

Seven UCH Practices Open Provider Notes to Patients

By Tyler Smith

For most patients, the details of their medical care have long been buried in records and unearthed only with persistence. But University of Colorado Hospital is among a growing number of institutions that are helping patients shine a brighter light into once dark corners of care.



For CT Lin, MD, the OpenNotes launch has been a long time coming.

The hospital last month launched OpenNotes, a new feature in My Health Connection that allows patients to view progress notes from their physician visits. The first phase includes seven primary care practices (see box). [CT Lin, MD](#), chief medical information officer for University of Colorado Health, estimated that some 32,000 patients will have access to the notes.

Patients signed up with [My Health Connection](#) already can go online to communicate with their physicians, refill prescriptions, change their medication lists, and review their test results. OpenNotes gives them additional insight into their care, Lin said.

"This is the next step in the evolution," he said.

Trial balloons. The days when patients left their care solely in the hands of their providers are rapidly fading, Lin added.

"More and more patients have done their homework and are ready for a more advanced conversation with their physicians," he said. "They are asking for and demanding more access to information about themselves. We believe that transparency will increase patient engagement and participation in their care."

The OpenNotes concept was pioneered in 2012 among 105 primary care physicians at Beth Israel Deaconess Hospital in Boston; Geisinger Health System, headquartered in Danville, Pa.; and Harborview Medical Center in Seattle. Some 13,500 patients gained access to their progress notes; 87 percent of them opened at least one note.

In a post-intervention survey, large percentages of patients said having access to the notes helped them feel more in control of their care and improved their medication compliance. Nearly all wanted access to the notes to continue and no physicians decided to stop – despite initial worries from some about the notes disrupting their workflow and creating confusion for patients. The authors summarized the research results in an [October 2012 article](#) published in the *Annals of Internal Medicine*.

Today, OpenNotes has gone systemwide in the three pilot organizations. The concept is now in place at a total of 18 institutions, UCH being the latest.

Open-door policy. Lin pioneered "My Doctor's Office" and "[My Medical Record](#)," UCH-based precursors to My Health Connection, and has long championed widening patients' access to their providers and their own medical information. He isn't surprised it's catching on.

"We found in opening online communication with physicians and releasing test results that the world doesn't come to an end," he said. Still, he heard many of the same questions from physicians

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prior to the roll-out of OpenNotes, and two primary care practices opted out.

“Some of them asked, ‘What’s the point?’ and said opening the progress notes to patients adds no value,” Lin said.

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Future Appointments (next 10)

Date & Time	Provider	Department	Dept Phone
8/29/2014 10:00 AM	Brandon P Combs, MD	Internal Medicine Leary	720-948-9500

Medications and Orders

Your Current Medications

acetaminophen (TYLENOL) 80 mg Chromaplex tablet	
dexamethasone dipropionate (DIPROLENE) 0.5% foam-in-spray	Apply topically 2 times daily.
omeprazole (PRILLOSEC) 20 mg capsule	Take 1 capsule by mouth every morning (before breakfast).

Visit Summary

Today's Vitals - Last Recorded

Smoking Status
Never Accessed

Allergies as of 8/18/2014

Ampicillin (B4K)	Anaphylaxis
Penicil	

You Were Diagnosed With

Annual Physical Exam - Primary

Universal Patient Goals

1. We recommend writing down your medical questions and your treatment goals for your next visit.
2. We recommend getting more active. The American Heart Association recommends 60 minutes of activity per day for healthy adults, unless otherwise directed by your physician.

Your Provider's Note

Your Provider's Note
Uchest, Doclea, MD 8/27/2014 2:53 PM Signed
Your provider's note from this visit will display here!

My Health Connection users who make an office visit to one of the seven primary care practices participating in the OpenNotes project can access their providers' progress notes at the end of the after-visit summary.

The concept is “not without controversy,” Steve Hess, chief information officer for UCHHealth, acknowledged. Until relatively recently, the notion that providers should exercise stringent control over patients’ access to their own records was widely accepted.

“But in my opinion, the patient owns the information. We are only the custodians of it,” Hess said. “Patients today are more involved in their care and are less willing to be simply blind recipients of their medical information.”

Cracking the code. Making the progress notes available to patients at the selected practices required embedding logic into the after-visit summary that is already available to My Health Connection patients, said Matt Mimmall, associate systems analyst with the Epic Ambulatory Services team at UCH. The notes become visible only after the provider signs the note and closes the encounter, Mimmall said.

The logic ensures that progress notes are available only to patient visits at the seven participating practices, Mimmall said. Notes from psychologists and psychiatric notes are also excluded

unless they are part of a shared clinical note with a medical provider, as can be the case at AF Williams Family Medicine Clinic, for example.

After he built the structure for the progress notes in My Health Connection, Mimmall invested time in testing it to make sure the notes displayed properly and that excluded information didn’t appear. One week after the Aug. 19 launch, he said he’d received “no feedback at all” from providers about the feature.

Prepping providers. For Lin, laying the OpenNotes groundwork centered on communicating with providers. One key message: Consider the long-term benefits, not the potential short-term pain. Every physician has encountered a difficult patient who eats up time with dozens of questions and corrections about minute details of their care, Lin said. But that should not be the standard used to decide whether or not to implement OpenNotes, he maintained.

“Rather than saying we’re not going to sign up for OpenNotes until the system can handle that patient, I believe we should consider the 99 percent who will be grateful to be trusted with the information,” Lin said. “We know that for them, the transparency is a huge satisfier.”



Corey Lyon, DO, medical director for AF Williams, said Lin approached him about a year ago about participating in the OpenNotes project. After Lin presented the concept and the evidence behind its effectiveness, the providers at AF Williams agreed to participate, Lyon said.

“There were some concerns among physicians about not knowing how patients would react,” he said. “But in my opinion, OpenNotes is very patient-centered. The evidence has shown that patients enjoy seeing what their progress notes are saying and that it helps them further understand their treatment plan and what is working – and it can potentially help with compliance.”

Lyon said OpenNotes can help providers clarify for patients the often confusing world of medical care. "A lot of information is given them in a 15- or 20-minute visit," Lyon said. "This is the next step in helping communication with patients."

Lin and the Epic team provided AF Williams and the other participating practices with support materials prior to the launch, including FAQs for providers and patients. But Lyon stressed the practice took a business-as-usual approach.

"The main message I gave providers was, 'Don't do anything different. The progress note is still a medical form of communication, and that is how we're going to use it,'" he said.

There was no additional training required, Lyon said. After one week, there had been no increase in workload or requests from patients to change anything in the notes. "The staff has handled it with ease," he said.

Hess said the hospital will monitor feedback about OpenNotes from providers and patients in the months ahead, but emphasized that it's here to stay. The next steps will involve adding practices, not only at UCH, but across the UCHealth system. OpenNotes is just one piece of a larger movement toward opening the previously sheltered world of health information to consumers, Hess said.

"We believe we are being patient advocates," he said. "Knowledge is power, and we need to involve patients in the health care process. The walls are being knocked down."

OpenNotes Pioneers

Seven primary care practices agreed to participate in phase one of the OpenNotes project at UCH:

- » Lowry Specialty Practice
- » Seniors Clinic
- » Lone Tree Health Center
- » AF Williams Family Medicine
- » Family Medicine-Boulder
- » Family Medicine-Park Meadows
- » Family Medicine-Westminster

The WISH (Women's Integrated Services in Health) and University Medicine-Anschutz clinics declined to participate at this time.