Personal Health Record: SWOT Analysis

HIMSS Personal Health Record Committee
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Agenda

• Introduction

• SWOT Analysis: Common Themes
  - Providers (in this presentation)
  - Patients (to be added at a later date)
  - Payers (to be added at a later date)
  - Employers (in this presentation)
  - Vendors (to be added at a later date)
  - Pharmaceutical Companies (to be added at a later date)
Introduction
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The HIMSS Personal Health Record (PHR) Committee is currently conducting a SWOT Analysis of the various Constituencies who may either sponsor or use a PHR.

This presentation contains the common themes identified for each of those Constituencies.
Common Themes
Common Themes: Providers

Strengths

- Vehicle for Patient Communications
- Market Perception: Modern / Efficient / Marketing opportunity
  - Patient’s Perception that Provider is Patient Focused as a result of PHR use / availability
  - Younger population ‘expects’ connection to Health Provider and older population has a growing interest / preference
  - Regionalized strength (certain geographies have greater PHR penetration than others)
- Value Add Technology for Promoting Wellness and Population Management
- Understand preferences of patient’s needs and goals
- Personalized education or assessments to help patients manage disease
- Assist to shift Physician focus of care
- Create a consistent manner in which patient interacts with health delivery system
- Provider can drive integration of PHR to EMR (interoperability)
- Complement clinical data collected by Provider
- Shifts emphasis of care to patient / Encourage self-management
  - Manage chronic care conditions including children
- Build relationships with patients
  - Know patient’s needs and goals to ensure a good fit with PHR
  - Honor patient’s choice (e.g. part of lifetime process)
  - Survivorship plans (specific to cancer survivors)
  - Fills a gap in the coordination of care
- Potential to enhance quality of care by providing access to information to patients
- Access to information
  - Identify preferences for preventative or end of life care
  - Link to Provider Performance
  - Information can guide institution providing PHR to patient population
  - Track patient preferences / clicks
  - Measure quality and share with providers and patients
- Fill gap related to Coordination of Care
Common Themes: Providers

Weaknesses

• Lack of capital to invest in unproven technology
• Low rate of adoption
• No current payment incentives for Physicians to interact with data collected in PHR
• Lack of portability should a patient relocate or choose to leave the circle of care
• Patients may not be tech-savvy and choose not to participate in PHR
• No RHIO approach that might encompass PHR
• InterOperability and Standards still not clear
• Lack of compatibility with EMRs in place
• If retained by provider, other providers may be unable to access (i.e. Data sharing across provider organizations)
• No consistent vocabulary used by patients entering PHR information
• ROI difficult to assess / calculate
• Costs, general (Long-term) are high
• Patient oriented Help Desk is expensive
• Given extensive number of products, it is difficult to determine best fit for patient population
• No payment incentives available today for Providers
• If several PHRs in use in a given geography, it may cause issues for Provider requiring multiple log-on’s/passwords
• New and sustained business processes will be required yet are not always well planned in advance of deployment
**Common Themes: Providers**

**Opportunities**

- Increased opportunity to market special programs for patients / Market share
- Verify patient and insurance information prior to visit
- Ability to target certain types of patients
- Provide feedback to patients on their care
- Improve patient satisfaction
- On-going increase in amount of patient information sought electronically for health care and wellness
- Leverage PHR as central hub to exchange patient data across several physicians
- Identify patient trends
- Strengthen patient relationship via PHR
- Competitive differentiator
- Aide in developing new patient care models
- Marketing tool for engaging employers
- **Track quality measures (potential reimbursement implications related to performance)**
Common Themes: Providers

Threats

- Potential for hacking or other security breaches
- Current economic environment may cause direct impact on funding projects like an EMR (e.g. Medicare, other carriers)
- Priority may be EMR over PHR
- On-going training issues as patient may move in and out of the Provider network
- Potential frustration for provider if PHR not clearly defined in terms of patient obligations
- Security will always remain at the forefront for potential threats to undermine PHR
- External competition (outside of other provider organizations; e.g. Google, etc.) may impact investment, adoption or on-going efforts for PHR
- Provider strategy may be in direct competition of those of external sources or patient seeking own version of the PHR
- Industry information or misinformation may influence provider executives for or against investment for PHR
- Access to long-term funding to support PHR
- Competition for on-going provider resources to support PHR short-term and long-term
- Low adoption level for PHR (3-5%)
Common Themes: Employers

Strengths

• Employees: Facilitate more informed decisions for health and wellness
• Employees: Help decrease cost of healthcare
• Employers: Shift more financial opportunity to employee / Reduce cost of healthcare
• Employers: PHR implementation can be phased and incremental
• Employers: Potential industry pressure to address PHR
• Employers: Promote engagement of employee and their families through use of PHR
• Employers: Can influence adoption by a larger pool of people
Common Themes: Employers

Weaknesses

- Employees: Most are ill-informed of value PHR can provide
- Employees: Adoption rate may be slow (no incentive to participate or perceived value)
- Employees: Requires behavioral change to participate on a regular basis
- Employers: Assumption that employees will adopt tool and influence their behavior
- PHR vendors have little to no experience with large scale implementations
- Employers: Limited to no experience deploying a PHR
- Employers: ROI may take some time to realize
Common Themes: Employers

Opportunities

• Promote education and information to reduce resistance to change
• Employers: Introduce a value-add benefit to employees
• Employers: Create incentives for employees to participate
• Employers: Encourage employees to take more ownership of managing personal health and that of their families
• Employers: Market pressure may influence PHR vendors to seek long-term relationships with an employee and incentivize the relationship
• Employers: PHR may be used as a recruitment tool; establish position as trend setter
• Employers:
Common Themes: Employers

Threats

- Employees: PHR may be viewed as a deselection process by employer
- Employers: Implementation and on-going upkeep of PHR may be more effort than anticipated or desired
- Security and confidentiality concerns may plague both employees as well as employers
- Employers: Communication to employees will need to be timely and accurate to encourage interest and usage
- Complexity or lack of user friendliness could limit user engagement and/or interest
- Employers: Expense to implement may exceed expected ROI
- Employers: Management changes might impact or influence longevity of a PHR initiative
- Industry adoption levels and long-term product / financial viability may directly impact usage
- Mis-aligned expectations of employers and employees might derail PHR project
- No proven results or documented success to date