Epic**Together**

Guide to Open Notes and Results Release

Updated May 11, 2021 | For questions, please contact informationblocking@nyp.org







EXECUTIVE SUMMARY

- 1. Open Notes and Results Release refer to the automatic release of clinical notes and results to patients and their proxies via the Connect Patient Portal, unless a clinician prevents the release due to allowable exceptions to prevent physical harm or protect patient privacy. The goal is to improve patient engagement and access to their electronic health information by preventing health information blocking.
- 2. <u>ALL</u> notes authored by any ED, Inpatient and Outpatient user will be automatically released once they are signed/finalized, <u>EXCEPT</u> for those authored under the following services:
 - Psychiatry
 - Toxicology
 - Social Work, Case Management, Care Coordination
 - Child Life and Creative Arts Therapy
 - Psychosocial Rehab
 - Spiritual Care
- 3. Starting May 17th, all results and notes set to be automatically released to the Connect patient portal will be <u>released</u> <u>immediately</u> when finalized/signed to meet updated federal requirements to prevent info-blocking.
- 4. Clinicians can manually prevent the release of some notes and results to honor allowable exceptions to prevent physical harm to the patient or others, protect patient privacy, or upon patient request. Clinicians preventing note release should document the reason. Exceptions should be few, and most notes should be released.
- 5. Please be advised that there are plans to release notes for pediatric patients (age 0-18 years old) at a future date.







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Introduction

What is Open Notes and Results Release?







What is Information Blocking?

- <u>Information blocking</u> is a practice that a healthcare provider or organization knows or should know is likely to **interfere** with a patient, proxy, or other authorized third-party's access, exchange, or use of electronic health information. **Interfere** means to delay, prevent, or discharge a person's ability to access medical records.
- In 2016, a piece of federal legislation called the **21st Century Cures Act** was passed that **prohibits information blocking**, with the goal of minimizing barriers for releasing electronic health data to patients.
- The <u>Final Rule</u> for implementation of this legislation was released in 2020, which requires medical institutions across the US to electronically release notes and results to patients without delay.

To comply with recent federal legislation to prevent information blocking, the New York Consortium has implemented two major changes to our electronic health systems in 2021 called <u>Open Notes</u> and <u>Results Release</u>.







What is Open Notes and Results Release?

Open Notes and Results Release refer to the <u>automatic and immediate release</u> of electronic notes and results to patients and their proxies via the Connect Patient Portal, unless a clinician prevents the release to honor allowable exceptions to prevent harm or protect patient privacy.

- This means that patients will be able to view finalized electronic notes and results in near realtime using the Connect patient portal while they are under evaluation. Previously, most results were released electronically to patients within 2-3 days, and most notes were released upon request from the medical records office.
- Patients may also see their finalized notes and results before their healthcare team. While this is powerful, there may be communication pitfalls since patients may not have the medical knowledge to interpret the information.
- It is therefore critical for clinicians to educate themselves regarding which notes and results are automatically released, inform patients that they may see their notes and results before the healthcare team, and know how to respond to patient requests and queries.







Why are we doing this?

The goal of Open Notes is to improve information transparency, empower patients to engage in their care, and improve communication between patients and their care team.

• Patients have long had a legal right to access their entire medical record. However, the process of obtaining this record can be opaque and difficult to navigate. The 21st Century Cures Act seeks to empower patients by making access to electronic health information simple and instantaneous.

Specific goals include:

- Increasing patient understanding and involvement in decisions
- Improving care coordination and reducing costs
- Identifying and fixing errors in the record
- Improving patient safety and quality
- Peer-reviewed literature shows that offering patients ready access to notes and results can improve care across multiple domains, especially for vulnerable populations. Institutions that have already adopted this practice report greater patient satisfaction with minimal impact on clinical workflows.







How are we implementing this change?

1. Creation of the Open Notes & Results Release Workgroup

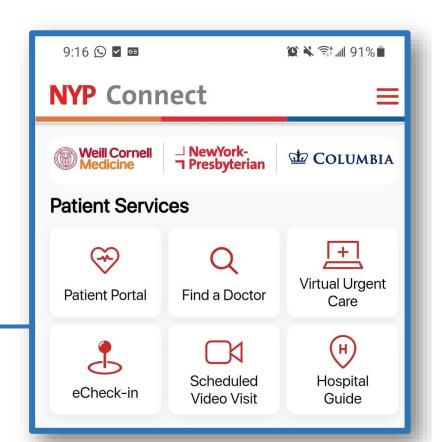
- Tripartite workgroup established with close clinician input and feedback to ensure that we follow federal and state regulatory requirements while continuing to safeguard patient safety and privacy.
- ED, Inpatient and Ambulatory/Surg are covered under the same umbrella.

