



Elevating Patient Access and the Consumer Experience

Improving access and the consumer experience in health care requires much more than opening a digital front door. To overcome chronic difficulties accessing service, it requires 24/7 omnichannel access that gives individuals what they need at that moment and exceeds their customer service expectations. Adopting consumer experience as the end-to-end, top-to-bottom core value of the organization makes that possible.

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Introduction

Every patient or family member has a customer service story to tell from their experiences with the health care system. Many stories aren't flattering. Earned or not, health care doesn't have the same customer service reputation as many well-known brands in the retail world like Amazon, Apple or Ritz Carlton.

Historically, the consumer experiences underlying the reputation didn't hurt provider organizations like hospitals, health systems and physician practices from clinical, financial or operational standpoints. The reasons ranged from clinical reputation, brand loyalty and unbreakable doctor-patient relationships to narrow-network health insurance benefits and geographic market advantages.

But those reasons are crumbling before the eyes of most provider organizations. New market entrants, nontraditional health care competitors, vertically integrated health care conglomerates, new patient care modalities, breakthrough medical technologies, innovative digital health technologies, new value-based reimbursement models and — most importantly — new consumer expectations are quickly redefining the health care landscape.

Traditional health care providers like hospitals, health systems and medical practices have a choice. Stay on the same path and hope health care comes full circle. Or embrace the consumer experience as their raison d'être and share the clinical, financial and operational benefits with the communities they serve.

Providers are no longer in the position of wondering if they should improve patient access. The question should be: How fast can they remove the friction and open access? It's a strategic imperative that will impact the future growth and sustainability of their organization.

This Trailblazers report from the American Hospital Association's Center for Health Innovation details the journey and lessons learned from health care leaders who have chosen to make elevating the consumer experience and improving access their organization's reason for being. This report details how that journey begins with improving patient access through people, processes and technology. ●



New consumer expectations are quickly redefining the health care landscape.

Why elevate patient access and the consumer experience in health care?

Every journey, every endeavor, every job to be done starts with answering the question, “Why?” Why climb Mount Everest? Because it’s there. Why rob banks? Because that’s where the money is.

The answer to why improve the consumer experience in health care is more practical than philosophical or cheeky. For patients, the answer is expanded access, lower costs and better outcomes. For providers, it’s clinical, financial and operational excellence for the communities they serve.

A number of industry surveys, reports and research bear this out and collectively shout the answer to why.

For instance, Guidehouse and the Healthcare Financial Management Association (HFMA) surveyed 144 provider executives for the firm’s 2024 Health System Digital and IT Investment Trends Report. The executives, mostly chief financial officers (CFOs), said that patient and provider feedback is directing them to improve the consumer experience through digital front doors and virtual care options (see Figure 1).

Further, there is a growing sense of urgency among hospitals, health systems and physician practices to elevate the consumer experience and jump-start that journey by improving patient access.

To wit, a 2022 survey of more than 1,000 physician offices in 15 metropolitan areas by Merritt Hawkins, the physician search firm run by health care staffing company AMN Healthcare, re-

Figure 1
Prioritizing the consumer experience
Percentage of 144 health care provider executives who cited or agreed with the survey question.

- 68%** Digital and IT investments are increasing because of patient and/or provider feedback on enhancing patient/provider satisfaction and access.
- 57%** Improved consumer experiences are one of the top three ways my organization will benefit from digital and IT investments.
- 32%** Digital front door and virtual care (open scheduling, virtual visits and smart analytics) are one of our three highest priorities in 2024.

