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A Patient Portal Push toward Acceptance and Utilization of the Technology

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The Centers for Medicare and Medicaid Services (CMS) have focused the definition of “meaningful use” as related to electronic health records and online patient engagement with current MACRA (Medicare Access and CHIP Reauthorization Act of 2015) and MIPS (Merit-based Incentive Payment System) legislation. MIPS will determine Medicare payment adjustments based on performance benchmark scores for eligible providers at eligible health centers beginning 2018. Providers may receive a payment bonus or payment penalty based on overall scoring. One part of the MACRA/MIPS score acknowledges the importance of “Meaningful Use of certified electronic health records” (patient portals). Performance measures begin January 1, 2017 and account for 25% of the weighted performance score (CMS, “The Medicare Access and CHIP Reauthorization Act, 2015). Benchmarks for online patient portals include; 5% of eligible patients are actively viewing, downloading and transmitting health information through their portals, 10% of eligible patients receive patient education materials online, 5% of eligible patients and providers are using secure electronic messaging to communicate relevant information through the portal, and 50% of unique patients registered for portal access.

The theoretical foundations for this study include *the Technology Acceptance Model* (TAM) designed to determine workers' perceived usefulness, ease of use, and intention to use early computer technology (Davis, 1989). The *Patient Engagement Framework* by the Health Information Management Systems Society (HIMSS) is a five-phase patient engagement continuum used to “inform, engage, empower, partner, and support online health information technology efforts with patients (2014). This program evaluation project based on the *Center for Disease Control Program Evaluation Framework* (2017). Three goals of this program evaluation include; market and educate patients about portal registration and utilization, assess portal registration and utilization numbers, and evaluate on-line patient-provider portal engagement and acceptance of the technology. Quantitative surveys and pre/post MU 90-day Summary reports seek to assess portal technology acceptance and utilization by patients, providers and clinical staff.

Title:

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online patient-provider engagement, patient online portals and technology acceptance and usability

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Abstract Summary:

This DNP program evaluation highlights the results of a 90-day “Patient Portal Push” marketing and education initiative on overall patient portal registration and utilization numbers, provider “Meaningful Use” portal benchmark attainment, and survey outcomes of patients and providers acceptance and utilization of online portals.

Content Outline:

Purpose: Enhance patient portal registration and utilization through marketing and education efforts. Assess the impact on providers’ Meaningful Use benchmark attainment, and survey patients and providers on acceptance and utilization of the technology.

Background: In 2017, eligible providers and health centers are required to attest to Meaningful Use (MU) benchmarks through a 90-day reporting period. The Center for Medicare and Medicaid (CMS) MU benchmarks and The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) is bipartisan legislation signed into law on April 16, 2015. MACRA combines parts of the Physician Quality Reporting System and the Medicare Electronic Health Record (EHR) incentive program into one program called the Merit-based Incentive Payment System (MIPS). MIPS legislation supports patient-centered care through online portal utilization benchmarks.

Initiative: Enhance marketing and 1:1 education efforts in this low income, racial and ethnic minority population to enhance online portal registration and utilization across multidisciplinary providers.

Methods of Assessment: The *CDC Program Evaluation Framework* provides the foundation for this descriptive survey study. Evaluation of online patient-provider engagement employing a *Patient Portal Engagement Survey* and a *Provider/Clinical Staff Portal Engagement Survey*. The purpose of these surveys is to assess level of interest in portal technology acceptance. In addition, comparison of CMS portal benchmark attainment using two 90-day *NextGen Summary Reports* pre/post the portal initiative at the health center.

Sample: Nonrandom, purposeful sampling of patients, providers, and clinical care coordinators at the health center.

Results: Survey results will be summated and disseminated to various stakeholders.

Conclusion: Results, implications, and discussion disseminated to advance patient-centered care and online provider-patient engagement and sustain online patient portal utilization.

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Professional Experience: Deborah Kornacker DNP(c),MS,RN 1991-2018,Associate Professor,College of Nursing and Health Professions,Lewis University,Romeoville, IL. Deborah began her doctoral journey in 2015 and developed this program evaluation project with a focus on patient-centered care, online patient engagement, and enhancement of technology utilization.

Author Summary: Associate Professor, Deborah Kornacker has been a nursing professor at Lewis University since 1991. As a lifelong learner, Deborah will complete her Doctorate in Nursing Practice in 2018. Deborah earned a MS in Nursing from Rush University in 1986. Deborah was awarded the Brother Louis Seiler Ministry of Teaching Award for teaching excellence May, 2018