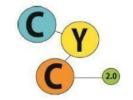


August 28, 2015
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- 2. Connect Your Community 2.0







Background

- Personal Health Records (PHRs) may increase the quality and efficiency of health care.
- More patient portal users with diabetes achieved A₁C < 7 than non portal users with diabetes (Lau et al 2013).
- Federal financial incentives have led to increased adoption and use of PHRs.
- Little is known about PHR use in vulnerable and disadvantaged populations.
- Differences in the uptake and use of PHRs could increase or exacerbate health disparities.

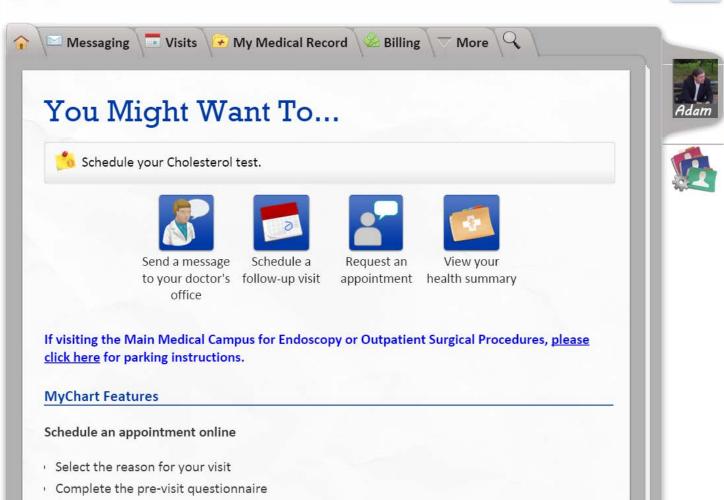




Personal Health Record Example



Welcome,
Adam Perzynski
Log Out







Broadband Inequality

- Access to broadband internet is a potential social determinant of health.
- According to the 2013 American Community Survey, individuals with lower incomes are less likely to have access to broadband internet in their homes.
- 39% of Cleveland residents have *no computer* and *no internet*.





Objectives

- 1. To examine differences in uptake and use of PHRs according to sex, race/ethnicity, age, insurance status, and disability.
- 2. To examine whether uptake of PHRs differs by neighborhood broadband internet access.





Methods

- All patients seen for one or more office visits in a MHMC outpatient clinic from Jan 2012 to May 2015.
- Demographics abstracted from the EHR.
- Census tract of residence obtained by geocoding each address
- Broadband availability (>=3 Mbps) at the census tract level determined using data from FCC form 477.
- Uptake of PHR defined as first logon to MyChart (the Epic PHR).





Methods

- PHR logs queried to determine the percentage within each social and demographic category who used PHR functions including:
 - Appointment Requests
 - Viewing lab results
 - Requesting advice
 - Reading messages
 - Checking allergies
- Percentages were compared across demographic groups to determine the extent of differences in use.





Results

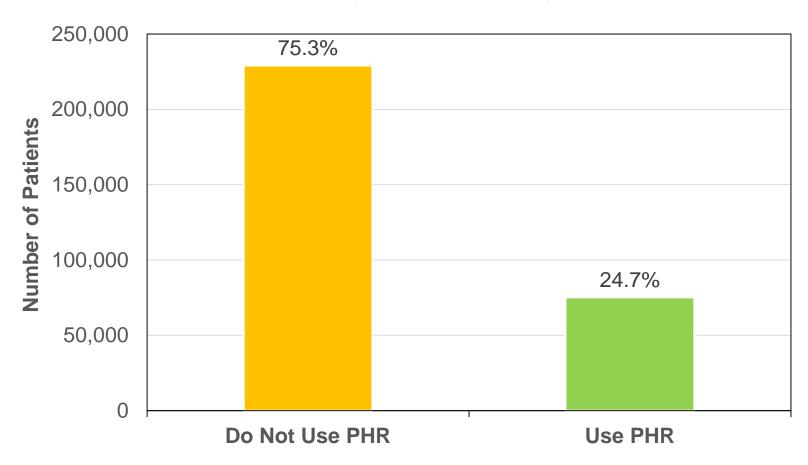
- 304,142 patients with at least one outpatient office visit during 2012 – 2015.
- Median age: 36.3; 56% women
- Race/Ethnicity: 48.3% white, 38.5% black,
 6.4% Hispanic, and 6.8% other / unknown
- Insurance status: 47.4% Medicaid, 11.9% Medicare, 30.3% commercial, and 10.5% uninsured.





