPMS DIRECT Facility Domain name: 

. Directihs.net

***Your domain name format should be facilitylegalname.directihs.net***

Please identify your RPMS DIRECT Messaging team:

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Email</th>
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</thead>
<tbody>
<tr>
<td>Area Administrator</td>
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<td>Area Administrator</td>
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<td>Service Unit/Facility Administrator</td>
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If additional space is required for RPMS DIRECT team, please submit them on a separate document with the required information.

If this request is for a Tribal and Urban site, please verify that the following agreements have been completed for your facility:
DIRECT

- Secure Web-Based Messaging System
- Purpose – For the Exchange of Patients’ Health Information Between Healthcare Providers and their patients and/or their personal representatives
- Users – Healthcare Providers, Healthcare Organizations, Message Agents, other Healthcare Professionals, Patients, and Patients Personal Representatives
- Administrators – for System Maintenance and Management
DIRECT

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RPMS DIRECT Messaging

• **Domain:** Domain name is dedicated to organization
  - Domain name must be organization’s legal name or the D1 Domain name.
  - Domain name will be assigned an organizational-bound certificate.
  - Example: claremoreindianhospital.directihs.net

• **DIRECT Address:** RPMS DIRECT Messaging Address or Username will be assigned to individual providers, message agents, and/or other staff.
  - RPMS DIRECT Messaging addresses under organization will be linked to the organization’s Domain name and certificate.
  - User name format: *firstname.lastname*
  - Example: meghna.patel@claremoreindianhospital.directihs.net
Message Agent

• Facilitator of the Secure Messages
  • Receive
  • Distribute
  • Respond to Secure Messages on behalf of Healthcare Providers Based on Local Policies and Standards of Patient Care

• Message Agents will be Assigned to the Patient or Patient Groups using Designated Primary Provider (DPP) Package
  • This Individual will Receive Messages Directly From the Patient, and will be Responsible for Distributing and Responding to them
Message Agents

The person(s) assigned to receive secure messages.

- Similar to the person assigned to answer the phone in the clinic, they get the call and take action as appropriate

- Sample use cases, patient sends a secure message:
  
  - **Cancels appointment** - Message Agent alerts schedule clerk to make appropriate change

  - **Requests medication renewal** - Message Agent alerts provider of request (sends notification in EHR, tells the provider, writes a note - whatever you do now when you get a call); Message Agent replies to patient to let them know what’s going on.

  - **Shares health information** *(recent home blood sugar results, information from another provider, experiences that they think could be an adverse reaction to a new medication)* - Message Agent forwards to provider; message gets stored through Vista Imaging into patient’s medical record. Provider may respond through the Message Agent to the patient with further information or recommendations.
RPMS DIRECT Messaging (RPMS DIRECT) is a secure email service that allows users to send and receive messages and attachments securely to trusted end users. Trusted end users include healthcare providers, authorized staff, message agents, and patients or their authorized representatives. RPMS DIRECT is a web-based service that is easy to use and similar to other webmail systems.

Benefits of RPMS DIRECT

- Supports Meaningful Use requirements
- Integrated with Electronic Health Record (EHR)
- Integrated with Personal Health Record (PHR)
- Enables users to securely exchange protected health information with Federal and non-Federal organizations
- Enables organizations to exchange patient transition of care information with community partners
RPMS DIRECT can be used to

- Promote care coordination between visits
- Address patients’ questions and concerns
- Improve health communications
- Facilitate medication refill requests
- Monitor patients’ condition(s)
- Transmit transition of care documents for patients
- Transmit referrals to specialist(s)

Meet Meaningful Use Stage 2

Use RPMS DIRECT to meet Meaningful Use Stage 2 performance measure:

- A Secure message was sent using the electronic messaging function of certified EHR technology (CEHRT) by more than 5% of unique patients (or their authorized representatives) seen by the eligible provider (EP) during the EHR reporting period.

- For more than 10% of transitions and referrals, EPs, eligible hospitals, and Critical Access Hospitals (CAH) that transition and refer their patient to another setting of care or provider of care must provide a summary of care record electronically.

Learn more about RPMS DIRECT at http://www.ihs.gov
Develop a PHR Awareness Campaign

Each SU/F should identify tools and resources that can be used to make patients aware of the PHR. As go-live approaches, begin providing information on how patients can register for a PHR account. Considerations that will assist in meeting the Stage 2 Meaningful Use performance measure include disseminating a handout (see sample in Pre-deployment package) by the patient registration staff (who can document that the handout was provided in the registration package) or providing information through the clinical staff and documenting that the education was provided (patient education code Administrative Functions-Personal Health Record).

Pre-Deployment Guide
Unknowns

• Who will do this job?
• How much time will this take?
• Do we need to hire new staff?
• Costs?
First Steps

• Workflow in your facility
• Team meetings – discussions – potential plans
• Staff education and involvement
• Leadership participation, understanding, and encouragement with a goal of making this happen
• Community education and involvement
• Patient discussion with their encounter
  • Signs, brochures, flyers
WHY?
Why are we doing this?

• Meaningful Use Dollars....

• Patient Benefit
  • “Most under-utilized resource in our information systems – our patients” per Dr. Warner Slack since the 1970’s
Engagement of the Patient

- Dave deBronkart – GIVE ME MY DATA
  - “e-Patient Dave”
- Tom Ferguson, MD – Medical Self Care; (Whole Earth Catalog)
  - Internet changed life – networks and listservs
  - “e-Patients are Equipped, Engaged, Empowered, Enabled” (e-Patients.Net)
- Danny Sands, MD – Society for Participatory Medicine (Patient and Doctor collaboration)
  - Dave and Danny elected co-chairs (about 2009)
  - Patient of the Future

Engagement of the Patient #2

• Being a good partner
• Physician prescribed internet
• Social Support networks
• Patients sharing what they went through
• Prepared and informed

• Patients connecting to each other, information, and providers
Benefits of Being Connected

• Changes in values over time
• Aware of future plans
• DIRECT messaging
• Correction of incorrect data
• No news is good news myth

• Value
Other Beliefs

• Not interested
• Waste of resources
• Care will suffer
• Technology not ready
• Technology not safe
• Patients don’t care, won’t understand
• Time to monitor, answer, respond to patient questions........
• The “House” interaction
Changes Over Time

• Doctors taught to write notes in Latin
• It’s “wrong” to share too much information
• Sienfeld – and the “fake erase” of “difficult” description of Elaine
• Patient will see what I write
• “Open Notes” experiment 1980 – not feasible on paper – different when system becomes electronic
• Collapse of the world......not really
What’s Next for Us?

• Multi-Purpose Agreement Form
• Review Current Processes
• Prepare and Plan
• Become Excited About the Possibilities
• Think of Ways to Inform, Encourage, and Assist our Patients/Clients with the Coming Opportunities
  • Key Word - Opportunities
Questions?

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