



PATIENT FOLLOW UP AND OUTREACH: It's Good Health Care

A report on how healthcare executives are approaching patient engagement post-discharge

Value-based initiatives are increasingly holding hospitals responsible for patients' wellbeing long after they walk out the door, putting a priority on outcomes, costs, and patient satisfaction. Providers that maintain consistent, personalized communication with patients can prevent readmissions, improve population health outcomes, and ultimately save millions through efficiencies and avoided penalties. While these are all significant pressures on hospitals to initiate patient outreach, it's more simply the right thing to do—it's just good care.

Despite these benefits, many providers haven't explored a modernization of their patient outreach efforts. Despite significant innovation that has enabled providers to perform more effective follow-up, many providers still rely on manual, costly, and inconsistent processes.

In an effort to better understand how providers are interacting with their patients, CipherHealth and Modern Healthcare Custom Media partnered to survey nearly 250 healthcare leaders on their use of patient outreach technology. We wanted to learn how providers are communicating with patients,

what their challenges are in implementing patient engagement programs, and how they want to expand their outreach efforts. We hope the results of this survey spur thoughtful discussions about the current state of patient outreach and an intentional exploration of what's next.

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Most providers are already engaged in some form of patient outreach, and believe it can improve patient outcomes and satisfaction. Ninety-five percent of providers told us they utilize some sort of outreach program, the most common being inpatient follow up (nearly 70 percent), followed by emergency department follow up (55 percent) and DRG-specific follow up for certain conditions (40 percent). Providers also reported that they follow up with at-risk patients, like new mothers, the elderly, and the chronically ill. Follow up with at-risk patients is crucial, especially when treating patients suffering from illnesses with high readmission rates, like congestive heart failure, sepsis, and pneumonia.

While at-risk patients are a major focus for outreach, our survey found that providers still want to engage with their patient population at large. Answers varied widely when providers were asked what percentage of patients they'd like to engage, but over half of providers said they'd like to reach at least 60% of their population, which was the mean response.

Providers overwhelmingly told us that phone calls play a part in their patient outreach programs, with 90 percent of respondents reporting that calls are likely to be a part of outreach. Also common were e-mails (54 percent), direct mail (50 percent), and text messages (43 percent). Research hasn't definitively proven one modality to be most effective, but early findings suggest that multi-modal engagement improves providers' chances of connecting with patients, with several studies reporting that multi-modal intervention led to increased screening rates for **breast**, **colorectal**, and **cervical** cancer screening. Contacting patients on multiple platforms can drive a higher response rate, which should theoretically lead to more patients taking action for their health.

Follow up signals to patients that their provider cares about them, even after they leave the facility, and it's clear that providers see outreach as an asset for reputation management: nearly every respondent (92 percent) said they view patient outreach as a tool to improve HCAHPS scores, which are tied to reimbursement and used by patients who are shopping for a provider.

tients to be healthy, providers also understand that readmissions can be extremely costly and contribute to inefficiency.

PROVIDERS KNOW WHAT THEY WANT, BUT HAVE NOT FOUND THE RIGHT SOLUTIONS

It's clear that providers are communicating with patients, but that doesn't mean they're doing it effectively. Our survey shows that providers are most concerned with having cost-effective, efficient ways to connect with patients, yet many haven't bridged the gap between their goals and effective solutions.

As shifts in reimbursement continue to pressure executives to cut expenses, it's no surprise that they've pointed to cost as their prevailing challenge in implementing patient outreach. Over half of respondents (57 percent) said labor costs are prohibitive in investing in patient engagement, while 51 percent pointed to technology costs as a burden. Costly, ineffective programs may be leading to provider dissatisfaction and low ROI: 27 percent of respondents said they're not seeing a sufficient return on investment in their current programs, and only 16 percent of executives said they're satisfied with their current solutions.

Despite a desire for cost-effective outreach and engagement, providers don't seem to have explored technologies that could optimize their current efforts. As mentioned, nearly all providers use phone calls for outreach, which are labor-intensive and not cost-effective when done manually.



Top 5 Uses of Patient Outreach

1. Inpatient Follow up (68%)
2. ED Follow up (55%)
3. DRG-Specific Follow Up (40%)
4. New Mom/Baby Follow Up (39%)
5. Population Health (At-risk, elderly, chronically ill) (37%)

Follow up also ensures that patients are improving after leaving a care facility and are correctly following instructions. Eighty-seven percent of providers said reducing readmissions is a major goal in their patient outreach efforts. This shouldn't be surprising: studies show patient outreach reduces readmission rates if providers reach out quickly after discharge, and it's estimated that Medicare will assess \$528 million in readmission penalties against hospitals in 2017, a number that has increased as CMS has added more conditions to the readmission penalty. While hospitals want pa-

Please rate your level of agreement with the following statements (with 5 being agree strongly and 1 being disagree strongly)

"I am currently satisfied with my organization's outreach programs"



