Fulfilling the Personal Health Record Vision

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In today's fragmented health care system, patient data is scattered among physicians, hospitals, lab companies and pharmacies. This can lead to medical errors, adverse patient outcomes, costly hospitalizations and disabilities.

Efforts are now underway by leading health plans and employers to aggregate patient information into personal health records (PHRs). This aggregation of data into a patient-centered and patient-controlled record can empower consumers of health care and enhance care optimization among physicians, other caregivers and patients.

PHRs bolster the consumer-driven health movement, and support President Bush's federal priority to provide Americans with electronic health records by 2014. PHRs are a centerpiece for public and private sector initiatives for health care IT connectivity goals: improving care, reducing medical errors and lowering costs. PHRs also offer an opportunity to tailor information to the unique needs of the individual as well as supporting patients as they play an increasing role in managing their health.

PHR Basics

There are many PHRs on the market today. They are offered by health plans, employers and independent vendors. They offer varying levels of sophistication and usefulness. Several are pre-populated with medical claims data so that each time a patient visits a doctor, fills a prescription or gets a lab test, this information is added to the PHR. The result is an evolving, comprehensive picture of the patient's health.

Some PHRs encourage users to enter personal health information not available from claims, such as height and weight, smoking status, allergies, over-the-counter medications, and herbal supplements. Patients may be able to enter information directly into the PHR or through a health risk assessment that is integrated into the system.

Links to educational resources may be provided with the PHR so that the patient can access general information about a range of health issues. Additionally, patients may be able share portions of their PHR with their physicians or print out sections to bring with them to appointments.

Most PHRs stop there and are effectively static data repositories. An analytical, dynamic PHR takes this data-rich environment to the next level by actively driving patient activity, access and interaction between physician and patient.

Analytical Interactivity is the Key

PHR technology exists today that provides real-time clinical analysis and two-way, interactive exchange of data. An analytical, interactive PHR can help improve healthcare quality and lower costs by communicating individualized, timely information to both patients and their physicians.

Dynamic PHRs integrate, in real-time, clinical decision support technologies that compare thousands of medical rules representing incontrovertible standards of care. This allows for discrepancies to be highlighted between the care a patient is actually receiving as reflected in their claims history, and the care they should be receiving as reflected in the evidence-based literature.

As new data is received, either from claims or from the patient, it is automatically added to existing patient data and analyzed for targeted and actionable opportunities to improve care. When an issue is identified, the user receives an alert in the PHR, which they are directed to through email notification. In addition, the issue is communicated to the treating physician.

By sending clinical alerts to both the patient and the physician, both parties are provided with the information they need to make informed decisions and to collaborate intelligently and productively.

For example, if a patient uses his or her PHR and enters that he or she is taking acetaminophen, the system can immediately tell the patient that the over-the-counter drug, in the context of abnormal liver function test, is not recommended. Other examples of alerts include potential misdiagnoses, potential adverse drug interactions, absence of therapeutically beneficial drugs, missing lab tests, and reminders for preventive exams, such as mammograms and colonoscopies.

An analytical PHR can be made even more powerful when integrated with disease management programs or regional health information organizations. Both offer abundant data to power a real-time decision support system and, therefore, make the PHR even more robust.

By leveraging clinical intelligence and data analytics, the newest generation of PHRs can serve as a true foundation for consumer-directed healthcare and help achieve the goals of improved care, lowered costs and empowered consumers. CDHC

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