



# Successful Patient Engagement: What You Do Makes a Difference

Why should practice leaders want to focus on better engaging their patients?

The answer is clear – the future success of their organization depends on it.

When examining the change occurring in healthcare delivery systems, practice leaders see the evolution from a strict, fee-for-service payment process to a process of shared risk for the cost of services and patient outcomes redefining how they deliver care. This shift away from fee-for-service is regularly attributed to the widespread acceptance of the healthcare Triple Aim:

- Improve the health of a population,
- Improve the patient experience of care, and
- Reduce the per capita cost of healthcare.<sup>1</sup>

Prior to the development of the Triple Aim in 2008, an earlier report proposed to redesign the U.S. health system. In March 2001, the Institute of Medicine published *Crossing the Quality Chasm: A New Health System for the 21st Century*, providing

a model for the delivery of care with focus on six specific aims that healthcare should be: safe, effective, patient-centered, timely, efficient and equitable.<sup>2</sup>

With the prospect that payers will adjust payment methodologies to meet the goals of the Triple Aim and the Institute of Medicine's recommendations, a practice needs to evaluate its relationship with patients and how it delivers services. Many organizations attribute success to a shift in how staff and providers collaborate with patients. They find that patients who are actively involved in their healthcare have better health outcomes and incur lower costs than patients who are disengaged in their care.

As insurers begin to base payment on patient outcomes and share the cost of care risk with healthcare providers and organizations, financial success may not be the result of provider productivity and low overhead. When patients and their care givers understand their conditions and are directly involved in their care, realizing true patient engagement, providers and their medical groups will thrive.

In a study published in the journal Health Affairs, researchers documented that patients who were highly engaged in their care had overall medical costs that were 5.3 percent lower than for those receiving a usual level of support. These patients also had 12.5 percent fewer hospital admissions and 20.9 percent fewer preference-sensitive heart surgeries.

The same study found that patients who were least engaged in their healthcare had costs 21 percent higher than patients who were the most involved in their healthcare decisions.<sup>3</sup>

Patient actions that result from a medical visit can be considered along a continuum. Points along this continuum, from least to most engaged, include:

- Non-adherent: The patient either chooses to ignore the care instructions or is unable to make lifestyle changes required by their treatment plan.
- Passive: The patient changes behavior at times, when the change is convenient or otherwise requires little effort or thought.
- Adherent: The patient changes behavior relatively more frequently offering consistent effort.
- Engaged: The patient changes behavior optimally for the purpose of attaining a prioritized health or life goal.

Examining the effects of non-adherence on patient care, and the medical practice, it is obvious that engaging patients in their care improves outcomes and improves care efficiency. For example, engaged patients are more likely to fill prescriptions, take their medications as instructed and receive the full therapeutic benefit of the medications. Overall, between 20 and 30 percent of prescriptions are never filled. Barriers to prescription filling include the out-of-pocket cost of the medication, doubt about the need for the prescribed drugs, and problems accessing a pharmacy.<sup>4</sup> Some patient segments are at higher risk for non-adherence.

Men are recognized as less likely to follow a medical treatment plan than women, and single men are less likely to follow a medical treatment plan than married men.<sup>5</sup>

As level of education increases, patients are more likely to understand care explanations and instructions, yet at the individual level, health literacy and the lack of understanding has a significant impact upon care engagement across all patient segments. Complexity of medication and treatment plans increases the risk for lack of understanding, lack of adherence, and lack of engagement. All of which can negatively impact patient-centered healthcare outcomes. Recognizing that patient-centered outcomes are dependent upon optimal patient engagement, how can a practice be positioned to succeed?

Achieving patient engagement involves more than patient education, good communication or full medical record access for patients. It requires a practice to change its culture from being provider or staff centered to being patient centered. It needs to become a place where patients have improved access to care, and where the care team:

- understands a patient's life priorities and goals;
- collaborates with patients as equal partners in the design of their treatment plans to ensure patient-centered goals are achieved;
- provides education and tools to manage healthcare needs;
- measures success toward meeting patient-centered goals adjusting as necessary and when appropriate.



Patient engagement requires collaboration as equal partners with patients and their family members across the care continuum. For patients and caregivers that actively participate in their healthcare, it involves support and encouragement from care teams.

Additionally, the application of digital technologies can facilitate and improve patient engagement.

Some of these technologies include:

- Electronic health records (EHR) have features that can improve communications, educate patients about their health status, and provide a platform for shared decision making. The visual display of patient data reinforces the physician's message, and helps patients comprehend their health status. EHR features such as patient health history, BMI graphs, longitudinal charts of laboratory test results, and radiology images can be used as the basis for improved patient communications by simply displaying the information during the patient visit. Visual information better communicates complex messages and can be the basis for physicians and patients to review alternative treatment options and reach a shared decision on the best course of care.
- Patient portals provide a secure communication tool allowing patients to view laboratory tests, request prescription refills, ask questions of their providers, schedule appointments and obtain educational materials. A patient portal can help patients be more involved in their care and since the portal is available 24 /7, patients access the information when it is most convenient while significantly reducing the time practice staff and physicians spend on the telephone.
- Self-management applications that patients load to their smartphones and tablets support patient engagement through the apps' specialized functions. Different apps enable patients to interface with a patient portal, monitor patient medication compliance, and provide the secure transmission of biotelemetry information. The simplest applications are simply text messages to remind a patient regarding an upcoming appointment or when to take medications. More complex apps record patient biological data and provide automated interface with an EHR, or using patient data to provide a self-management plan to help the patient improve their condition.

- Telemedicine allows patients to directly access medical advice with minimal cost or inconvenience. Practices that provide a telemedicine option for their patients enhance engagement and improve care delivery by aligning the patient's desire for access with a scheduling option for the provider that meets both needs while delivering an appropriate level of care.

As practices, physicians, and patients become more comfortable with the integration of technology in medical practice the opportunity for patient engagement will continue to improve. Optimal patient-centered integration of technology will be a critical step.

As healthcare delivery evolves, the need for improving patient engagement becomes clear. In 2012, Leonard Kish, Chief Executive Officer, YouBase, a health data exchange company, declared an engaged patient as "The blockbuster drug of the century."<sup>6</sup> Perhaps nothing further needs to be said.

#### References:

1. Donald M. Berwick, Thomas W. Nolan and John Whittington, "The Triple Aim: Care, Health, And Cost," *Health Affairs* 27, no.3 (2008):759-769
2. Institute of Medicine, *Crossing The Quality Chasm: A New Health System For The 21st Century*, National Academy Press, 2001
3. Judith H. Hibbard, Jessica Greene, and Valerie Overton, "Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients Scores," *Health Affairs* 32, no. 2 (2013): 216–22.
4. Fischer MA, Stedman MR, Lii J, et al. "Primary medication non-adherence: analysis of 195,930 electronic prescriptions," *J Gen Intern Med.* 25 no. 4 (2010): 284–90.
5. Carol Vlassoff, "Gender Differences in Determinants and Consequences of Health and Illness," *Journal of Health, Population and Nutrition* 25, No 1 (2007): 47–61.
6. Leonard Kish. "The Blockbuster Drug of the Century: An Engaged Patient," *Health Standards*, August 28, 2012, <http://healthstandards.com/blog/2012/08/28/drug-of-the-century/>

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