

# 2011 Military Health System Conference

## Moving to the Patient-Centered Medical Home through the MHS Personal Health Portal

*The Quadruple Aim: Working Together, Achieving Success*

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Department of Defense, TRICARE Management Activity

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# Session Objectives



- **Objective 1:** Communicate vision and benefits of a Patient-focused Portal
- **Objective 2:** Identify the plan and strategy for enhancements
- **Objective 3:** Service example of benefits and implementation

# Patient Portal Background



- Military Services Chief Medical Information Officers developed a Personalized Health Strategy which has at its heart a Patient Portal
- A Patient Portal is more than a Personal Health Record
  - Provides healthcare-related online applications that allow patients to interact and communicate with their healthcare providers and manage their own health activities
  - Supports the Patient Centered Medical Home healthcare delivery model
  - Supports the MHS IM/IT Strategic Plan mission outcome of “Healthy and Resilient Individuals, Families and Communities”

# Patient Portal Vision



## Desired Component Capabilities of a Patient Portal

- Secure Patient-Provider Messaging
- Self-Appointing
- Personal Health Record
- Family History
- Health Information/Patient Education Materials
- Pharmacy Refill
- Preventive Health Tools/Reminders
- Disease Management Tools
- Pre-visit Questionnaires and Health Risk Assessments
- Advance Directives
- Claims History
- Links to Other Capabilities: Benefits, Enrollment, Personnel and Readiness

# TRICARE Online



- TRICARE Online (TOL) is the MHS Internet point of entry that provides 9.6 million DoD beneficiaries access to available healthcare services and information through an enterprise-wide secure portal
- TOL is a single, efficient, cost-effective, user-friendly, network-centric platform that enhances access and delivery of healthcare from any location, at any time providing authorized users with appropriate access patient centric services which:
  - Increase beneficiary access to care while optimizing MHS provider resources
  - Enable the MHS to meet 2011 Meaningful Use capabilities pertaining to sharing Personal Health Data
  - Support implementation of Patient Centered Medical Home with future Secure Messaging enablement

# Current TOL Capabilities



- Online Appointing Services enhanced with parental logon capability (released June 2010)
- Online Pharmacy Refill Services
- Personal Health Information Display enhanced with blue button capability for .txt/.pdf downloads
- Online Health Risk Assessment Surveys Service
- Information on TRICARE services, benefits and health education

# Planned Capabilities



- TOL Look and Feel Improvements
- Health.mil link to TOL
- eBenefits Federation to TOL
- CHART Enhanced Health Assessment
- eForms Access
- Secure messaging Pilot Support
- Personal Health Data
- Family Doctor link



# Service Implementation



- Why Use an Online Portal?

- Book a flight: 20 years ago, no one gave a 2nd thought to calling an airline to book a flight. Can you even remember the last time you called an airline or travel agent?

- Order a Pizza: Papa John's recently reached \$1 billion in online revenue; Officials say more than 20 percent of sales come from online or text messaging. "It took us seven years to reach our first billion in online sales, and at our current pace and growth rate it will take us less than three years to hit our next billion," - Jim Ensign, Papa Johns VP, Marketing & Communications

Take Away: Online Portals provide consistent, easy, anytime, anywhere access to information and services. Innovative technologies, targeted to specific user groups, are increasingly more convenient and efficient alternatives to outdated processes.