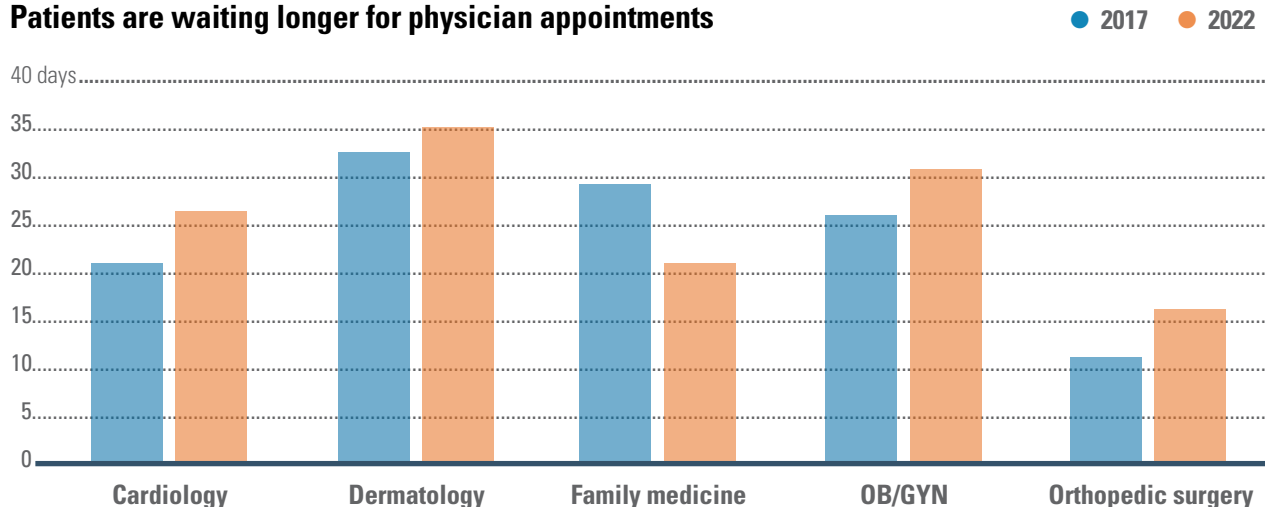
Source: Guidehouse and HFMA

vealed that the average wait time for patients to obtain an appointment with a doctor was 26 days, up from 24.1 days in 2017, when the firm conducted a similar survey.

Four of the five most common medical specialties saw patient wait times increase in 2022, according to the survey (see Figure 2).

Longer appointment wait times are driving consumers to alternative virtual care options. A shorter wait time was the second most-cited reason for choosing virtual care over in-person care, according to Rock Health’s 2023 Consumer Adoption of

Figure 2
Patients are waiting longer for physician appointments



Source: AMN Healthcare

Digital Health report. The report is based on a Rock Health survey of more than 8,000 U.S. adults.

Greater convenience was the No. 1 reason consumers said they picked virtual care over in-person care, cited by 39% of the respondents. A shorter wait time was second at 30%.

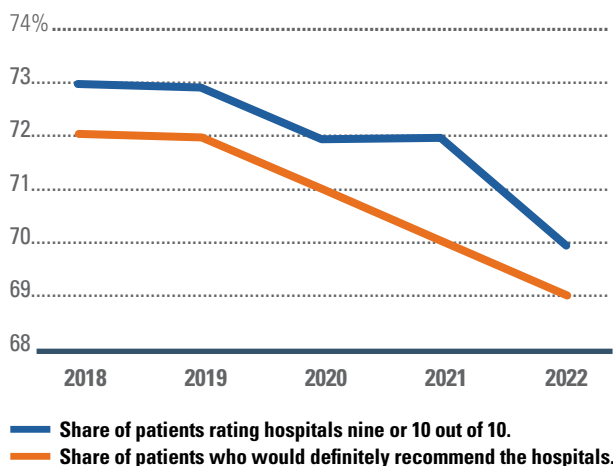
Yet there's no guarantee that consumers will choose virtual care at the same provider organization at which they would have received in-person care. Today's health care market offers consumers a variety of virtual care options from local, regional and national provider organizations as well as nontraditional health care companies.

While in-person appointment wait times and virtual care options are up, patient satisfaction scores are down, turning up the pressure on providers to act as soon as possible to improve both the consumer experience and patient access.

In its March 2024 report to Congress, the Medicare Payment Advisory Commission, or MedPAC, included data showing that hospital experience measures continued to slide in 2022. The measures in Figure 3 are part of the Hospital Consumer Assessment of Healthcare Providers and Systems survey, or HCAHPS.

The "why" is clear. Providers must proactively and preemptively overcome their consumer experience and patient access

Figure 3
Two important HCAHPS measures hit five-year lows in 2022



Source: MedPac, 2024

challenges if they want to stay relevant and maintain their positions as the care destinations of choice for their patients and communities. Poor patient access is directly linked to patient leakage, failure to drive new patient acquisition and shrinking "share of wallet." ●

How health care providers can elevate the consumer experience

After the "why" comes the "how," which is vastly more difficult than figuring out the former, especially when it comes to elevating the consumer experience in health care by improving patient access. It makes Mount Everest look like an ant hill.

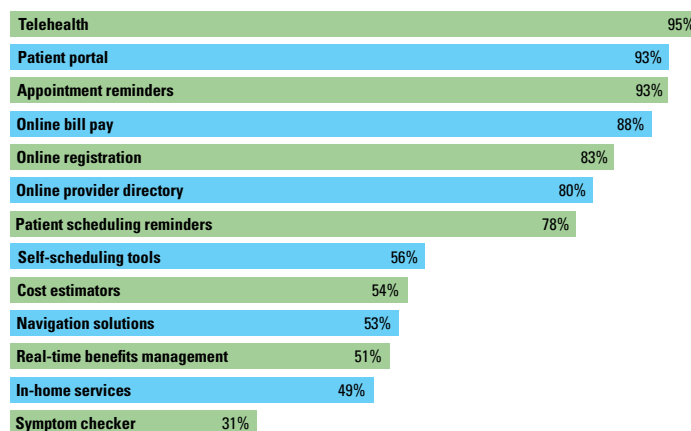
One place to begin is to look at how other hospitals, health systems and medical practices are doing it. That's what the Center for Connected Medicine and KLAS Research did for their Top of Mind for Top Health Systems 2023 report. This report is based on a survey of and in-depth interviews with 61 senior leaders at 59 health systems.

