

OPEN NOTES OVERVIEW

Caitlin Sgarlat Deluca 2021

LEGISLATION

On March 9, 2020, the Office of the National Coordinator for Health Information Technology (ONC) published the “21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program” final rule.

This rule implements provisions of the 21st Century Cures Act requiring providers, health information exchanges and networks, and health IT developers to not engage in “information blocking” by knowingly interfering with the access, exchange, or use of electronic health information.

VIOLATIONS

Violations to this legislation include knowingly participating in a practice that is unreasonable and likely to interfere with a patients' access to their electronic health information.

This includes offering a patient portal, but not providing the following U.S. Core Data for Interoperability (USCDI) data classes on said patient portal.

- Allergies
- Assessment and plan of treatment
- Care team
- **Clinical notes**
- Goals
- Health concerns
- Immunizations
- Labs
- Medications
- Demographics
- Problems
- Procedures

PENALTIES

Health IT developers and health information networks and exchanges can be information blocking if they “know or should know” that a practice is likely to interfere with access, exchange, or use of EHI.

The penalty is up to \$1 million **per violation**.

Additionally, providers can be required to pay back previously earned incentive dollars if found to be in violation of this rule.

PLAN

Dr. Tucker formed a workgroup to develop a plan for notes which will be shared with and approved by those groups identified by UH/UUMAS leadership.

A communication strategy has also been developed by this workgroup to ensure all providers are aware of the changes and have an opportunity to ask questions and or adjust their note writing practices.

Go live is planned for March 1, 2021.

FUTURE CONSIDERATIONS

This is phase 1 in ONC's plan to improve the sharing of electronic health information. It is anticipated in May of 2022 that they will require all EHI be shared, not just a subset of data.

SHARED PATIENT NOTES BY DEFAULT


Provider, Resident, and Medical Student notes will be defaulted to share with patients who have an active MyChart account.

- There will be certain workflows that hold these notes until signed by attending if needed.

When writing a Progress note, Procedure note, Consult note, H&P note, Discharge Summary, Brief Op note, ED Provider note and Anesthesia Provider notes, the **Share w/ Patient** button will be checked by default to make the note viewable in MyChart.

SHARED PATIENT NOTES BY DEFAULT

Share w/ Patient is selected by default. This will make the note available for the patient to view in MyChart.



The screenshot shows a web interface for creating a note. At the top, there are three buttons: 'Sensitive' (with a lock icon), 'Tag' (with a tag icon), and 'Share w/ Patient' (with a heart icon). The 'Share w/ Patient' button is highlighted with a red border. Below these buttons, there is a text input field labeled 'Summary:'. At the bottom, there is a rich text editor toolbar with various icons for formatting and editing, including a star, bold, italic, link, unlink, insert, and a 'SmartText' button.

SHARED PATIENT NOTES BY DEFAULT

If you do not want a note to be visible in MyChart simply uncheck **Share w/ Patient** button to stop the note from showing in MyChart.

If you choose not to share a note you must insert the “Reason For Not Sharing” smartphrase into the note to document your reason for not wanting to share.

The screenshot shows the 'My Note' interface in MyChart. At the top, there are three buttons: 'Sensitive' (with a lock icon), 'Tag' (with a tag icon), and 'Share w/ Patient' (with a heart icon). The 'Share w/ Patient' button is highlighted with a red box. Below these buttons is a 'Summary:' text input field. Below the input field is a rich text editor toolbar with various icons for formatting and editing. At the bottom of the screenshot, a red box highlights a message: 'This note is not being shared electronically with the patient because {MR REASON FOR NOT SHARING NOTE:34389}'. The text '{MR REASON FOR NOT SHARING NOTE:34389}' is highlighted in yellow.

LEGAL REASONS FOR NOT SHARING...

1. Release of this note may risk life or physical safety.
2. Patient/Proxy specifically requested the information not be shared.
3. This note is part of a clinical research study.
4. This patient is currently in a correctional facility and this care was received during the course of incarceration.
5. Information contained in this note was received from a third party under a promise of confidentiality and releasing the information may pose a risk to revealing that persons identity.
6. Release of this note is against current New York State law.
7. Security: This information will be safeguarded to protect the confidentiality of this patient's information.

“NO SHARE” NOTE TYPE

We have also created an **No Share** note type.

This can be used if you do not want the note to be released into MyChart.

The **Reasons for not sharing** list will automatically populate in the note and will need to be filled out.

This note type WILL NOT be shared with the patient.

