Chapter 29
Promises and Challenges of Medical Patient Healthcare Portals in Underserved Communities:
The Case of Einstein Medical Center Philadelphia (EMCP)

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ABSTRACT

As a safety-net medical center that serves many underserved communities, Einstein Medical Center Philadelphia (EMCP) faces many challenges in providing healthcare to its communities. To improve those services, EMCP has released a new IT healthcare portal (app). This chapter describes some of the promises and challenges EMCP is currently facing in their attempts to convince communities in its catchment area to adopt that healthcare portal. The challenges are discussed in the contexts of poor social determinants of health (SDOH), unique social factors, as well as the importance of managing community trust in EMCP within the broader contexts of underserved communities of which the new portal is only part of the story. This is not a typical case of IT adoption. The challenges at hand are not only technical but to a large degree social, dealing in part with issues of cultural diversity, perceived lack of respect, and poor health literacy.

INTRODUCTION

There is growing interest among medical service providers in the social factors that influence the quality and provision of medical services. These social factors, such as income and social status, education, employment, often called social determinants of health (SDOH), are the topic of this chapter. For the urban medically underserved, SDOH influences health profoundly and hinders access to medical care (Anderson, Hsieh, & Alter, 2016). Indeed, dialogue and policy surrounding health reform suggests that SDOH problems might account for nearly one third of annual deaths in the United States despite provisions in the Affordable Care Act to address SDOH (Anderson, Lippert, et al., 2016; Galea, Tracy, Hoggatt, DiMaggio, & Karpati, 2011). There is consensus that in order to address such problems healthcare providers must initiate new practices at what is often the first entry point of care to the medical system, namely the Emergency Department (ED). If the ED is the only consistent source of medical care and medical information for this vulnerable population, as it often is, then technologies such as patient portals could be of much help in enabling patients' self-management. Self-management could offset some of the strain on medical centers, a point of much importance to EDs, which are dealing with an increasing load of impoverished patients with unmet social needs across the country. Significant disparities exist in access to care and health outcomes across the United States (Wallace, Angier, Huguet, Gaudino, Krist, Dearing et al., 2016). Underserved patient populations experience barriers to accessing and engaging within the complex health system and electronic portals have been proposed as a viable solution to overcome health disparities by offering a potential new way for patients to become more active participants in their healthcare (Wallace et al., 2016).

Yet, studies specific to underserved patients suggest that underserved populations may have difficulty accessing these electronic engagement resources, which will reduce portal adoption rates (Wallace et al., 2016). A study conducted by Ancker, Barrón, Rockoff, Hauser, Pichardo, Szerencsy et al. (2011) in a large cohort of underserved patients in New York, identified significant racial and ethnic barriers among patients receiving an access activation code and subsequently using the electronic patient portals. Other studies reported more encouraging results. A study conducted by Zarcadoolas, Vaughon, Czaja, Levy, and Rockoff (2013) using focus groups found users reported finding great value in patient portals that positively impacted communication with providers, and improved knowledge, empowerment, and self-care. In another study, focus group participants were positive about online access to medical records but did express concern about potential loss of privacy and interference with the patient–provider relationship (Dhanireddy, Walker, Reisch, Oster, Delbanco, & Elmore, 2014).

A patient portal provides a secure online website that provides convenient access to personal health information. They are distinct from electronic health records that are owned, maintained and updated by healthcare organizations. Patient portals allow patients to interact with their own personal health information. Portals allow patients to securely perform a multitude of tasks that includes: scheduling appointments, retrieving laboratory results, managing medications, and accessing medical history data and other patient education or health information, and communicating with their healthcare provider to answer health questions. The asynchronous patient-provider communication may potentially improve the efficiency healthcare communications and potentially reduce the demand on provider resources (Ammenwerth, Schnell-Inderst, & Hoerbst, 2012).

Of the barriers cited impacting portal adoption, building trust and avoiding distrust are crucial in the successful adoption of IT, including medical IT portals. The importance of trust and its influence on portal adoption was examined through ethnographic experiences from *Einstein Medical Center Phila-*

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