In ranked order, Figure 4 shows the digital tools that leaders said their health systems are deploying to improve patient access. Telehealth, patient portals and patient appointment reminders top the list.

Integrated digital tools, optimized electronic health record

Figure 4
Digital tools implemented by top health systems to improve patient access

Percentage of surveyed health systems that have implemented this tool.



Source: Center for Connected Medicine and KLAS Research

(EHR) systems and other health information systems are the technical engines that power a comprehensive consumer experience business model for hospitals, health systems and medical practices. The “how” can’t happen without them. But without the model sitting on top of the engines, as a car chassis sits on top of the power train, the engines have no direction.

At the center of that model is the consumer experience. Emanating from that consumer experience core are four domains:

- 1 | **Clinical Connections.**
- 2 | **Coordinated Access.**
- 3 | **Financial Health.**
- 4 | **Patient Engagement.**

Under each of the four domains are each of its essential capabilities. For example, under the coordinated access domain are such patient access capabilities as:

- Up-to-date provider and service availability information.
- Self-scheduling tools for patients.
- A high-performance omni-channel contact center.
- Easy-to-use referral management and navigation services.
- Aligning patient need with appropriate care setting or model.

Integrated digital tools, optimized EHR systems and other health information systems make capabilities like these possible for provider organizations.

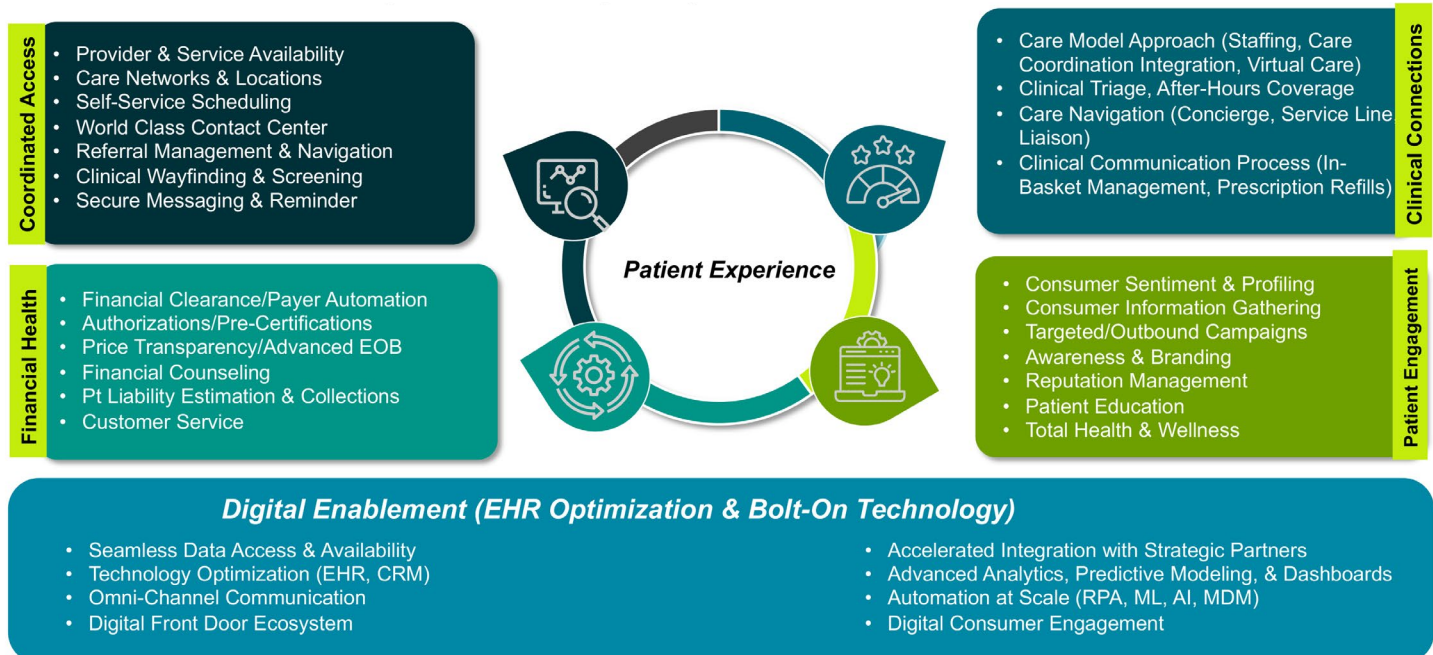
“Transforming consumer access is no longer an optional initiative for health systems. The ability to grow market share, reduce leakage, improve capacity, optimize revenue and enhance consumer brand loyalty is reliant on enterprisewide change. This is not a six-month or 12-month transformation. This is a three- to five-year journey for providers to realize their consumer experience model,” said Kristin Greenstreet, a partner at Guidehouse who works with health systems to overcome their consumer experience and access challenges. “But providers can stage these journeys in a way that they can get value and benefit at every step of the way. That’s the key in prioritization.”