2. Updates to our Electronic Health Records (EHRs)

 Epic and our legacy EHRs have been updated with new features to enable most notes and results to be shared automatically with patients and their proxies. Clinicians can also prevent the release of some notes and results under allowable exceptions to prevent harm or protect patient privacy.

3. Updates to the Connect Patient Portal

- The **Connect Patient Portal** is the main method for patients to access their health data, including medical problems, medications, allergies, immunizations, care plan, lab and radiology results, etc.
- This portal has been updated with information for patients about what to expect under Open Notes and Results Release.









Impact on Clinicians

How does Open Notes & Results Release impact my clinical practice?







How do clinicians around the country feel about Open Notes?



- 74% of 6064 clinicians surveyed nationally agree sharing notes with patients is a good idea.
- **61%** would recommend note sharing to other clinicians.
- 26% reported a patient found an error that the doctor considered clinically important.
- 63% reported no change in the amount of time spent on notes.







Which notes are released to patients?

Most ED, Inpatient and Outpatient notes that are

SIGNED

will be automatically released to the patient and their proxies via Connect after the note is signed.

Most ED, Inpatient and Outpatient notes that are

SHARED,
PENDED,
OR AWAITING COSIGN BY ATTENDING

will <u>not</u> be automatically released until Signed.

Notes that require Cosign will be released

after the note is Cosigned.

What exactly do you mean by "note"?

"Notes" refer to pieces of electronic documentation authored and filed in the electronic medical record by an ED, Inpatient or Outpatient user. Examples include Provider Notes, Progress Notes, or Consult Notes. "Notes" do not include Secure Chat messages, In-Basket notifications, flowsheet documentation, or the After Visit Summary. Some sensitive notes authored by users are excluded from Open Notes, such as the SAFE Note. For a full list of exceptions, see this slide.







Which notes are not released to patients?

In New York State, there are 3 common allowable reasons to prevent the release of a note:

TO PREVENT PHYSICAL HARM

A clinician can prevent the release of a note or result if they believe that viewing the note may cause substantial **physical harm** to the patient, staff, or others. Causing mental or emotional harm alone is **NOT** an allowable reason to block release.

2 TO PROTECT PATIENT PRIVACY

A direct request from the patient to prevent the release of a note or result to Connect is allowable under this exception. Information compiled in a note for use in civil, criminal or administrative actions or proceedings also applies.

TO PROTECT PSYCHIATRIC INFO

In general, for notes containing psychiatric information, clinicians can make a good faith determination of whether there is risk of physical harm to patient or others if that note is released. Notes can be released if there is not significant risk of physical harm.





Which notes are not released to patients?

To honor the 3 common allowable reasons and exceptions, Epic will NOT automatically release the following:

Notes for Pts < 18 Years Old ———

These are not automatically released for now since they can contain sensitive adolescent info and maternal info (in newborn notes). In the near future, however, we expect to release more notes for patients <18 years old.

Behavioral Health (BH) Notes -

These can contain sensitive information regarding psychiatric conditions.

SAFE Notes ——

These contain sensitive info about sexual assault and therefore should not be released.

Notes Filed Under these Services

Toxicology
Psychiatry
Psychosocial Rehab
Case Management
Social Work

Spiritual Care
Child Life
Creative Arts Therapy
Therapeutic Recreation

Notes filed under these services can contain sensitive information regarding domestic, elder, and/or child abuse or psychiatric conditions, and are not automatically released because it is infeasible to mitigate potential harm or privacy risk at this time.







A WORD OF CAUTION

You should only prevent note release if the note falls under the 3 allowable reasons and exceptions. We recommend that <u>most</u> notes should be released to patients.

Blocking the release of notes without adequate justification can be considered information blocking, especially if notes are not released in a timely fashion when requested.

For clinicians in the service listed below, Epic functionality currently limits the ability to release notes while mitigating harm or privacy risk related to sensitive information. In future, we will provide options to manually release non-sensitive notes in these areas when appropriate.