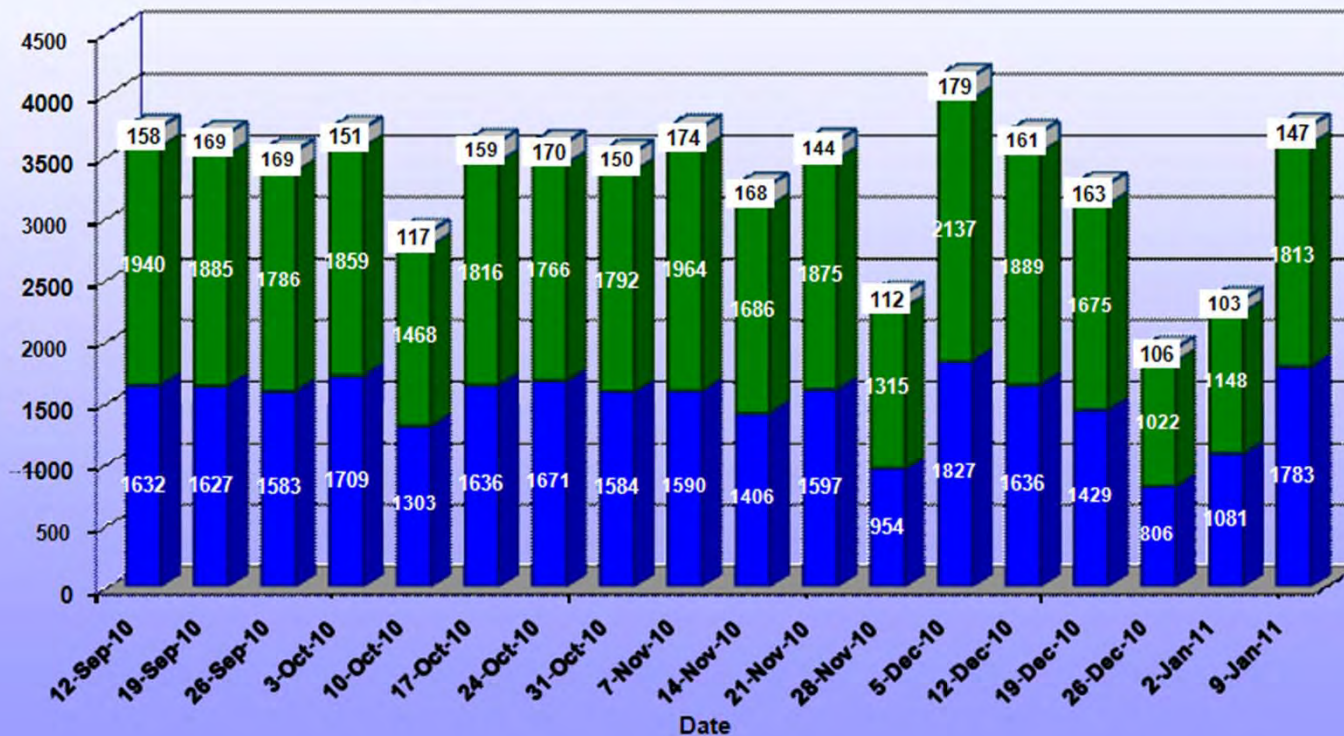
# TRI-Service Appointments Snapshot



TRICARE *online*

## Appointments by Service

■ Air Force ■ Army ■ Navy



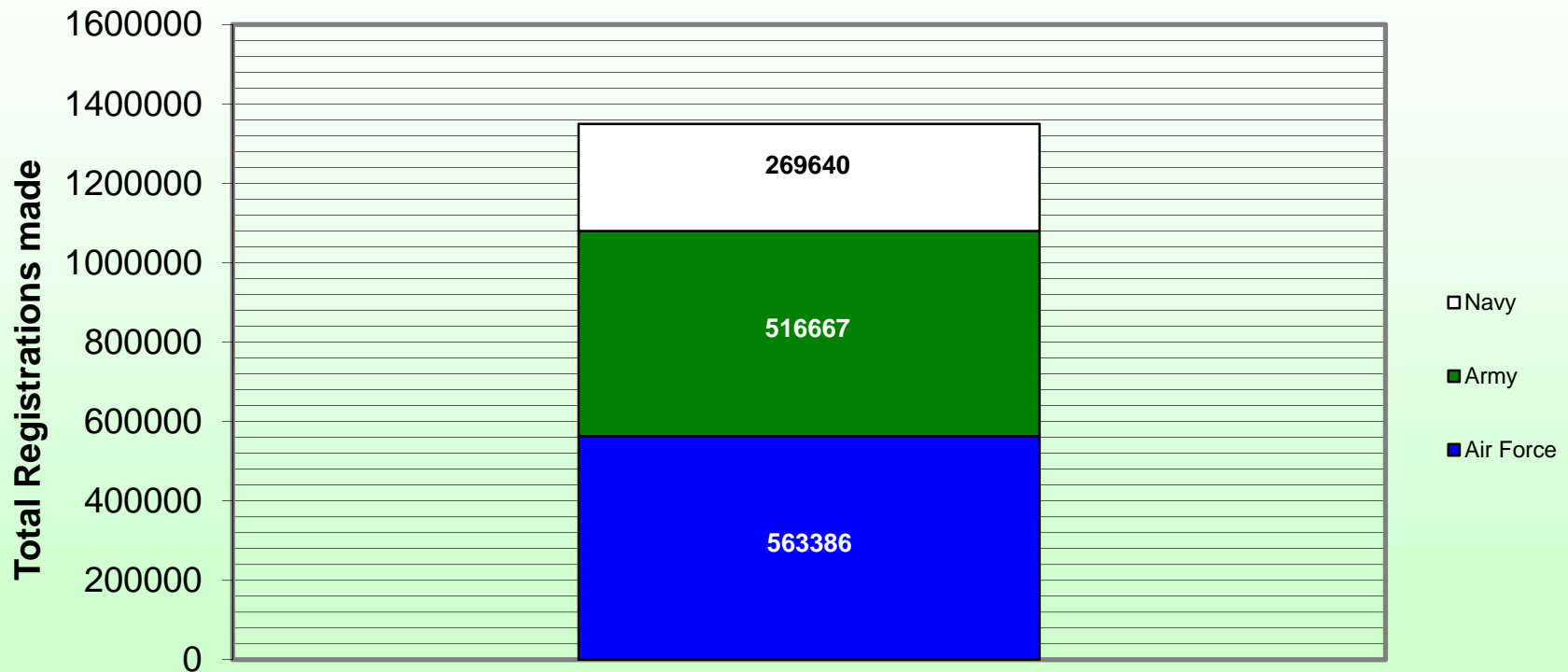
12 Sep 10 – 9 Jan 11

# TRI-Service Registration Volume



Total Registration Volume as of 10-January-11

