

# PHYSICIANS PRACTICE

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Doctors are wagering on new career strategies as healthcare shifts.

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# Patient Compliance in the Digital Age

Getting patients to follow your guidance is a lot easier with today's technological tools

BY MARISA TORRIERI



Family medicine physician Jennifer Kay knows that getting patients to do what the doctor ordered is rarely easy. And it's not just the chronic-disease patients and the elderly who fail to follow their care plans.

"The diabetics, the congestive heart failures, the COPDs — those are the patients you see the most, but acute-care patients have just as much difficulty," says Kay, who practices in Council Bluffs, Iowa. "I'll have a youngster with strep pharyngitis and I prescribe [her] antibiotic for a full 10 days, and most of the time parents can't get that full 10 days in."

But over the last year, Kay's practice has seen a turnaround in patients young and old who are complying with her care plans and following her prescriptions thanks largely to her EHR, which allows her to create and print "depart summaries" so patients can clearly see Kay's instructions. She can also send these summaries to patients through the practice's patient portal as electronic messages.

"There's no way to know 100 percent how well these things are working, but I do have patients who bring back [my written orders] and that's very positive feedback, that yes, they are adhering to them," says Kay.

Want to mirror Kay's results and get more patients to follow your recommendations for care? Here's some guidance.

## PATIENT PORTALS

If you ask physician-turned-consultant David Lee Scher, Kay's practice is an example of what typically happens when a physician writes a prescription.

"The simplest order is writing a prescription, and it's estimated that somewhere in the order of 75

percent of patients have at one time not adhered to it," says Scher, adding that many of those patients who don't comply with a doctor's orders aren't doing so on purpose. "Most nonadherence has to do with patients not taking their medications correctly or forgetting it, so it's not on purpose."

Practices that want to lower the number of patients who are forgetting to follow a doctor's orders may want to consider investing in a patient portal, says Richard Stokes, a healthcare IT consultant with Atlanta-based Network 1 Consulting.

"Patient portals are systems whereby physicians can communicate securely with their patient base, send them things like reminders, share lab results, or send things like electronic statements to patients securely and routinely so patients can get the information they need," says Stokes.

Kay says an increasing number of patients prefer the portal because it engages them in their healthcare.

"We set up our portal such that if your lab is 36 hours old and your doctor hasn't signed off yet, then patients can see it live in the portal," she says. "That's very good for patients in a number of ways. One is they can follow chronic diseases or chronic problems, so if they've got high cholesterol they can see the results of their actions.

By providing results in a timely fashion, she adds, patient anxiety over potentially positive results is allayed immediately, and any results that cause confusion or concern can be addressed via e-mail or phone call to the practice for follow-up.

## MOBILE MESSAGING

Text messaging is a simple way to communicate a quick message. And text reminders are a great way to get patients to comply with your plan of care, says Scher, noting that many other countries have instituted text-messaging programs to urge patients to take their medications.

"They've done it for malaria, they've done it for HIV medications, they've done it for compliance with prenatal management," says Scher. "It really does work."

In the United States, HHS has duplicated that effort, says Scher, promoting the Text 4 Baby short-messaging service (SMS) reminder program created by National Healthy Mothers and the Healthy Babies Coalition for pregnant women and new mothers, which offers free prenatal advice delivered to mobile devices.

"These things work because they engage the patient," says Scher. "People are geared toward the familiarity of text messages. They've done studies that show that people act on text messages."

However, practices should be mindful of HIPAA if they are sending out reminders that are patient-specific, says Scher. If text messages are tailored to individual patients rather than statements such as "don't forget to take your vitamin today," practices would need to have the proper mobile security applications in place that protect patient data.

## CHECK-IN SCREENING

Does your practice have trouble getting patients to get their flu shots? Michael Dunn, a family physician based in Phoenix and chief medical officer of FastMed



Urgent Care, an urgent-care organization with locations in Arizona and North Carolina, can relate.

Like patients who come into medical practices for regular checkups, the patients who visit his company's urgent care centers don't necessarily want to get a flu shot, though influenza accounts for more than 3 million hospitalization days and 31.4 million outpatient visits per year, according to recent data

by the Centers for Disease Control and Prevention.

But when the practice started using an electronic check-in device for patients in its waiting rooms, getting patients to get the shot became a whole lot easier.

"Patients come in and there's a question on whether [they] have had the flu shot within the year, and if they haven't had it [the tool] prompts our providers to offer it. Without the

prompt, many fewer patients would get flu shots," says Dunn.

Self-service check-in technology may extend beyond the flu shot, says Chaim Haas, president of healthcare IT vendor Phreesia, by ensuring that patients are asked the right screening questions for their specific condition so that by the time they get into the exam room, they can have more meaningful conversations with their physician.

### HOME MONITORING DEVICES

Giving patients tools to take home so they may monitor their blood-glucose levels or blood pressure is nothing new. But many of these types of tools have evolved in the last few years.

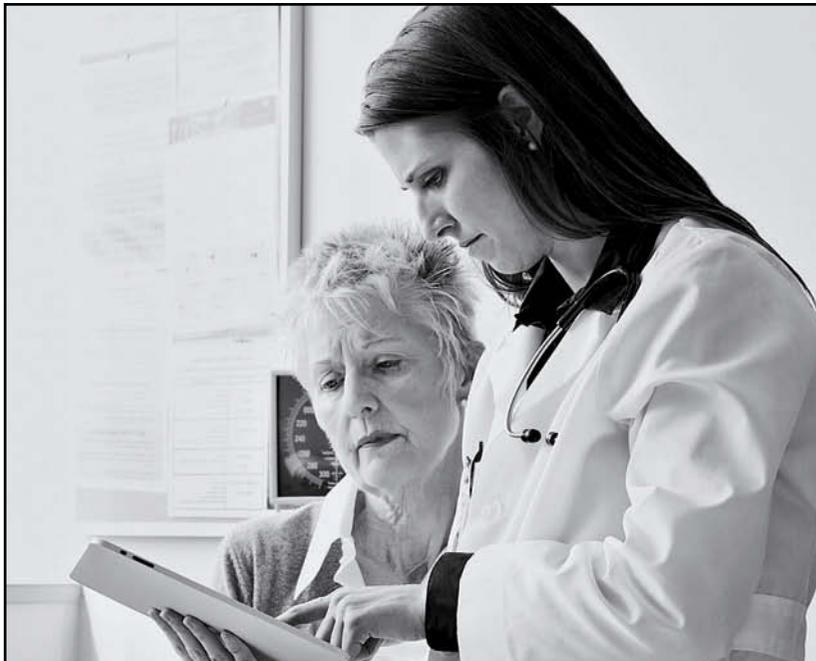
"With the advent of EHRs, that information [from a device] can be automatically integrated with a patient's records, and it gives physicians faster access to information," says Stokes.

Stewart Segal, a primary-care physician at Lake Zurich Family Treatment Center near Chicago, started using a palm-size MidMark SleepView device a few months ago, in order to get more patients tested for sleep apnea.

"Generally, patients don't perceive sleep apnea as dangerous to their health," says Segal, who had formerly referred patients to a nearby outpatient sleep lab for getting tested. "Patients are often resistant to the idea of being studied in an outpatient sleep lab."

The ease of using the in-home sleep-apnea monitor has made more patients, who otherwise would have been undiagnosed, receptive to getting tested. Today, patient compliance nears 85 percent.

"I have been using SleepView for 15 months and in the last four months have really seen a marked increase in usage in my practice," says Segal. "As more patient lives are positively affected by the proper diagnosis and treatment of sleep apnea, more new patients ask about the availability of the device." ■



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