Toxicology
Psychiatry
Psychosocial Rehab
Case Management
Social Work

Spiritual Care
Child Life
Creative Arts Therapy
Therapeutic Recreation



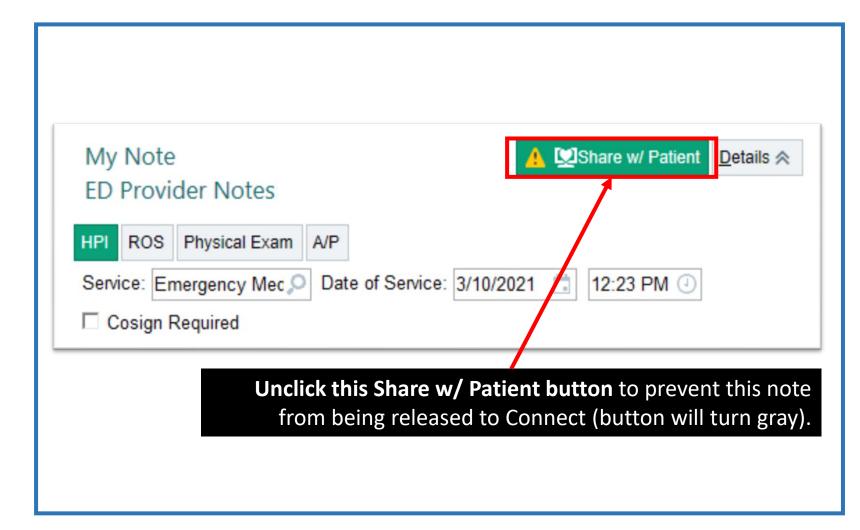




METHOD #1

FOR MOST USERS

The most common method to prevent note release is to unclick the Share w/ Patient button on the individual note.





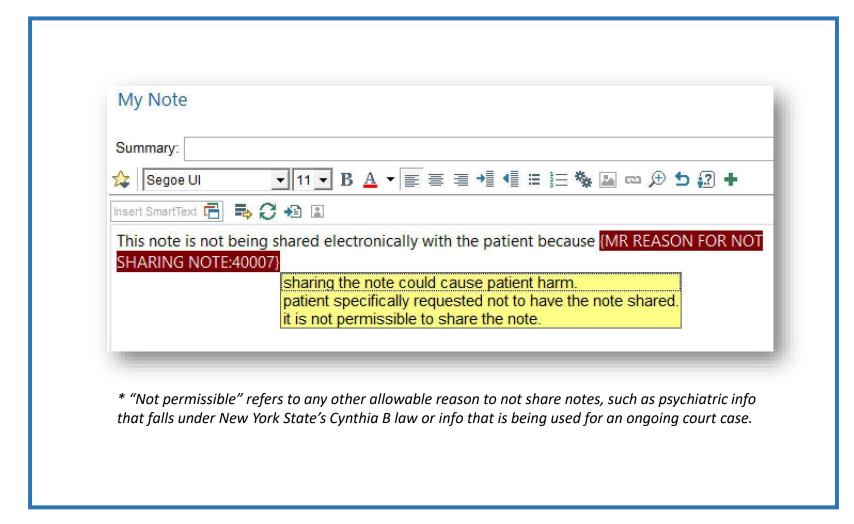




METHOD #1

FOR MOST USERS

You can use the Smartphrase .REASONFORNOTSHARING to document the specific reason that this note was not shared.







