

Optimizing Revenue Through Automation

Boosting the Bottom Line Through Patient Activation and Engagement



This eBook introduces best practices for maximizing appointment reminder technology to retain and increase revenue, optimize reimbursements, avoid readmission penalties, and reduce bad debt.

Healthcare organizations are focused on optimizing revenue, but are challenged by patients that don't show up for appointments, fail to follow treatment plans, and don't pay their bills on time. This is only exacerbated by stiff readmission penalties and the ongoing struggle to increase value-based healthcare reimbursements.

While booking routine care services may seem to be an obvious solution for driving increased revenue, the problem arises in the fact that most patients aren't getting recommended preventive care services. The reason: They don't know many preventive care screenings are covered by insurance with no out-of-pocket cost to the patient.

According to a recent Intrado consumer survey, 90 percent of insured health consumers in the U.S. have visited a doctor in the past two years for routine check-ups, vaccinations, or disease treatments. Yet 30 percent of those surveyed said they still don't know what their insurance policy covers in terms of preventive care. By simply

letting patients know they are due for a preventive screening - and that the screening is covered by insurance - healthcare providers can book more preventive screenings annually, driving additional revenue for their organizations.

But booking appointments isn't enough. Healthcare providers need to go beyond reminding patients to show up. They need to confirm, cancel, or reschedule appointments to avoid lost revenue. Although it seems counterintuitive, a cancellation trumps a no-show any day. With advance notice, comes opportunity—opportunity to fill the schedule vacancy with patients who are on a waitlist or seeking same-day care.

Retain And Increase Revenue With Routine Appointments

The first order of business for provider organizations is revenue. Specifically, retaining and increasing it. Appointments are an obvious starting point, as a full schedule of appointments equates to more revenue. For example, by focusing on booking preventive screenings, providers can increase revenue by millions of dollars year-over-year. Case in point: In just 60 days, Ochsner Health System generated \$684,930 in additional revenue by booking routine colonoscopies with automated outreach.



PRO TIP

Tap your appointment reminder technology to book routine care services. Send an automated phone notification or text message to patients due for a preventive screening or test. Let patients know in advance the service is fully covered by insurance and remind them to schedule the test.

Optimize Reimbursements by Improving Chronic Care Management

With the shift to value-based payment models, clinical outcomes carry significant weight in hospitals' prospective reimbursements. Thus, to optimize the revenue stream on reimbursements, healthcare organizations are placing a priority on improving chronic care management.

PRO TIP

Enable patients to quickly and easily reply to appointment reminder messages with a confirmation or a cancellation. Fill vacancies with patients who are on a waitlist or seeking same-day care.

By improving the health of chronic patients, providers can increase reimbursements and avoid financial penalties. Chronic care improvements are focused squarely on patient engagement strategies that include remotely monitoring patient health with regular automated check-ins and engaging patients with information that activates them to take specific actions, such as taking prescribed medications.

It is clear ongoing provider support is essential for improving chronic care. According to a recent Intrado consumer survey, 91 percent of chronic care patients say they need help managing their disease. A lot of help. In fact, one in five patients feel they need 24-hour disease management assistance.

When and Where Patients Need Support

39% of patients need the most help managing their condition at home and in daily life.

40% of patients need help managing their condition when they begin having symptoms.

36% of patients need help managing their condition when they have pain.

Source: Strengthening Chronic Care: Patient Engagement Strategies for Better Management of Chronic Conditions

One major problem facing both providers and patients is the fact that 39 percent of patients admit they're only somewhat knowledgeable about how to effectively manage their chronic condition. Providers can help patients do a better job of managing their health by supporting them not just during office visits, but also during the time between them - where patients say they need the most help.



Checking in with patients and providing an interaction, or survey, to gain information and feedback on their current health status is an effective chronic care strategy. Automating these surveys allows providers to monitor patients in their home environment, escalate cases when patients are at risk, and intervene before patients reach the point of needing acute care.

Although three-quarters (75%) of chronic patients want to receive automated survey check-ins from their healthcare provider so they can be alerted if anything looks wrong, surveys are currently underutilized by providers. Many providers do not fully realize the benefits of using patient surveys, nor do they know that their existing appointment reminder technology can be used to execute automated patient surveys.

PRO TIP

Leverage your appointment reminder technology to monitor the health of chronic care patients remotely. Deliver automated patient surveys to capture real-time health metrics so you can intervene and escalate when patient data points to problems.

For example, to monitor patients with Congestive Heart Failure (CHF), providers can assign a short touchtone survey to patients with this condition. A survey for this patient group might include less than ten questions and be delivered to patients at home once or twice per week. After receiving an automated survey call, patients are directed to respond by pressing a number on their phone to answer questions about their current health status. Because weight gain can indicate problems in CHF patients, the survey might instruct patients to:

- Press 1 if they are at their usual weight
- Press 2 if their weight has increased up to 2 pounds from their usual weight
- Press 3 if their weight has increased 3 to 4 pounds from their usual weight in the past week

Patients might also be asked to respond in a similar way to questions about their sleep, whether they are experiencing swelling, or having difficulty breathing. The idea is to use known signs that indicate potential problems in CHF patients to identify issues before they turn into major problems for patients. This data is then reviewed and if it indicates the patient is experiencing trouble, the healthcare provider can intervene early to prevent an acute situation.