Total Registrations - 1353692



# Army Metrics



- PC Appointments Booked via TOL
- Appointments Booked via TOL: Year over Year Comparison
- Beneficiaries Registered on TOL: Year over Year Comparison

# Army: PC Appts Booked on TOL



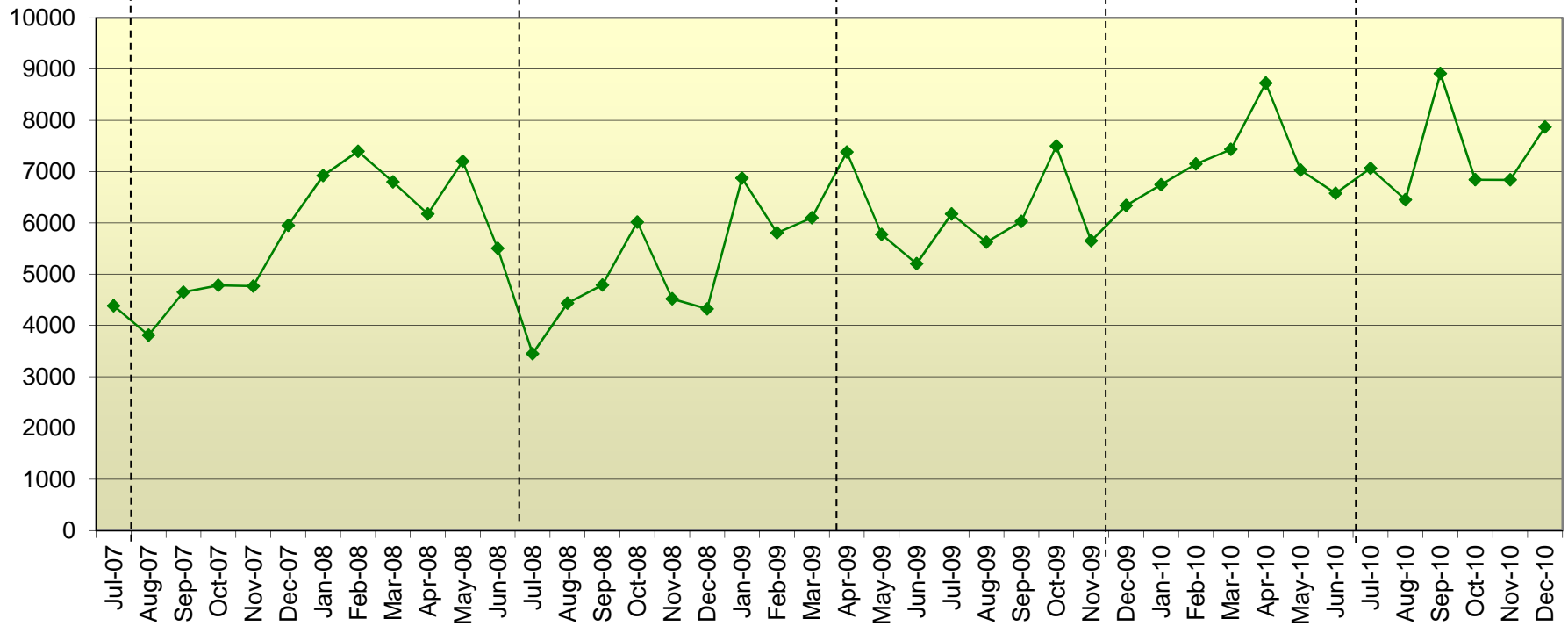
Published MEDCOM TOL Policy  
[17 Jul 07]