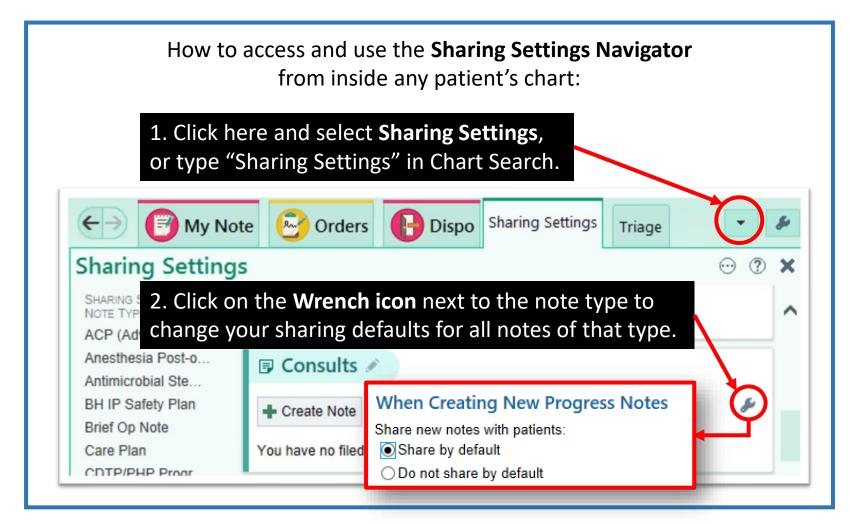


METHOD #2

FOR SPECIAL USERS

If you are a user from one of the services below, you can prevent the release of specific note *types* in addition to preventing the release of *individual* notes. This can be done by using the Sharing Settings Navigator.

Psychiatry
Toxicology
VEPT
Ethics







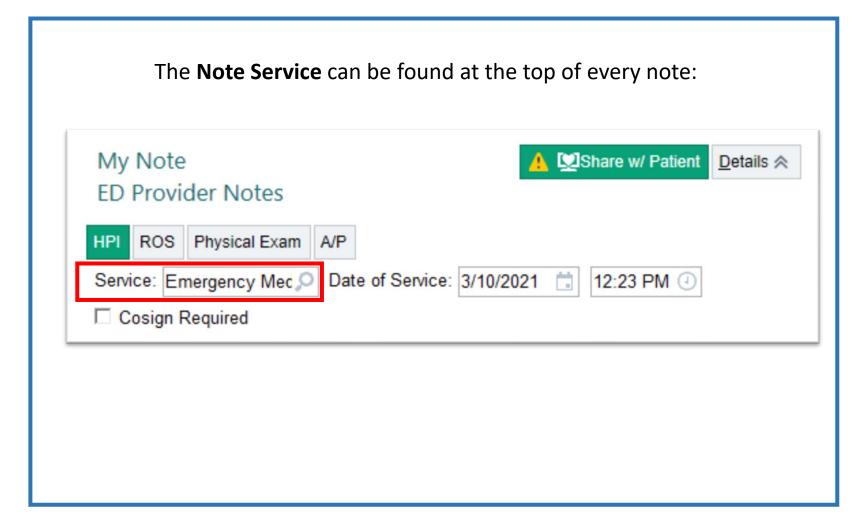


METHOD #3

FOR SPECIAL USERS

Users from the services below can also prevent note release by changing the Note Service on any individual note.

Toxicology
Psychiatry
Psychosocial Rehab
Case Management
Social Work
Spiritual Care
Child Life
Creative Arts Therapy
Therapeutic Recreation









Can you summarize which notes are not released?

We recommend that most notes be released to patients. Write all your notes as if the patient will read them.

NOT AUTOMATICALLY RELEASED

These notes are **NOT** automatically released by Epic at the Connect or Note level, meaning they will **NOT** be released to patients via NYP Connect **EVEN IF** the "Share w/ Patient" button is clicked on the patient's chart.

- 1. Notes for Pts < 18 Years Old
- 2. Behavioral Health (BH) Notes
- 3. SAFE Notes
- 4. Notes filed by these Services

Notes that are not released automatically can still be accessed by patients or proxies by completing an HIM Request Form (see slide 29). Toxicology
Psychiatry
Psychosocial Rehab
Spiritual Care
Case Management
Social Work
Child Life
Creative Arts Therapy

Therapeutic Rec.

PREVENTING NOTE RELEASE

Method 1: The most common method to prevent note release is to unclick the **Share** w/ Patient button on the individual note.

Method 2: We recommend that users from Psychiatry, Toxicology, Ethics and VEPT change their default note-sharing settings in the Sharing Settings Navigator to prevent the release of relevant note types.

Method 3: Users from these sensitive services can also prevent note release by changing the **Note Service** on individual notes to any of the services listed in this box.







How should I document under Open Notes?

1. Ensure accurate information.

2. Continue to document fully in medical terms, even though the patient will see your note.

- 3. Encourage patients to read the entire note.
- 4. Know how to address patients' requests to amend notes.

See this slide.