Avoid Penalties by Avoiding Readmissions

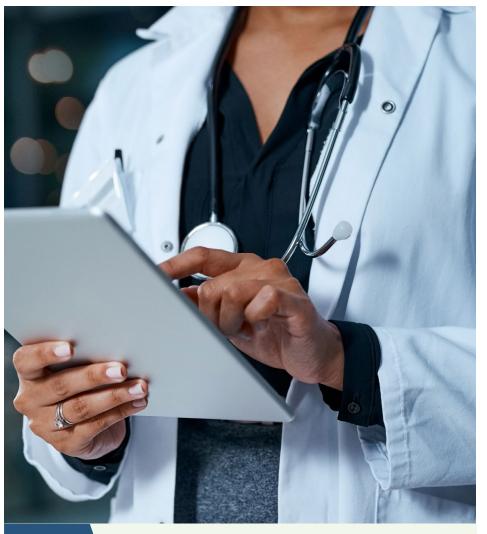
Potentially avoidable readmissions are costing hospitals \$528 million in Medicare penalties for the 2017 fiscal year¹. Healthcare organizations know that reducing preventable readmissions is in their best interest financially, but many do not realize they are missing opportunities to prevent readmissions by improving care transitions.

According to a recent Intrado survey, more than two in five (43%) patients are unsure what to do in the hours, days and weeks that follow their hospital discharge. And not all are sure when to seek help. Only about half of patients feel that experiencing symptoms of their condition (51%) or severe pain (49%) are warnings signs they need medical care after being discharged.

Remotely monitoring patient health during the very important 30 day post-discharge time frame is critical. Hospitals and health systems can leverage their appointment reminder technology to reduce readmissions by automating the delivery of post-discharge surveys. These automated surveys are typically short and consist of just a few questions such as:

- Did you get your medications?
- Are you taking your medications?
- What is the level of pain you are experiencing?

This communication within 24 hours of discharge is essential as it helps providers identify patients that are likely to readmit. When patients don't follow their post-discharge care plan by filling their prescriptions or taking their medications, for example, they are more likely to experience pain that will land them back in the hospital. By using automated surveys to get ahead of these common breakdowns in transitional care, providers can prevent more readmissions, thereby reducing financial penalties.



PRO TIP

Use your appointment reminder technology to deliver automated surveys within 24 hours of discharge. Leverage survey data to identify patients that are likely to readmit; intervene before they land back in the hospital.

Get Paid and Reduce Bad Debt

Managing overdue payments is a huge challenge for healthcare organizations. Even the best paying patients often require more than three statements before they pay their bills. What's more, most self-pay revenues are never collected.

Organizations can use their appointment reminder technology to get patients to pay their bills on time and reduce bad debt write-offs. Here are three effective strategies:

- 1. Send proactive outbound phone notifications to patients before they receive a bill.
- 2. Engage patients with overdue accounts early using friendly payment reminders sent via automated phone calls or text messages.
- 3. Enable patients to respond with an immediate, electronic payment.

How Healthcare Providers Collect Patient Payments Communicate payment expectations up front so patients understand their payment responsibilities before they receive bills Mail balance reminders to patients Provide an online portal for patients to check balances and make payments Use staff to call patients to remind them of balances due Use automated IVRs to prompt patients to 12% make payments Text payment reminders to patients with an easy option for immediate bill payment 30% 40% 50% 60% 10% 20% 70% 80%

Source: Intrado, Healthcare Providers - Survey, 2016.

According to a recent Intrado survey of healthcare providers, to make the payment collection process run as smoothly as possible, providers use various forms of communication. Efforts range from old school methods of mailing balance reminders and manually making phone calls to remind patients to pay their bills, to more efficient and effective strategies that include using automated voicemails and text messages to alert patients of overdue balances while enabling them to make an immediate payment.

PRO TIP

Dramatically improve collections and reduce bad debt by engaging patients with overdue accounts. Send automated payment reminders that enable patients to respond with an immediate payment.

The data shows that there are opportunities to expand the use of text messaging for payment reminders, particularly since a vast majority (80%) of hospitals and health systems say their patients are receptive to receiving text messages.

Start maximizing your appointment reminder technology to optimize revenue. This very same technology can be used to engage and activate patients to schedule more preventive care services, follow treatment plans, and pay their bills on time. By simply doing more with the technology you already have in place, you can retain and increase revenue, optimize reimbursements, avoid readmission penalties, and reduce bad debt.

Sources:

1. Boccuti and Casillas, "Aiming for Fewer Hospital U-turns: The Medicare Hospital Readmission Reduction Program." The Henry J. Kaiser Family Foundation, Sept. 30, 2016

http://kff.org/medicare/issue-brief/aiming-for-fewer-hospitalu-turns-the-medicare-hospital-readmission-reduction-program/