Major TOL System Failures, at the same time as TMA openly discussing "stopping" TOL

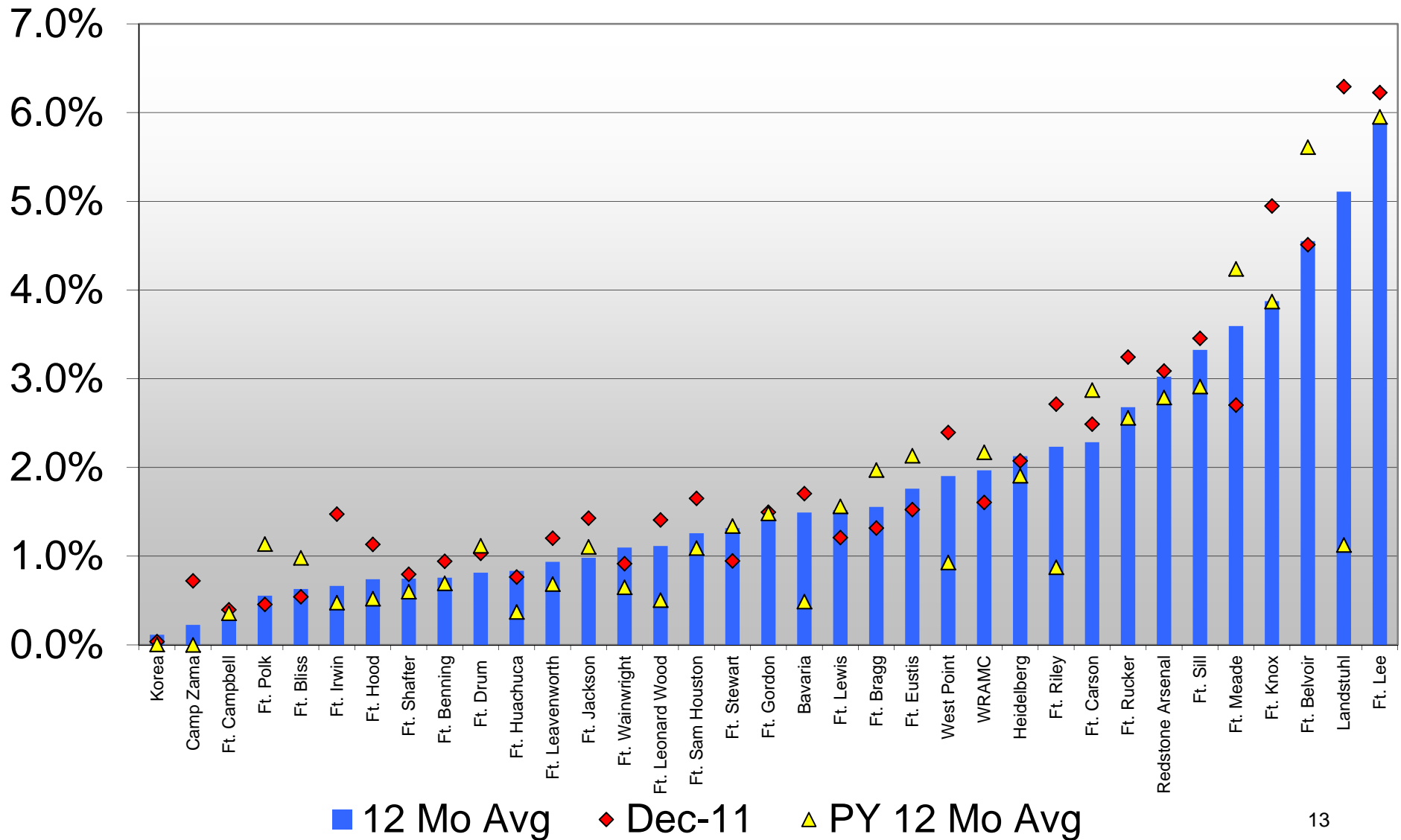
Published OPORD 09-36  
[30 Mar 09]

