



Issue Brief

Encourage Note Sharing with Patients in Real Time

Problem

For more than twenty years, Congress has prioritized individuals' access to their health information as a key means to improve care, enable research, and empower Americans to live healthy lifestyles. While several laws from Health Insurance Portability and Accountability Act of 1996 (HIPAA) to the 21st Century Cures Act have incentivized patients to have access to their health information, a pervasive culture in medicine has kept real-time access of notes from getting into the hands of patients. Despite the numerous benefits of sharing notes with patients in real time, the vast majority of hospitals and physician offices do not engage in systematic note sharing.

Background: Note Sharing

Note sharing is one means of enhancing patient access to their health information. An “open note” or note sharing occurs when patients, caregivers, and families are invited by clinicians to review their visit notes. Visit notes may include the patient's history, examination results, lab, imaging, pathology results, assessments and/or diagnosis of the clinician, treatment plan(s), and next steps for the patient (e.g., referrals, follow-up appointments, and/or tests.)

In 2010, Beth Israel Deaconess Medical Center, Geisinger Health System, and Harborview Medical Center embarked on a study, “OpenNotes,” where 105 primary care physicians invited 20,000 patients to read their notes via secure online portals to examine the effects of note sharing on both patients and physicians. Results of the study indicated that patient participants overwhelmingly supported open access to their notes and voiced continued support for the initiative.¹ The majority of patients cited an increased sense of control, enhanced understanding of their medical issues, and better medication adherence.² Few patients reported being confused, worried, or offended by what they read.³ Physicians participating in the study also reported minimal impact in workflow patterns with implementation of OpenNotes.⁴

OpenNotes: Enhancing Patient-Centered Care

Today, more than 30 million Americans have access to their clinical notes as part of the OpenNotes movement.⁵ Studies conducted since the original OpenNotes demonstration project continue to validate the project's findings that note sharing helps patients take better care of themselves without creating additional anxiety.⁶ Other studies also indicate that OpenNotes improves medication adherence: A retrospective comparative analysis of one of the sites of the OpenNotes project found that medication adherence to antihypertensive medications improved among patients that were granted access to their primary care physician's notes through a web portal.⁷ Further, studies show that sharing clinical notes in real time increased communication between the patient and their clinician, allowing for more substantial communication beyond brief one-on-one encounters.⁸

Patients also reported increased insight into their condition(s), citing more control of their healthcare and greater appreciation for the clinician.⁹ Additionally, note sharing enhances patient safety by allowing patients the opportunity to identify and ask for corrections in the clinical notes.

However, despite this mounting evidence, note sharing is not universal, and even leading institutions are reluctant to implement the concept in practice. Currently, less than 10 percent of the nation's 5,000 hospitals engage in note sharing. Policy actions are needed to promote this demonstrably patient-centered activity.

Recommendations to Encourage Note Sharing with Patients in Real Time

The Medicare and Medicaid Promoting Interoperability Programs and the Merit-based Incentive Payment System (MIPS) under the Quality Payment Program both require eligible hospitals, critical access hospitals (CAH), and eligible clinicians to offer patients access to their health information via a portal or application programming interfaces (APIs). However, additional opportunities exist to meaningfully enhance patient access to their health information through such efforts as OpenNotes. One compelling avenue to incentivize such note sharing would be through the MIPS Improvement Activity Performance Category, which provides clinicians an opportunity to engage in a range of activities meant to improve the safety, efficiency, and effectiveness of patient care. Additionally, innovative payment models developed by the Centers for Medicare and Medicaid Services' Innovation Center, including the Comprehensive Primary Care (CPC) and CPC Plus initiatives, could incentivize note sharing as part of their payment requirements.

AHIMA and AMIA recommend Congress, using its oversight authority, promote efforts such as OpenNotes through Medicare and Medicaid payment programs, including the Promoting Interoperability Programs, the MIPS Improvement Activity Performance Category, and other innovative payment models, so that the practice of note sharing benefits patients nationwide.

References

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² Ibid.

³ Ibid.

⁴ Ibid.

⁵ Available at: <https://www.opennotes.org/news/more-than-30-million-americans-have-access-to-their-clinical-notes/>.

⁶ Mishra V, Hoyt R, et al. Qualitative and Quantitative Analysis of Patients' Perceptions of the Patient Portal Experience with OpenNotes. *Appl Clin Inform.* 2019; 10(01): 010-018. Published 2019 Jan.

⁷ Wright E, Darer J, Tang X, et al. Sharing Physician Notes Through an Electronic Portal is Associated With Improved Medication Adherence: Quasi-Experimental Study. *J Med Internet Res.* 2015;17(10):e226. Published 2015 Oct 8.

⁸ Grossman LV, Creber RM, Restaino S, Vawdrey DK. Sharing Clinical Notes with Hospitalized Patients via an Acute Care Portal. *AMIA Annu Symp Proc.* 2018;2017:800-809. Published 2018 Apr 16.

⁹ Ibid.