“NO SHARE” NOTE TYPE

Notes

Progress Notes

+ Create Note See All Notes

No notes of this type filed.

Show deleted

Nursing Notes

+ Create Note

No notes of this type filed.

Student Note

+ Create Note

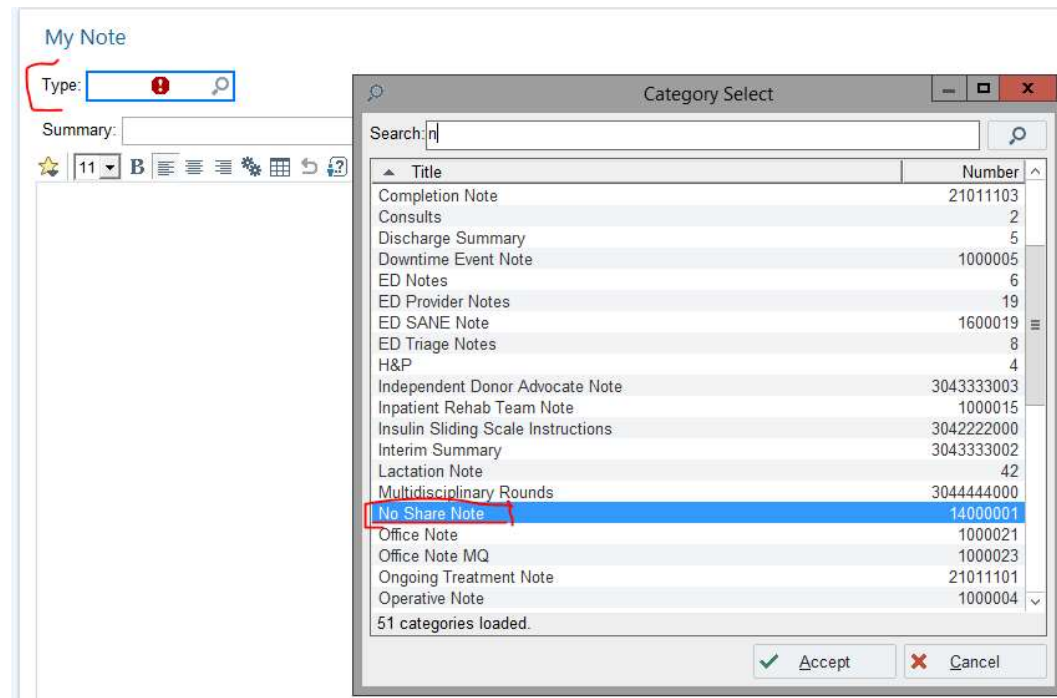
No notes of this type filed.

No Share Note

+ Create Note

No notes of this type filed.

“NO SHARE” NOTE TYPE

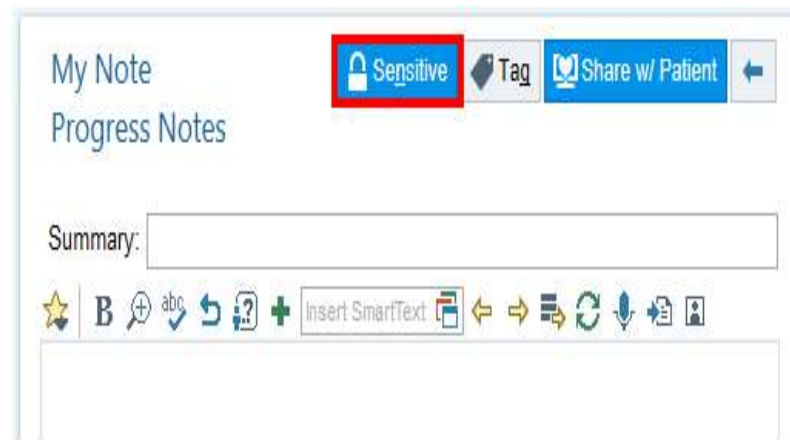


SENSITIVE BUTTON

If your note contains sensitive information and you wish for this note to be flagged for review before release from medical records (HIM) click on the **Sensitive** button.

This will also label the note as sensitive in Hyperspace.

Note that if you do not want this note to be shared through MyChart you must also unclick the **Share w/ Patient** button.