MHS advertised, but Aborted TOL Maintenance Shutdown  
[20 Nov 09]

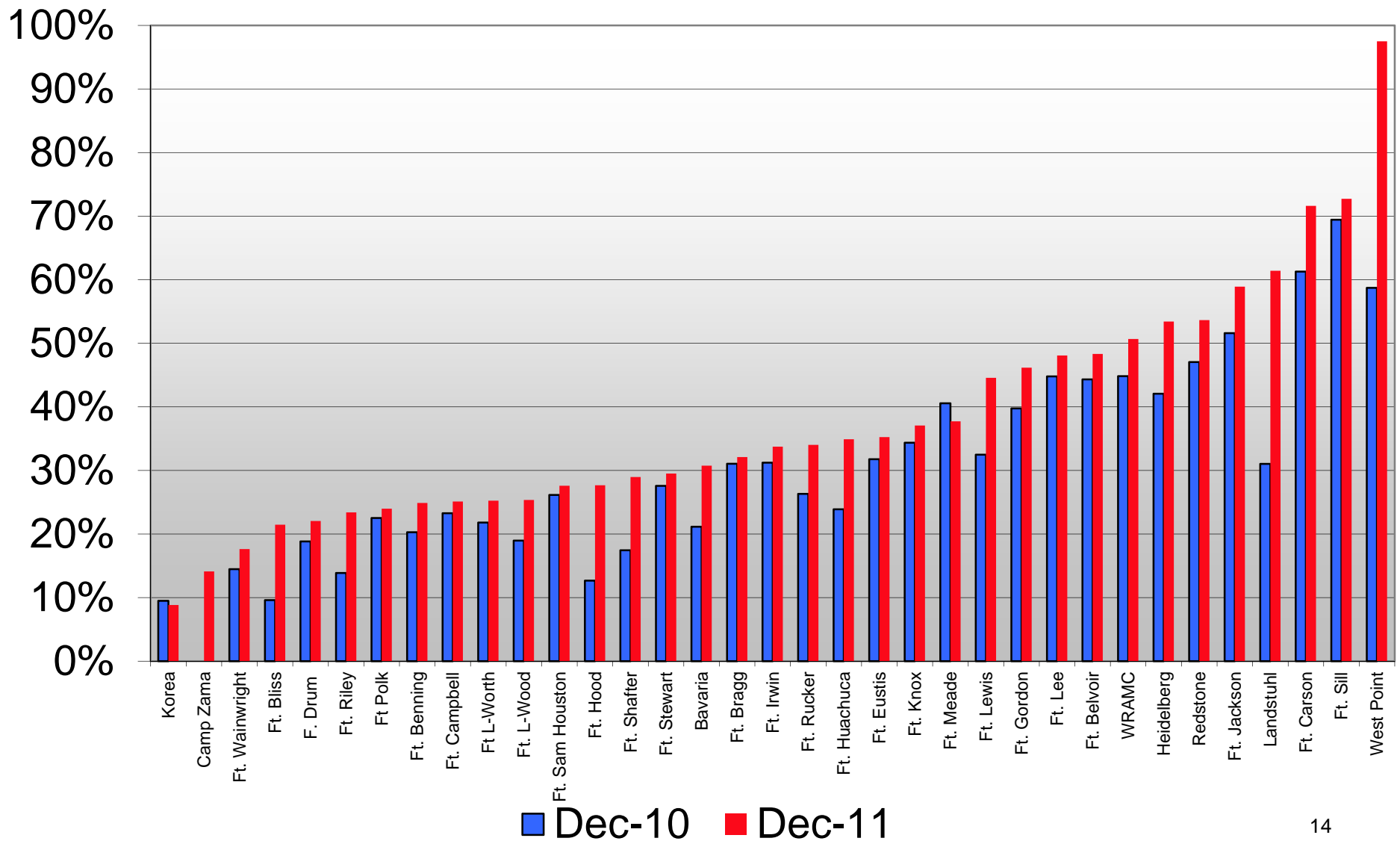
Deployed TBAM  
[30 Jun 10]