Results

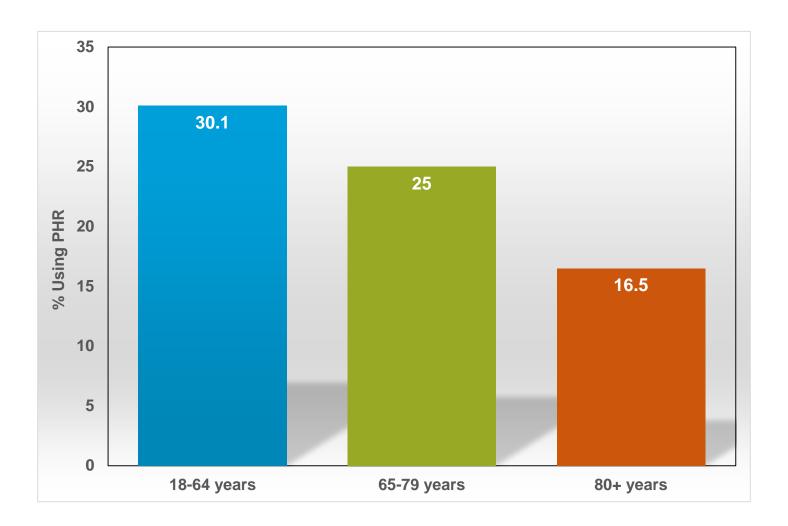
Overall PHR Use







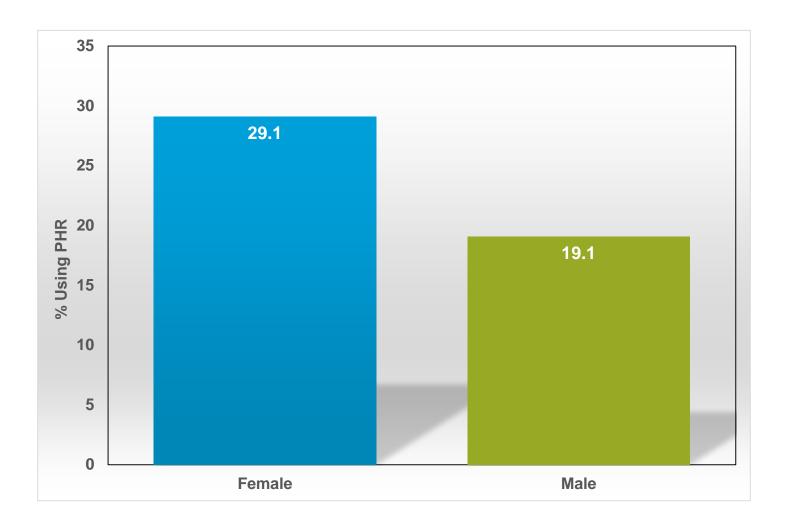
PHR Use by Age







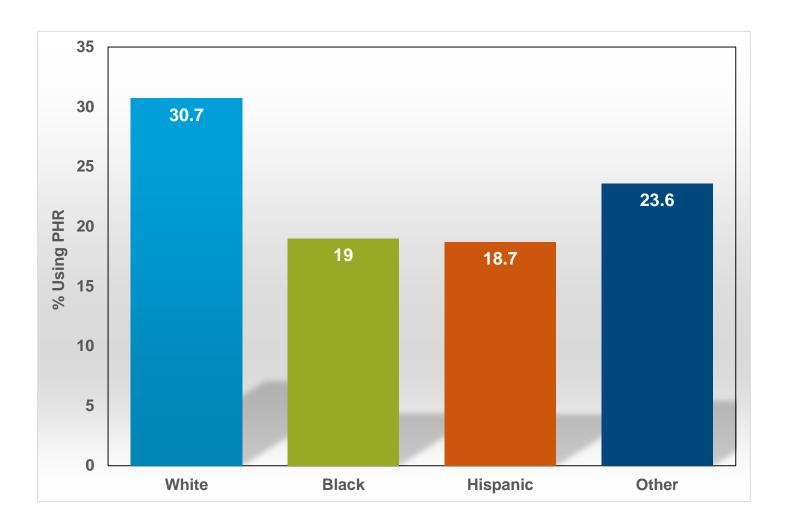
PHR Use by Gender







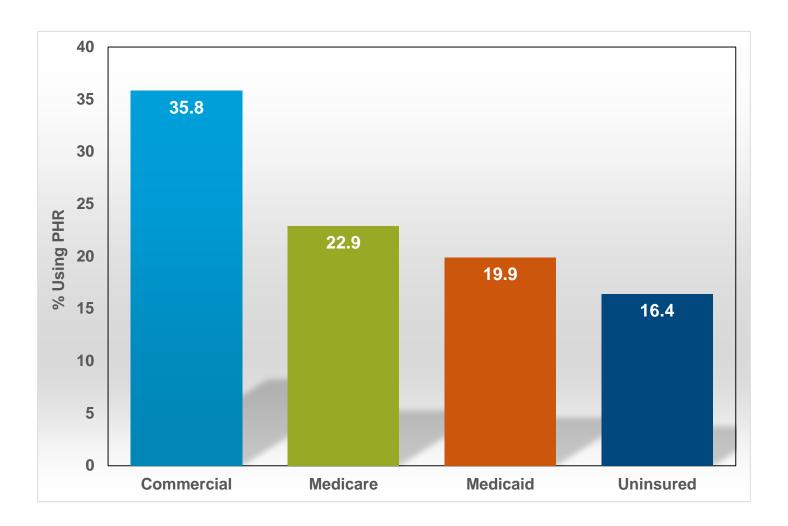
PHR Use by Ethnicity







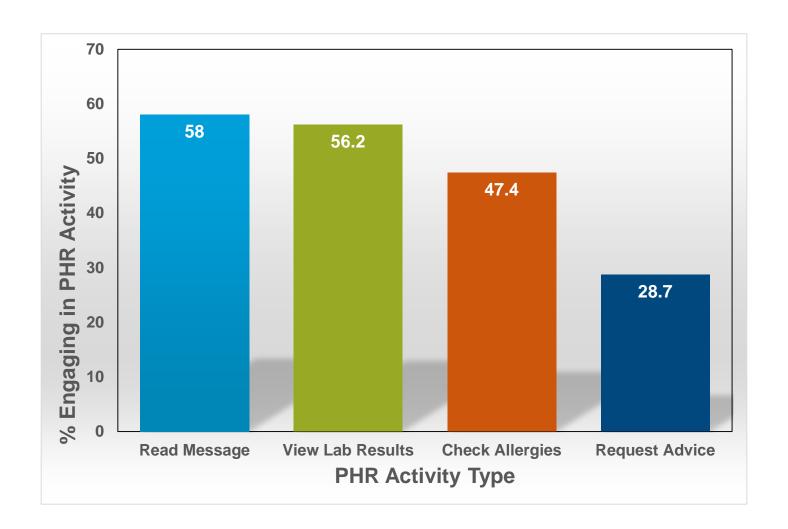
PHR Use by Insurance







Common PHR Uses







PHR Use by Demographic Group

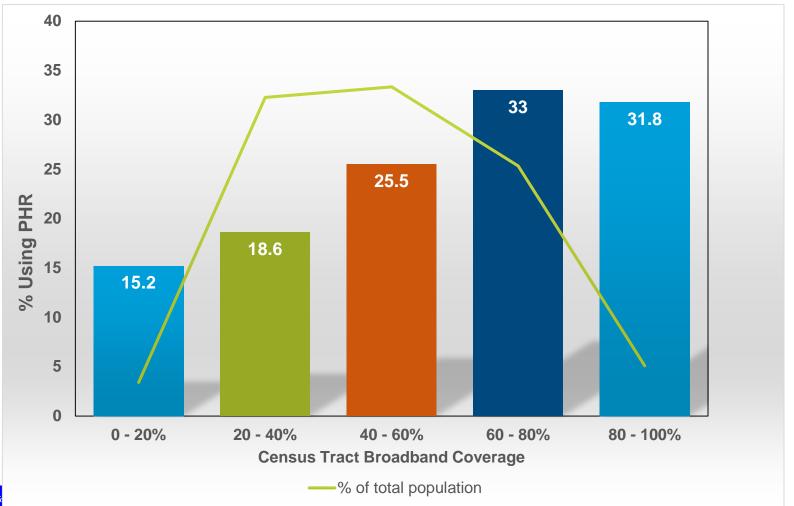
Among PHR Users:

- Males, racial and ethnic minorities, patients age 80+, and Medicaid and uninsured patients had lower levels of use across all categories.
- Disabled patients had higher levels of use across all categories than non-disabled patients.





PHR Use by Broadband Access







Summary

- Only one-quarter of patients have used the PHR.
- Enrollment <u>and</u> use are systematically lower for minorities, older adults and persons of low socioeconomic status.
- Enrollment and use are higher for disabled persons.
- Enrollment is lower for patients in neighborhoods with less broadband access.