The screenshot shows a web interface for creating a note. At the top, it says "My Note" and "Progress Notes". To the right of the text are three buttons: "Sensitive" (with a padlock icon), "Tag" (with a tag icon), and "Share w/ Patient" (with a person icon). The "Sensitive" button is highlighted with a red rectangular box. Below the buttons is a "Summary:" label followed by a text input field. At the bottom is a rich text editor toolbar with various icons for formatting and editing, including a star, bold, italic, underline, link, unlink, insert, and a "SmartText" button.

STUDENT/RESIDENT/FELLOW AMBULATORY

* If note is not to be shared, the student/resident/fellow should unclick the **Share w/ Patient** button or create a **No Show** note type.

The workflow should include clicking the **Sign on Saving Note** button at the bottom of the note when complete.

The chart should then be routed to the attending.

The attending can **addend** the student/resident/fellow note to edit the note if needed and add an attestation.

The note will not be released to MyChart until it is signed by the attending.

STUDENT/RESIDENT/FELLOW INPATIENT

If note is not to be shared, the student/resident/fellow should unclick the **Share w/ Patient** button or create a **No Show** note type.

Some types of notes requires a cosign.

- H&P
- Discharge summaries

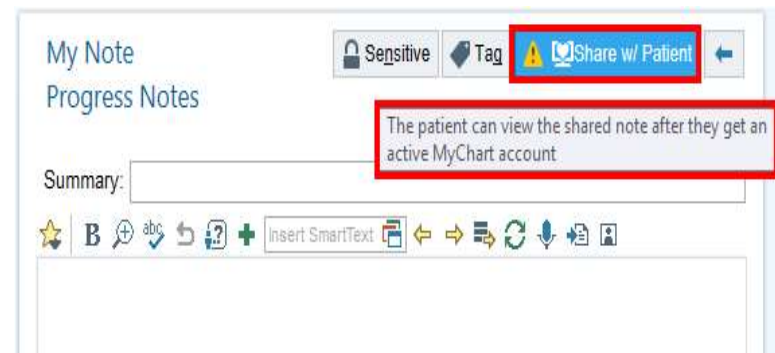
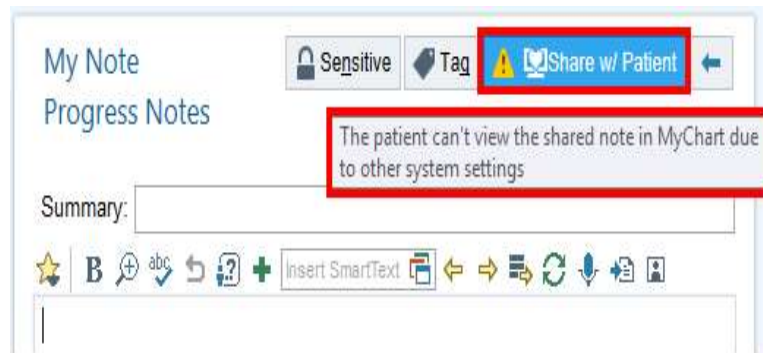
These notes will not be released to MyChart until signed by an attending.

All other notes will automatically go once signed by the student/resident/fellow.

If an attending would like to review every student/resident/fellow note then workflow should include clicking the **Requires a Cosign** button.

NO MY CHART ACCOUNT

In the event that the patient does not have a MyChart account, or if your note is being blocked via a system setting , a yield sign will show up in the **Share w/ Patient** box letting you know that the patient will not be able to view the note.



VISIBLE IN MY CHART

The Patient can see the note in the Appointments and Visits section of their MyChart account

The screenshot displays the MyChart patient portal interface. At the top, the MyChart logo is on the left, and a navigation bar contains icons for MS, Health, Visits, Messaging, Billing, and Resources. The 'Visits' tab is selected. Below the navigation bar, the 'Appointment Details' section is visible, with a sub-tab for 'Notes' selected. The main content area shows a medical note for a patient named ZZZ Not A, dated 3/4/2019 at 8:30 AM. The note includes sections for Subjective, Review of Systems, Objective, and General Appearance, with specific clinical findings for each.

MyChart MS Health Visits Messaging Billing Resources

Appointment Details

After Visit Summary® Notes

ZZZ Not A, Fam Med MD2, MD at 3/4/2019 8:30 AM

Subjective:

Subjective ⓘ
MS Amb is a 54 y.o. male who presents for evaluation and treatment of allergic symptoms. Symptoms include: itchy palate and are present in a seasonal pattern. Precipitants include: . Treatment currently includes nasal saline and is not effective.

Review of Systems
A comprehensive review of systems was negative except for: Ears, nose, mouth, throat, and face: positive for epistaxis

Objective:

Objective ⓘ
There were no vitals taken for this visit.

