

# Increasing Military Patient Use of Secure Messaging

*Provider encouragement and on-the-spot assistance increased patient registrations for secure messaging*

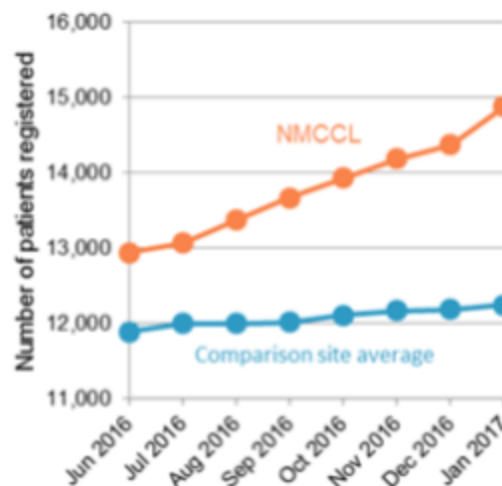
**Agency Objective** Increase the rate at which patients register for and use secure messaging to communicate with their healthcare providers.

**Background** Military treatment facilities (MTFs) provide secure online messaging to allow patients to send questions to their providers, get lab results, and renew prescriptions. However, only 47% of MTF enrollees are registered in the secure messaging system, and only 6% utilize it, as of April 2017 – leaving about 1.8 million patients who do not currently have access to use this benefit.<sup>1</sup> Research suggests that individuals may not enroll because of lack of information, lack of motivation, and negative attitudes toward the system.<sup>2,3</sup>

**Program Change** The Office of Evaluation Sciences (OES) collaborated with the Defense Health Agency's (DHA) Patient Centered Medical Home (PCMH) Office and the Family Medicine Clinic at Naval Medical Center Camp Lejeune (NMCCCL) to design an intervention added to family medicine appointments. The intervention consisted of providers making a personal appeal to register in the secure messaging system during a patient's visit, on-site staff assistance in signing patients up, and staff providing a checkout sheet to patients with instructions for registering later.<sup>4</sup>

**Evaluation Methods** Providers and staff at the NMCCCL Family Medicine Clinic implemented the intervention for six and a half months, from mid-July 2016 through January 2017. OES, in collaboration with DHA and NMCCCL, evaluated the impact of this intervention by comparing patient registration for secure messaging at the NMCCCL Family Medicine Clinic with family medicine clinics at seven other demographically similar MTFs selected by DHA.

**Results** At the NMCCCL Family Medicine Clinic, the number of patients registered for secure messaging rose by 15.0% between the month prior and the final month of the trial. By contrast, at the seven comparison sites, the average number of patients registered for secure messaging rose just 3.0%.



We estimate that the intervention was associated with an additional 224 patients registering in the secure messaging system per month, compared to a background growth in registrations of 48 per month across all of the sites. This constituted a greater than five-fold increase in the rate at which

<sup>1</sup> RelayHealth secure messaging data and MTF enrollment data from the MHS Mart (M2) data system.

<sup>2</sup> MS Goel, TL Brown, A Williams, AJ Cooper, R Hasnain-Wynia, DW Baker. "Patient reported barriers to enrolling in a patient portal," *Journal of the American Medical Informatics Association* Dec 2011, 18 (Supplement 1) i8-i12.

<sup>3</sup> MS Mitchell, GE Faulkner. "On Supplementing 'Foot in the Door' Incentives for eHealth Program Engagement," *J Med Internet Res* 2014;16(7):e179.

<sup>4</sup> Patients of roughly half of the providers also received a follow-up email about registering for secure messaging – a secondary intervention that we will report on separately.

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registrations grew.<sup>5</sup>

**Conclusion** For more than half of MTF enrollees, the benefits of registering for secure messaging to communicate with providers and staff remain untapped. A simple intervention involving provider encouragement and staff assistance was associated with a large increase in the rate at which patients registered for this benefit. Although this result comes from a nonrandomized evaluation and further investigation could yield more precise evidence of causal impact, it suggests the potential for similar interventions in other clinics and at other treatment facilities across the MHS.

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<sup>5</sup> We are unable to present a test of the statistical reliability of this result due to limitations on our ability to link data on SM registrants and MHS beneficiaries. We present this large difference between trends at the test and comparison sites as an indicator of potential impact and as a result that merits further investigation.