- Be sure that **medication reconciliation**, **problem lists**, **and allergies** are up to date before signing your note.
- **Beware of inaccurate templates and macros.** For instance, double check that your macro does not auto-populate a portion of the physical exam or review of systems that you did not perform.
- Continue to document probable, possible and suspected conditions.
- Continue to use clinical terminology. Unlike patient discharge instructions, it is not necessary to document at a 6th grade reading level.
- Avoid acronyms that could be misinterpreted by patients (e.g., "SOB").
- While Open Notes focuses on communicating with patients, the medical record must also clearly and accurately communicate clinical, legal, and billing information. The desire to improve communication with patients, while important, should not trump the other purposes of the medical record.

Discuss what you write and write what you discuss.







Which results are released to patients?

Which results are automatically released to Connect?

- Most lab results, pathology results, radiology reports and procedure reports across the ED, Inpatient and Outpatient settings are automatically released.
- Providers are encouraged to manually release results earlier if clinically appropriate or by request.

Which results are not automatically released to Connect?

- Some sensitive lab results that always require manual release to Connect include:
 - Genetic test results for all patients
 - HIV test results for all patients
 - STI test results for patients < 18 years old only RPR, VDRL and GC Tests (urine and swab)
 - Pregnancy test results for patients < 18 years old only Urine and Serum bHCG (not ultrasound results)

Can I prevent automatic release to Connect?

- Preventing the release of specific results is allowed to prevent patient harm or ensure patient privacy.
- The decision to prevent release should be made at the individual patient level.





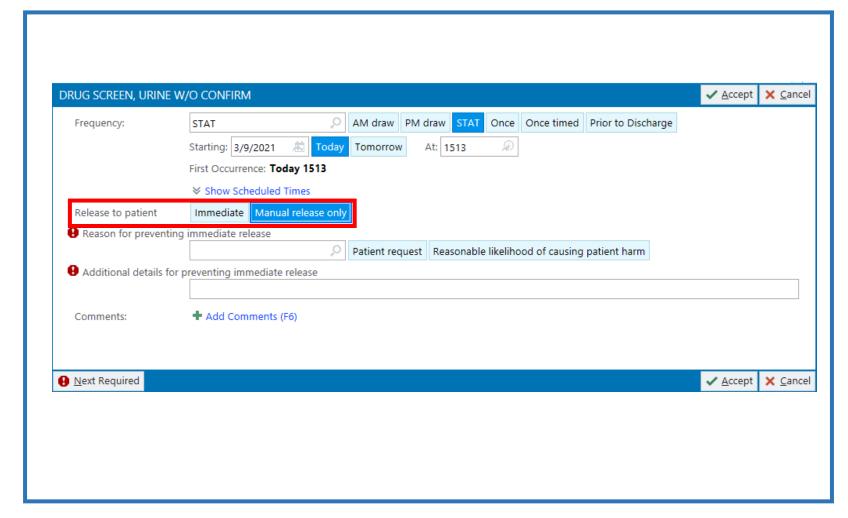


How do I prevent result release?

METHOD #1

WHILE ORDERING THE TEST

On the test order screen, click the Manual Release Only button to prevent the result being automatically released to the patient on Connect.









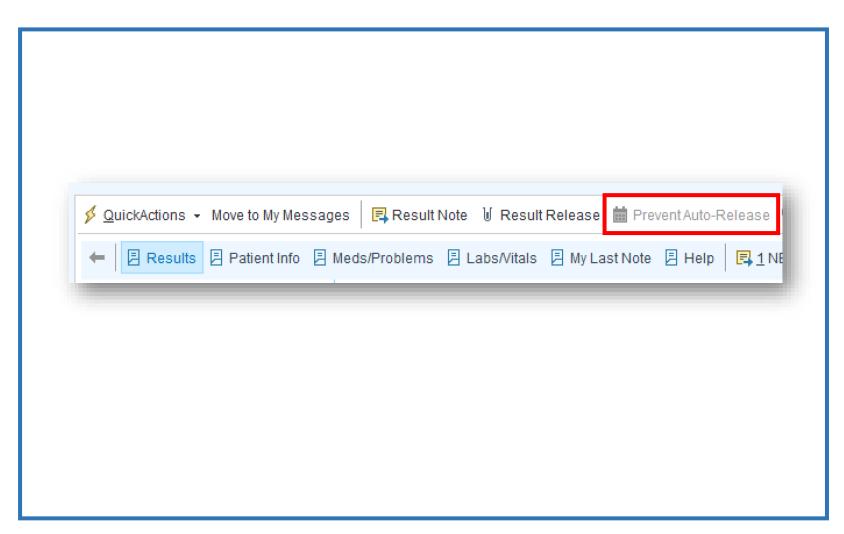
How do I prevent result release?

