

## Disparities in Patient Portal Communication, Access, and Use

Patient portals are secure websites that provide patients with access to their medical records and offer various health management features, such as appointment scheduling and secure messaging with providers. Portal use has been associated with improvements in health-related outcomes, including medication adherence, understanding of medical conditions, disease self-management, and shared decision-making.

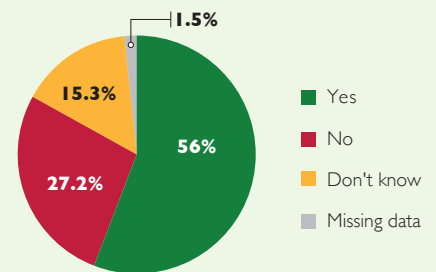
Even though most health care organizations now offer patient portals, the number of patients reporting portal use remains relatively low. In 2020, approximately 40% of Americans reported accessing their online medical records/patient portals at least once in the past 12 months. Additionally, significant disparities exist in patient portal use, with underserved groups (including racial and ethnic minorities, those with lower socioeconomic status, older individuals, and persons with disabilities) using these tools less often. Limited portal use in these populations may be driven by various factors, such as personal preference or lack of access to technology. Some studies also suggest that certain groups (e.g., Black and Hispanic individuals) are less likely to report being offered access to a portal in the first place, suggesting that clinic practices and provider communication may also be contributing to disparities in patient portal use.

A previous HINTS *Brief* ([Brief 45, 2021](#)) highlighted trends and disparities in patient portal access from 2014 to 2018, demonstrating that, overall, patient portal access increased modestly (from 25.6% in 2014 to 31.4% in 2018), but that notable disparities persisted, with men and individuals of lower socioeconomic status being less likely to access patient portals. A more recent analysis using HINTS data from 2019 and 2020 found that 45% of Americans who had a health visit in the past 12 months reported accessing a patient portal. As patient portal use continues to increase, ongoing monitoring of disparities and a better understanding of the factors driving differences in access will be vital to ensure that all patients have the opportunity to take advantage of digital tools that can help them better manage their health.

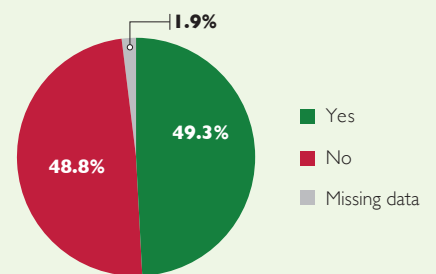
## Quick Facts

- Patient portal use is associated with improvements in various health-related outcomes, including disease self-management.
- Research suggests that patient portal use varies by sociodemographic characteristics, including race and ethnicity, socioeconomic status, and age.
- In 2020, 56% of American adults reported having ever been offered online access to a patient portal by their health care provider, 49% reported being encouraged to use the patient portal by their provider, and approximately 40% reported accessing the patient portal at least once in the past 12 months.

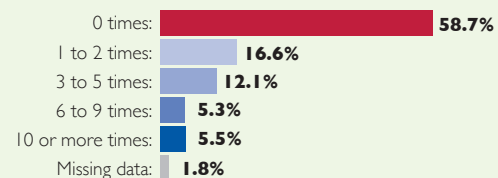
**Percentage of American adults who have ever been offered online access to their medical records by a health care provider**



**Percentage of American adults who report ever being encouraged to use an online medical record by their health care provider**



**Frequency of online medical record access over the past 12 months among American adults**



Source: HINTS 5 Cycle 4, 2020

## Disparities in Communication about Patient Portals and Patient Portal Access

In a recently published study, researchers analyzed data from HINTS 5 Cycle 3 (2019) and HINTS 5 Cycle 4 (2020) to examine disparities in being offered, accessing, and using a patient portal among those who had a health care visit in the past 12 months. The analysis found that compared to White individuals, Black and Hispanic individuals were 5.3 and 5.4 percentage points less likely to be offered a patient portal, respectively. Additionally, males, individuals with a high school education or less, and those with annual household incomes below \$75,000 had a significantly lower probability of reporting being offered a patient portal compared to females, college-educated individuals, and those earning more than \$75,000. On the other hand, having greater internet access was associated with higher probability of being offered a portal.

Those without a college degree also had a significantly lower probability of accessing a portal compared to those with a college degree, whereas having greater internet access increased the likelihood of accessing a patient portal. Compared to White individuals, Black and Hispanic individuals were found to be 7.2 and 6.4 percentage points less likely to access a patient portal, respectively; however, when the analyses were limited to those who had been offered a portal, the differences in access were no longer statistically significant. In general, among individuals who were offered a patient portal, those who reported that their health care provider encouraged them to use it were 21 percentage points more likely to access the portal compared to those who did not receive encouragement, and there were no meaningful differences in the effect of encouragement across racial/ethnic groups. Additionally, there was no evidence of racial/ethnic disparities in patient portal use among those who reported being offered and subsequently accessing a portal (with rates of portal use to view test results and message providers being similar across racial/ethnic groups, and Black and Hispanic individuals being more likely to report using the portal to download or transmit information than White individuals).

Overall, preference for speaking with a health care provider directly and perceived lack of need to access online medical records were the most common reasons provided for not accessing a portal by those who were offered one. However, Black individuals were significantly more likely than White individuals to indicate that they did not access the portal because they preferred to speak with their provider directly or were concerned about the privacy or security of the website.

### How Can This Inform Your Work?

HINTS data indicate that if clinics and providers consistently offer patient portal access to all patients (for example, through the implementation of “universal access” policies at health organizations), some of the disparities currently observed in patient portal utilization could be decreased. Furthermore, the data suggest that provider encouragement can be an effective way to increase patient portal access and use once access has been offered. Patient–provider conversations that emphasize the potential benefits of patient portals for managing health and address specific barriers to use, such as concerns regarding privacy and security or potential impact on the patient–provider relationship, could help promote greater use of this technology.

Additionally, health care organizations could implement various interventions to support greater patient portal uptake. This may include offering training and assistance with the use of the technology for those with lower digital literacy, improving the usability of the portals to reduce cognitive load and better meet patient needs, and further encouraging portal use by including information about portals in all patient-facing communications, from appointment reminders to discharge summaries.

### About HINTS

[hints.cancer.gov](https://hints.cancer.gov)

The National Cancer Institute (NCI) created the Health Information National Trends Survey (HINTS) to monitor changes in the rapidly evolving field of health communication. The survey data can be used to understand how adults use communication channels to obtain health information for themselves and their loved ones. HINTS data can also help practitioners create more effective health communication strategies. The HINTS survey has been fielded 15 times to date.

HINTS *Briefs* provide a snapshot of noteworthy, data-driven research findings. They introduce population-level estimates for specific questions in the survey and summarize significant research findings resulting from analyses of how certain demographic characteristics influence specific outcomes. Many *Briefs* summarize research findings from recent peer-reviewed journal articles that have used HINTS data.

### For More Information on Cancer

- Call the NCI Cancer Information Service at 1-800-4-CANCER
- Visit <https://www.cancer.gov>
- Order NCI publications at <https://pubs.cancer.gov/ncipl/home.aspx>
- Visit [Facebook.com/cancer.gov](https://www.facebook.com/cancer.gov) and <https://www.youtube.com/ncigov>

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