1	2	3	4	5
6%	31%	47%	12%	4%

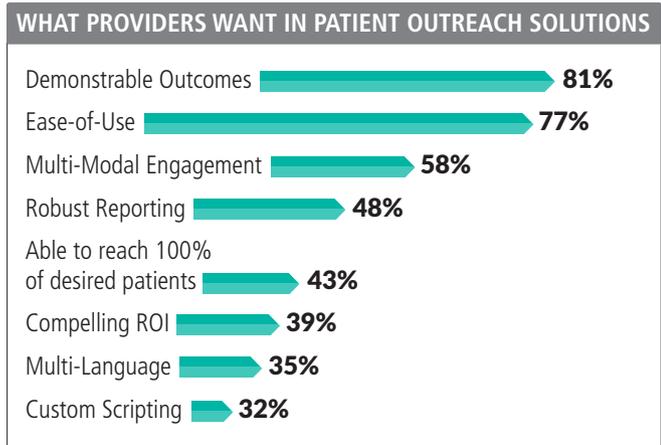
Forty-three percent of providers said they've considered utilizing call centers, which can also be very costly and challenging to implement. Few respondents have considered technology that can reduce the burden on labor, with only 8% having explored Interactive Voice Response (IVR) technology, only 24 percent having explored scripting technology for phone callers, and just 36 percent said they've explored automated outreach technology that initiates phone calls or other communication. Additionally, thirty-seven percent of surveyed providers haven't explored patient outreach technology or

outsourcing at all.

Healthcare leaders likely haven't looked for ways to innovate because they don't know what's out there: 45 percent of respondents weren't familiar with any vendors in the patient outreach and engagement space. It's clear that providers want to learn more about this relatively young industry.

While many providers are yet to invest in expanding their current outreach efforts, they believe improvements to their programs could help them achieve long-term goals. Two-thirds of those surveyed agreed that their organization's outcomes could be improved with better outreach technology. Their answers also show they have clear priorities for outreach technology: 81 percent said it must improve outcomes, 77 percent said it should have noticeable ease-of-use, and 58 percent said it's important that a platform allow for communication through multiple modalities. Providers understand the benefits of outreach technology, and are ready for a change.

Two-thirds
 of providers
 believe that better
 outreach technology
 could improve
 outcomes



THE FUTURE OF PATIENT OUTREACH

The clinical world has only scratched the surface of patient outreach. In recent years, outreach and engagement has expanded to include automated calls that are sophisticated and responsive, as well as text messaging, e-mail, and other platforms. New technologies can help providers personalize outreach, sending procedure-specific audio or text instructions to post-surgery patients, or timely reminders for crucial medications or office visits. Providers are also able to keep detailed records of follow up to ensure compliance and identify insights that help drive improvements. Innovations in outreach technology address providers' biggest concerns by using multiple modalities, therefore reaching patients in the way they prefer, and improving cost-efficiency.

Case studies of CIPHERHEALTH's technology have compared

manual call outreach to rapid-response automated calls, finding that automation improved outcomes and increased employee efficiency. In one study at Norfolk, Va.-based **Sentara Healthcare**, a group of patients was assigned to receive manual calls made by nurses while another group received automated calls for the first contact. If a patient reported an issue via the automated call, the automated system recorded it and immediately notified staff to follow up with specific care instructions.

The study found that, in the manual call program, nurses were not able to call patients more than once, given the volume and length of calls. The automated system allowed Sentara to reach larger volumes of patients, and if an issue arose, designated staff members were immediately notified. Staff members following up on automated calls were able to address issues in under five minutes because they already had the information about the patient's issue. Most importantly, patients who received automated follow up were less likely to end up back in the hospital. The readmission rate among those who received manual calls was 21.5 percent, while the automated group's readmission rate was only 6.3 percent. Faster, more-efficient follow up meant patients received care quicker.

Salt Lake City-based **Intermountain Healthcare** tested the same system. Despite being staffed 24 hours a day, 7 days a week, Intermountain's Health Answers call center was strained, especially in its efforts to deliver follow-up calls 24-48 hours after discharge. While the system reported a gradual reduction in readmissions, the volume of calls was hindering workflow. Once the hospital implemented CIPHERHEALTH's Voice automated outreach platform, patients who engaged with the program had a 10 percent lower readmission rate and 29.5 percent lower ED bounce back rate. On average, it took the Health Answers team less than 30 minutes to intervene once a follow-up alert was automatically triggered and routed to them.

Providers have invested significant resources into improving technology for medical records and back-office functions. It's time they do the same for the highly-visible functions of patient outreach and engagement. The automation of patient outreach technology has allowed provider organizations to save money while improving outcomes and better utilizing their highly-trained staff. Providers who are able to reach their patients in more convenient ways are making life easier for patients and helping them heal faster. When providers follow up with patients on a frequent basis, they're not only likely to heal better, but also to report higher satisfaction. Overall, patient outreach is just a basic aspect of high-quality healthcare. It's just good practice to follow up.

ABOUT THIS SURVEY

Modern Healthcare Custom Media, on behalf of CipherHealth, commissioned Signet Research, Inc., an independent company, to conduct a survey of healthcare professionals. The objective of this study was to gain an understanding of hospitals' patient outreach and engagement programs and their perception of available technologies.

On August 25, Modern Healthcare Custom Media sent a broadcast email to a sample of 15,737 healthcare executives who subscribe to Modern Healthcare, asking them to participate in a survey, followed by two subsequent reminder emails. Subtracting undelivered emails, the net effective mailing was 15,679. By September 6, 2017, 244 returns had been received. The base used is the total number of respondents answering each question. Survey findings may be considered accurate to a 95% confidence level, with a sampling tolerance of approximately +/- 6.3%.



ABOUT CIPHERHEALTH

CipherHealth is a New York City-based company founded in 2009 focused on creating solutions that help care providers effectively and efficiently provide quality care for their patients. CipherHealth leverages technology to make communication between care providers and patients easier, engaging, and more meaningful.



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