METHOD #2

AFTER ORDERING THE TEST (from the In-Basket or Results View)

On the menu bar, click the Prevent Auto-Release button to prevent the result being automatically released to the patient on Connect.

If the patient has already viewed the result on Connect, this button will be grayed out.









How should I communicate with patients about results?

1. Set expectations upfront.

- 2. Help patient set up a daily digest of results in Connect when appropriate.
- 2. Ask patients to review their proxy settings in Connect.
- 3. Know how to address patients' requests to access results.

See this slide.

- Whenever possible, let the patient know that they may see their results in the Connect portal before you or another member of the healthcare team has a chance to review them. Explain that this is to help the patient access their results as quickly as possible, without delay.
- Offer the patient contact information to reach you or a member of the healthcare team should they have any questions upon seeing their results.
- This may be a cleaner form of communication for interested patients who have multiple or daily tests. See this slide for instructions.
- Whenever possible, ask patients if they are comfortable with their proxies seeing their test results, and help them set their proxy settings in Connect accordingly. This is particularly important for pediatric and vulnerable populations regarding potentially sensitive test results.







Impact on Patients

What do patients see with Open Notes & Results Release?







How do patients around the country feel about Open Notes?

Annals of Internal Medicine

Original Research

Inviting Patients to Read Their Doctors' Notes: A Quasi-experimental Study and a Look Ahead

Tom Delbanco, MD*; Jan Walker, RN, MBA*; Sigall K. Bell, MD; Jonathan D. Darer, MD, MPH; Joann G. Elmore, MD, MPH; Nadine Farag, MS; Henry J. Feldman, MD; Roanne Mejilla, MPH; Long Ngo, PhD; James D. Ralston, MD, MPH; Stephen E. Ross, MD; Neha Trivedi, BS; Elisabeth Vodicka, BA; and Suzanne G. Leveille, PhD, RN

Delbanco, Walker, et al, Annals of Internal Medicine

Three out of four patients reported:

- Taking better care of themselves
- Understanding their health and medical conditions better
- Feeling more in control of their health and health care
- Being better prepared for visits
- Doing better with taking their medications as prescribed



Inviting patients and care partners to read doctors' notes: OpenNotes and shared access to electronic medical records

Jennifer L Wolff, ¹ Jonathan D Darer, ² Andrea Berger, ³ Deserae Clarke, ⁴ Jamie A Green, ³ Rebecca A Stametz, ⁴ Tom Delbanco, ⁵ and Jan Walker ⁵

Wolff, et al. <u>JAMIA</u>

- 88% of patients and 86% of caregivers had better formulated questions for the doctor.
- 86% of patients and 82% of caregivers had more productive discussions about the patient's care.
- **94%** of patients and their caregivers said they had a better understanding of health conditions, better remembered the care plan, and felt more in control.

Since 2017, more than 200,000 office visit notes have been shared with New York Consortium patients with similar feedback.







How will patients be educated about Open Notes?

The following message has been sent to CUIMC, NYP, and WCMC patients to inform them of Open Notes and Results Release.

Columbia, NewYork-Presbyterian, and Weill Cornell Medicine has added new information to your Connect Patient Portal account, as required by the 21st Century Cures Act. We are committed to delivering the highest-quality care to you – and getting your test results and other records to you as soon as they are ready. Here is a summary of what's now available on Connect and how to manage access to your records.

What's New?

In the "Test Results" section of Connect, you can now see test results and pathology and imaging exam reports as soon as they are available. You may see some reports before your provider, but rest assured that your care team will review them and let you know of any follow-up needs.

In the "Visits" section of Connect, you now can look for "View Notes" to see notes created by your care team after an in-person or virtual office visit. They may include medical terms and serve as a summary of your visit. Some terms may be complex, and your care team can clarify any questions about your care as needed

If you are a patient in the hospital, your care team will continue to give you updates on your care, and you may also see your care team's notes as they are written. You also can request test results and notes that are not displayed in Connect by clicking on "Request Medical Records."

Get the Connect App

Our Connect app (available in the <u>App Store</u> and <u>Google Play</u>) is more robust than ever, so you can stay in touch with your care team easily. It gives you the tools to schedule office appointments Virtual Visits, and Virtual Urgent Care, and to review records, and to pay bills. <u>Don't have a Connect account? Sign up</u> today.