# Appointments Booked on TOL: Army Year over Year Comparison



# Beneficiaries Registered on TOL: Army Year over Year Comparison



# AFMS Support to the TOL Program



- Policy
  - MHS Guide to Access, 15 December 2008
  - AFMS ATC Functions Guidance Memorandum, 13 August 2010
  - TOL 80% availability goal added to AFI 41-210, Chapter 3
  - AFMS Access Improvement Working Group (AIWG) discussions
- Education/training
  - Taught at all AFMS Access to Care training courses



# AFMS Support to the TOL Program (cont)



- Metrics and Measures Support:
  - TOL % usage and availability cubes added to the Air Force Medical Service Executive Global Look/Virtual Analysis
  - AFMS Access Improvement Module (AIM) provides tactical tool for GPMs and TRICARE Online Administrators to see what is booked on TOL
  - AFMS GPMs, TOPA personnel receive monthly Pivot Table with usage and availability rates and are all posted on the AFMS Knowledge Exchange



## AFMS TOL Pivot



# Back Up Slides

# Benefits of a Patient Portal



Patient	Provider	Institutional
<ul style="list-style-type: none"> <li>▪ Empowerment as member of his/her healthcare team</li> <li>▪ Management of personal healthcare data</li> <li>▪ Convenience/alternatives                             <ul style="list-style-type: none"> <li>– On-line versus telephone</li> </ul> </li> <li>▪ Enhanced access to services/information</li> </ul>	<ul style="list-style-type: none"> <li>▪ Engaged patients                             <ul style="list-style-type: none"> <li>– Convenience</li> <li>– Asynchronous communication with patients</li> <li>– Secure messaging versus T-cons</li> </ul> </li> <li>▪ Efficiencies - Reduced appointments for lab results and medication renewals</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mass Communication vehicle</li> <li>▪ Outreach                             <ul style="list-style-type: none"> <li>– Reminders, Disease-specific patient education materials</li> </ul> </li> <li>– Efficiencies</li> <li>– Reduction in appointment No-Shows with patient self-booking</li> <li>– Cost Avoidance                             <ul style="list-style-type: none"> <li>– Results via e-mail versus postal service</li> <li>– Potential for fewer appointing staff</li> </ul> </li> </ul>

# Patient Portal Challenges



- Marketing
  - Get the word out!
  - Incorporate user feedback into an iterative design

# AFMS Support to the TOL Program



- Policy Support:
  - Air Force supports, co-authored information/guidance contained in Appendix P, (TRICARE Online) in the MHS Guide to Access, 15 December 2008
  - AFMS ATC Functions Guidance Memorandum signed on 13 August 2010 directs all AF MTFs to make 80% of Primary Care Clinic and select Specialty Care CHCS appts available to TOL
    - Guidance to soon be published as an Air Force Instruction (AFI)
  - TOL 80% availability goal added to AFI 41-210, Chapter 3, to be published as soon as late January 2011
  - TOL subjects discussed monthly with all AFMS GPMs at the AFMS Access Improvement Working Group (AIWG)

