

Pushing patients to online care options may have unintended consequences

August 17 2017, by Peter Kerwin

E-visits, electronic communications between patients and physicians, seemed to be an innovative way for health care providers to give patients a low-cost alternative to visiting the doctor's office. Creating an online channel for care delivery offered the promise of reducing health care costs, while increasing the capacity of primary care physicians to see more patients by allowing them to handle routine questions or concerns through e-visits. At the same time, e-visits were seen as an innovation that could improve patient health by allowing patients to receive more attention and increased monitoring.

But new research from the Wisconsin School of Business at the University of Wisconsin–Madison reveals that adopting e-visits triggers increases in <u>office</u> visits and phone consultations, a reduction in new <u>patients</u> being seen by providers, and no noticeable improvements in patient <u>health</u>.

Hessam Bavafa, Wisconsin School of Business assistant professor of operations and information management, along with Lorin M. Hitt and Christian Terwiesch of the University of Pennsylvania, says the findings suggest providers may need to structure and target their e-visits systems differently in order to improve outcomes.

"Offering e-visits seems like a great way to save time and money by reducing the need for office visits because routine questions or updates could be done via email," says Bavafa. "The problem is that health care is much more complicated—patients may overreact to minor symptoms



or not be clear enough in describing their situation and that leads to doctors feeling obligated to schedule an office visit.

The resulting office visits can eliminate any efficiencies gained from evisits systems."

In reviewing five years of healthcare encounters (e-visits, phone, and inoffice) for more than 140,000 patients, the researchers found:

- Providers adopting e-visits experienced a six percent increase in office visits.
- The additional visits resulted in an additional 45 minutes per month of additional time doctors spent on those visits.
- To make up for that additional time spent on office visits, there was a 15 percent reduction in the number of new patients seen each month by those providers. and
- No observable improvement in patient health between those utilizing e-visits and those who did not.

"Despite more patient contact and interaction through e-visits, there were no obvious improvements in patient health tied to that channel," says Bavafa. "In fact, the additional office visits appear to crowd out some care to those not using e-visits."

Bavafa says patients may view e-visits as a convenient, low-cost way to reach doctors and bypass traditional gatekeepers (office staff, nurses), but those additional communications with doctors create more potential opportunities for doctors to feel obligated to see the patient in the office. He notes that e-visits may result in doctors getting ambiguous or insufficient information that makes it difficult for them to offer a diagnosis.

The findings suggest that e-visits are beneficial for those providers that



are not at capacity and can easily absorb the increase in office visits. For those that are at or near capacity or struggling with a shortage of physicians, Bavafa suggests they consider more structured e-visits. For example, before sending any message, patients would be prompted to answer more detailed questions that might provide doctors with better information.

"E-visits are just one feature of the online portals being offered by many providers that allow patients to access lab results, medical histories, appointment schedules, and prescriptions," says Bavafa. "By taking a closer look at how both patients and providers are responding to this new model of service delivery, we can try to make this channel a more effective tool for improving the health care system."

More information: Hessam Bavafa et al. Patient Portals in Primary Care: Impacts on Patient Health and Physician Productivity, *SSRN Electronic Journal* (2013). DOI: 10.2139/ssrn.2363705

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