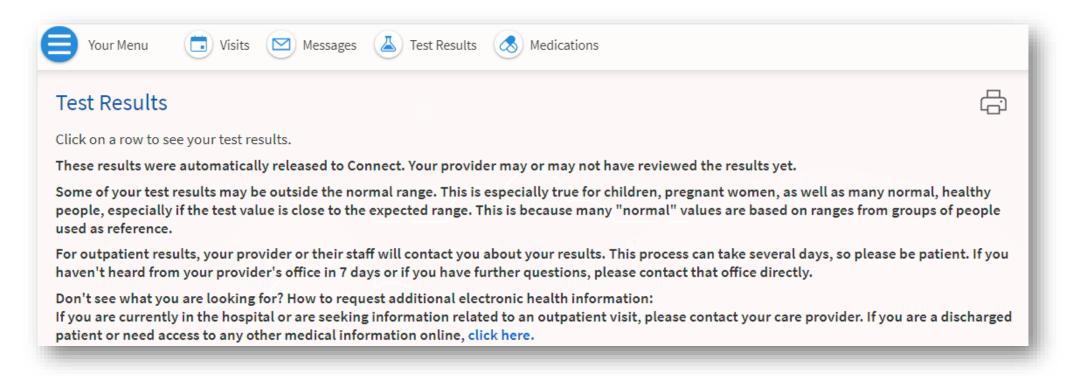






How will patients be educated about Results Release?

The language in Connect has been updated to address potential patient concerns. When patients open the "Test Results" page in Connect, they see this message:



Remember to also set expectations with patients upfront at the time of ordering!





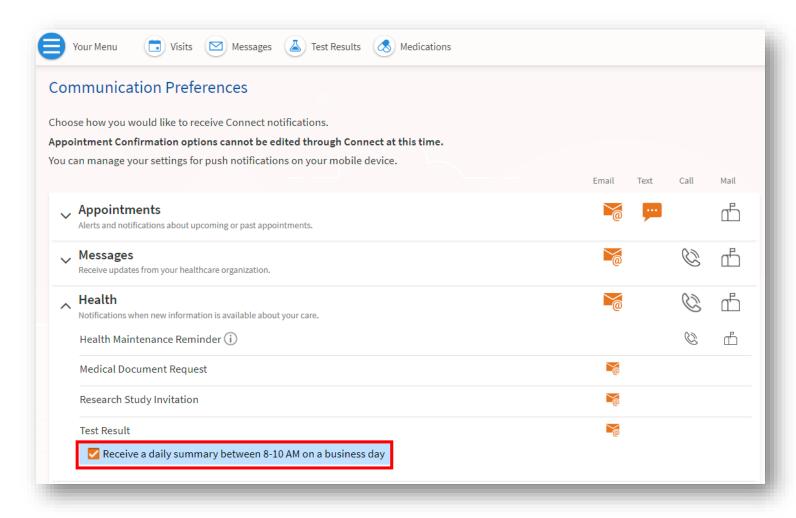


How can I help patients receive a daily digest of results?

You can also help patients change their Connect settings to receive a daily digest of results, which may be a cleaner form of communication for patients with multiple or daily tests.

PATIENT INSTRUCTIONS

- 1. Log into Connect.
- From your Menu, go to Communication Preferences.
- 3. Expand the Health option.
- 4. Under Test Result, click the checkbox called "receive a daily summary between 8-10 AM on a business day."









APPENDIX







Open Notes Case Example #1

CASE EXAMPLE

25 year old female presents with RUQ pain. Reports 3 days of RUQ pain, vomiting and fever. She also endorses having felt **depressed**. She feels safe at home and denies any DV. She used to take an antidepressant but ran out of her prescription months ago. She does not have a therapist.

RECOMMENDED BEST PRACTICE

Releasing this note to the patient via Connect would not cause substantial physical harm and there are no privacy issues. Therefore, it should still be released.







Open Notes Case Example #2

CASE EXAMPLE

25 year old female with history of schizophrenia and multiple psychiatric admissions presents with RUQ pain. Reports 3 days of RUQ pain, vomiting and fever. She denies suicidal ideation but does **report homicidal thoughts** regarding a prior partner. She feels safe at home and denies any DV. She does have a therapist but per review of chart she is non-compliant with visits and medication. She has had several inpatient psychiatric admissions. She has a history of attempted elopement from the psychiatric ward in the past. She has a violence flag noted in her chart for violence toward ED staff in the past.