# AFMS Support to the TOL Program



- Education/Training Support:
  - TRICARE Online appointing and program functions subjects taught at all AFMS Access to Care training courses
  - 2010 Training Statistics:
    - Access Improvement Seminars (5 different regional locations for a total of **350 personnel** [Army, Navy, CG, AF] trained)
    - Appointing Information Systems Hands-on Training Courses(4 courses - total of **78 personnel** [Army, Navy, CG, AF] trained)
    - GPM Combined Course (22 personnel [Army, Navy, AF] trained)
  - Grand Total = **451 joint service personnel** trained in TRICARE Online subjects
  - **\*GOAL:** Improve understanding, use and availability of TRICARE Online to our beneficiaries while improving ATC

# AFMS Support to the TOL Program



- Metrics and Measures Support:
  - TOL % usage and availability cubes added to the Air Force Medical Service Executive Global Look/Virtual Analysis
  - AFMS Access Improvement Module (AIM) provides tactical tool for GPMs and TRICARE Online Administrators to see what is booked on TOL
  - AFMS GPMs, TOPA personnel receive monthly Pivot Table with usage and availability rates and are all posted on the AFMS Knowledge Exchange

# AFMS Support to the TOL Program



- TOL Usage and Availability Pivot Table
  - Sent monthly the TOL POCs
  - Report period is two months old
  - Provides 3 months of data: report period of August to October 2010
  - Provides usage and availability % for primary care and select specialty clinics



# TOL Changes Implemented Feb – Nov 2010



- Update HART Launch Page in support of HART F-**2/27/10**
- PCM Visit Reasons available to users with MTF SA role-  
**2/27/10**
- Add capability to save PHR data in PDF format-**6/7/10**
- Appointing: Add 7 day limit (maximum search) parameter-  
**6/30/10**
- Provide new capability for users to book appointments for  
minors (TBAM)-**6/30/10**
- Appointing: User unable to cancel future TOL booked  
appointments after transferring MTFs-**6/30/10**
- Save Personal Health Data to text format-**10/9/10**

# Enhancement: CHART



- Service: Enhanced HRA with CHART coupler for online completion of required Periodic Health Assessments (PHA) in singular session through consolidation of six self-reporting tools:
  - HART-A (Accession), HART-R (Readiness), HART-F (Full Variant)
  - Pre and Post Deployment Health Assessment questionnaire (DD form 2795, 2796)
  - Post-Deployment Health Reassessment questionnaire (DD form 2900)
- Expected Benefit:
  - Increased patient convenience via online submission to EHR of PHAs
  - Inform patients about health risk factors to motivate behavior change
  - Inform providers about patients' medical history and health status

# Enhancement: eForms Access



- **Service:** Online patient access to complete electronic forms requested by provider team.
- **Expected Benefit:**
  - Patient convenience – complete forms at their discretion versus early appointment arrival
  - Maximize provider-patient time through completion of forms prior to appointment
  - Ability to share data captured on the eForms with other providers
  - Ability to complete eForms separately from an encounter
  - Standardized method of assigning eForms to patients
  - Increased provider efficiency
  - Decrease paper form dependency
  - Centrally locate and tie deployment forms to previous encounters

# Enhancement: SM Access



- **Service:** TOL access to Patient-Provider electronic Secure Messaging (SM) Software as a Service (SaaS) products
- **Expected Benefit:**
  - Improve clinical staff productivity and efficiency of healthcare delivery
  - Higher patient satisfaction rating as experienced in the civilian sector
  - Reduce costs associated with handling telephonic contacts
  - Decrease office visits for routine or simple needs/questions
  - Provide source of documentation as an artifact of the electronic exchange between provider and patient

# Enhancement: Personal Health Data



- **Service:** Online access to personal health data, via Bi-Directional Health Information Exchange (BHIE) data feed, from information stored in the DoD Electronic Health Record (EHR) and Veteran's Affairs (VA) system
- **Expected Benefit:**
  - Satisfy 2011 Meaningful Use of Data Initiative by user access to their PH data via portlets consisting of:
    - Allergies
    - Medications
    - Lab Results
    - Problem Lists
    - Encounter Notes
  - Federal Blue Button capability for user to download via .txt or .pdf format or print