General Appearance: Alert, cooperative, no distress, appears stated age
Head: Normocephalic, without obvious abnormality, atraumatic
Eyes: PERRL, conjunctiva/comeas clear, EOMs intact, fundi benign, both eyes
Ears: Normal TM's and external ear canals, both ears

PLEASE BE AWARE...

Adolescent notes (ages 12-17) will be visible in MyChart unless the **Share w/ Patient** box is unchecked or a **No Show** note type is used.

If shared in Inpatient or ED, the note will be visible in MyChart when the note is signed.

If shared in HOV or Radiant, the note will be visible in MyChart when the note is signed and end of day processing has completed the encounter.

Medical student, resident, and fellow notes will be defaulted to **Share w/ Patient**, and if the note requires a cosign it will not show in MyChart until the attending has co-signed the note.

PLEASE BE AWARE...

Unsigned transcriptions will not be visible to the patient until the transcription is signed.

An addendum to notes will show once the addendum is signed.

You can addend a note and uncheck **Share w/Patient** button to hide the note from MyChart.

PLEASE BE AWARE...

Vulnerable patients are individuals whose MyChart account is owned or controlled by someone other than the patient.

- Pediatric patients (especially adolescent patients)
- Some elderly patients
- Victims of domestic violence or sex trafficking

Cures Act rule has no specific exceptions protecting these patients

We do have several legal exemptions that may apply.

Our group is watching the national conversation and keeping our eyes open for all possible legal ways to protect our patients' privacy and safety.

OpenNotes® Words that Matter: Documentation Tips

UCHealth Epic EHR. 3/2016, by CT Lin MD

NOTE: The following tips are for healthcare providers who are participating in Open Notes, an initiative to share provider documentation with patients online. **Most patients want to see their documentation as it is currently written. If you feel that your patient should not view his/her unedited notes, consider clicking the button for DO NOT SHARE with patient.** HOWEVER, if you wish to consider alternative wording, here are some specific suggestions for discussions that may be challenging.

CONSIDER CHANGING	ALTERNATIVE SUGGESTION
"Highly anxious, drug-addicted /drug-abusing patient..."	"Injection drug using patient..." Note: anxiety, if a key clinical finding, should likely be included.
"Morbidly obese..."	"Has BMI > 30" or "obese per medical criteria" Note: obesity, if important finding, should be included. Studies indicate patients often react positively to thoughtful discussion pointing to its relation to other conditions)
"Patient refuses to take his pills..."	"Patient has been non-adherent to therapy..."
"Stinks of alcohol and clearly intoxicated. This alcoholic clearly caused the accident..."	"Tests positive for alcohol, in setting of car accident..." If true, and discussed with patient, no reason to redact.
"Patient clearly stinks of cigarette smoke..."	"The smell of cigarette smoke is evident on the patient's clothing..."
"Patient is clearly paranoid, but refuses to acknowledge this..."	"Patient and I continue to 'agree to disagree' about his conviction that his apartment is 'bugged.'"
"Patient continues with symptoms of major depression and has had thoughts of suicide..."	If psychologic/psychiatric symptoms and concerns are discussed openly with patient, no reason to redact this from medical documentation.
"14 year old patient has a positive pregnancy test"	Parent proxy access to a minor patient's chart is automatically discontinued at birthday age 14 (standard policy at UCHealth). Also, a provider can uncheck the box for "display note to patient" to hide any specific note.
"Patient was SOB"	"Patient was short of breath" Use EHR auto-correct dictionary tools to automatically expand any commonly used or impenetrable acronyms.
"Patient with narcissistic personality disorder..."	"Patient with axis II personality". Or consider whether documenting personality-type description is important to care of the patient.
"Results of SANE (sexual abuse exam) are..."	Reasonable to uncheck the box to "display note to patient" to hide any specific note.
"Patient with addiction to Internet Porn..."	"We discussed his addictive behavior and reviewed techniques for dealing with it." Slightly less specificity may maintain integrity of the issue without shaming or stigma. Discussion of psychological issues in the setting of medical visits has NOT been of concern over years of Open Notes experience.

"When we think about our patients in a kind of language that WE deem inappropriate or potentially offensive to the uninitiated, who is to say that our own attitudes toward our patients are not affected by that language? Wouldn't we be closer to our patients' experience if we got into the habit of thinking about them in language they would find meaningful and useful?" —Cassandra Cook, PhD, Mental Health, New York