RECOMMENDED BEST PRACTICE

Given this patient's psychiatric past including violence, elopement and homicidal ideation, releasing this note is high risk for potential physical harm to staff. It should therefore not be released.







Considerations for Students, Residents & APPs

Any resident or APP note that requires Cosign by a supervising physician will not be released until it is Cosigned.

Notes authored by medical students will not be released to the patient even if they are Cosigned.

Remember that you can manually prevent the release of any note to prevent physical harm or protect privacy.

MEDICAL STUDENTS

- Notes authored by medical students will NOT be released to the patient, even if they are Cosigned by an attending.
- However, if an attending takes over an ED or inpatient note to make edits, it <u>WILL</u> be released to the patient after the attending Signs. The attending will become the note author instead of the student, and the note therefore will be released.

RESIDENTS

- Resident notes that require Cosign by a supervising physician will not be released until Cosigned. This ensures that the resident's note is reviewed before the patient sees it.
- ED and inpatient notes authored by residents that do <u>NOT</u> require Cosign <u>WILL</u> be released to the patient after the resident Signs. This means the note will be seen by the patient without attending review.

APPs

• The requirement for Cosign for PA or NP notes may differ by department. Check with your dept leadership for clarification.







Considerations for Patient Proxies

Open Notes Results Release Parent/guardian proxies will be Notes are **not** auto-released to FOR PATIENTS AGE 11 YEARS Connect (cannot be viewed by **able to view all results** released to AND YOUNGER patient or proxies). the patient's Connect. The patient will be able to view all Notes are **not** auto-released to results released to their Connect, FOR PATIENTS OLDER THAN 12 YEARS Connect (cannot be viewed by but proxy accounts will not be AND YOUNGER THAN 18 YEARS patient or proxies). able to view their results unless requested through HIM. Adult proxies will be able to view Adult proxies will be able to view FOR PATIENTS AGE 18 YEARS all notes released to the patient's all results released to the patient's AND OLDER Connect. Connect.







How to Handle Requests from Patients or Proxies

What if a patient or proxy asks me to change my note?

- If you agree with the request, make the change to your note in real time after discussion with the patient or proxy.
- If you do not agree or are unable to make the change in real-time, refer the patient or proxy to Health Information

 Management (HIM). Give them the contact info below or refer them to the Medical Record Request Form on Connect. HIM will reach out to you via email for next steps.

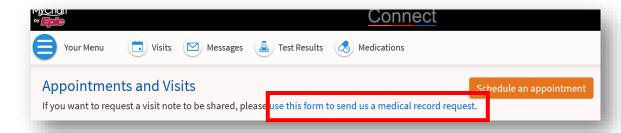
What if a patient or proxy asks for notes or results are not automatically released to Connect?

- Common examples are scanned documents, parents requesting to see notes for children 0-12 years old, or patients requesting to see their behavioral health notes (assuming no substantial risk of patient harm).
- These requests must be honored. Direct the patient to Health Information Management (HIM) using the contact info below,
 or refer them to the Medical Record Request Form on Connect.

HIM CONTACT INFO FOR PATIENTS

- For Weill Cornell Medicine: 646-962-6930
- For New York Presbyterian
 - https://www.nyp.org/patients-visitors/medical-records
- For Columbia Doctors
 - https://www.columbiadoctors.org/about-us/medical-records

HIM REQUEST FORM ON NYP CONNECT









Where to Go for Help

Open Notes and Results Release is a big cultural change, but can lead to patient empowerment, improved patient experience, and better quality of care.

For general questions, please contact the Open Notes Workgroup at

InformationBlocking@nyp.org

To report an IT issue or error, please contact the NYP Help Desk at

servicedesk@nyp.org

or 212-746-4357

Additional Help for Patient Record Release:

- NYP https://www.nyp.org/patients-and-visitors/medical-records
- CUIMC https://www.columbiadoctors.org/about-us/medical-records
- WCMC https://weillcornell.org/privacy
 - Click on the Notice of Privacy Practices for instructions

Additional Resources:

- Read patient stories here.
- OpenNotes International Movement
- Information Blocking FAQs from HealthIT.gov
- ONC Cures Act Final Rule





