Supplemental materials for

Ho L, Antonucci J. Using patient-entered data to supercharge self-management. *Ann Fam Med*. 2017;15(4):382.

Lynn Ho, MD¹

Jean Antonucci, MD²

¹ North Kingstown Family Practice, North Kingstown, Rhode Island

References

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- 2. Wasson JH. A Patient-Reported Spectrum of Adverse Health Care Experiences: Harms, Unnecessary Care, Medication Illness, and Low Health Confidence. (2013) J Ambulatory Care Manage: Vol. 36, No. 3, pp. 245–250.
- 3. Greene, J, and Hibbard, J, Why Does Patient Activation Matter? An Examination of the Relationships Between Patient Activation and Health Related Outcomes. J Gen Intern Med (2012) 27(5):520-6.

General references re: confidence.

Lynn Ho, MD; John Watt Haresch, MD; Mark Nunlist, MD; Adam Schwarz, MD; John H. Wasson, MD. Improvement of Patients' Health Confidence: A Comparison of 15 Primary Care Practices and a National Sample. 2013. J Ambulatory Care Manage. Vol. 36, No. 3, pp. 235–240

Wasson JH and Coleman EA. Health Confidence: A simple, essential measure for patient engagement and better practice. Family Practice Management Sept.-Oct 2014.Pages 8-12.

Clinical vignette re: health confidence, published RIAFP Winter 2016 journal: https://dl.dropboxusercontent.com/u/8789614/Patient%20Confidence%20-%20published%20RI%20AFP%20Winter%202016.docx

² Jean Antonucci, MD, Farmington, Maine

Appendix 1. How's Your Health?

Link to the online tool: www.howsyourhealth.org

Survey questions and scoring conventions: https://howsyourhealth.org/html/adult-survey.pdf

How to set up and use the tool: https://howsyourhealth.org/usinghyhpracticeprovider.pdf

How two practices explain and use confidence:

https://www.yourmedicalhome.com/confidencematters.php

http://www.drlynnho.net/practice-quality.html

Appendix 2. Snapshot of patient-entered practice quality data aggregated by the online tool.

	All Records	Women	Men	Income Problems	_
Care Quality Summary	539	376	163	56	
% Taking 3 or more medications	28.01	32.98	16.56	48.21	
% unable to participate fully indaily work- 2 weeks	20.00	15.38	31.25	25.00	
% With Sick Days in 3 Months	14.95	16.04	12.42	25.00	
% Hospitalized or ED for Chronic Disease (H)	5.18	6.30	3.03	7.14	
% Hospitalized for Any Reason in Past Year (H)	6.78	9.41	0.63	14.29]
% Necessary of One Hosp/ED	91.30	90.48	Too Few	Too Few	
% Necessary of Multi Hosp/ED	100.00	100.00	Too Few	Too Few	1
% Having a PCP (Bii)	95.27	94.58	96.86	94.55	Continuity
% Having 2 or more Drs	33.21	37,47	23.27	42.59	
% One in charge (Biv)	96.53	96.35	97.22	100.00	Coordination
% Having Specialist Perfect Care	85.00	87.50	Too Few	Too Few	1
% Having Overall Perfect Care	91.07	90.88	91.50	76.47	1
% Having Very Easy Access (Bi)	85.74	86.45	84.08	71.15	Accord
% Having Confidence in self-management (D)	69.94	69.92	70.00	47.27	Access Confidence
% Seldom Wasted Time (Bii)	97.88	97.80	98.06	96.23	Efficiency
% Get Exact Care Needed (A)	82.05	83.24	79.22	61.54	Overarching quality

Example: Using patient entered data to improve "information quality" in a practice's hypertensive population - Wasson JH, Anders GS, Moore LG, Ho L, Nelson EC, Godfrey MM, Batalden PB. Clinical Microsystems, Part 2. Learning from Micro Practices about Providing Patients the Care They Want and Need. Joint Commission Journal of Quality and Patient Safety 2008;34: sidebar, page 450.

General References re: Care Quality

Guinn N and Moore LG. Practice Measurement: A New Way to Show the Worth of Your Work. Family Practice Management. 2008; February: 19-22.

Wasson, JH. A Troubled Asset Relief Program for the Patient-Centered Medical Home. Journal of Ambulatory Care Management. 40(2):89-100, April/June 2017.

QUALITY TOOL	Cost, Hours/yr	Cost, Dollars/yr	Practice Utility
Confidence Tool	104	0	*****
NCQA's PCMH	800+ (initial)	15K (initial)	+
MU	27	EHR cost	0
HEDIS	52	2K	0
PQRS	52	.5K	0
State HIE	30 (initial)	0	*****