The following case studies reveal the “why” and the “how” of two prominent health systems that embarked on that journey, with Guidehouse as their adviser, as they built various capabilities into their consumer experience business model. ●

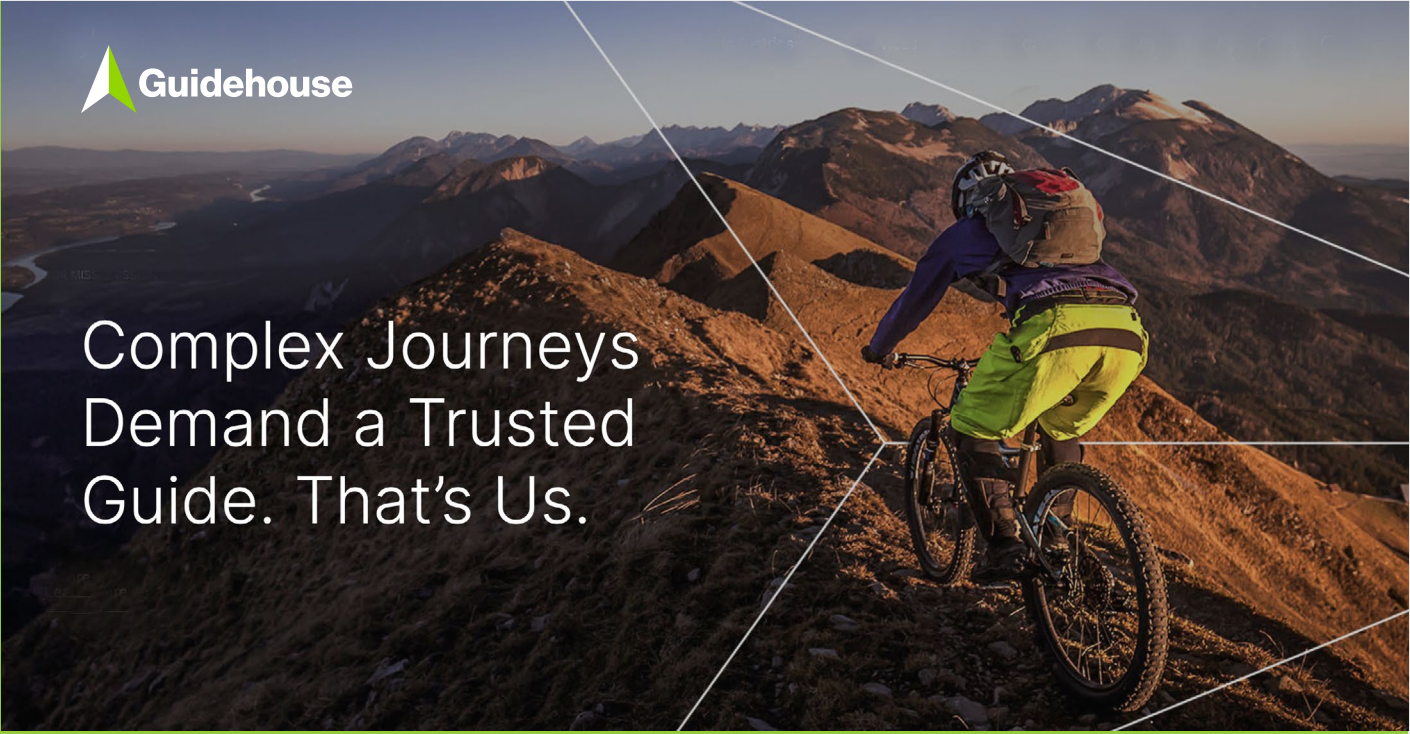
Figure 5

The Guidehouse Consumer Access and Experience Model

Patient-centered care informed by lessons from the consumerism approach will link all major touchpoints for patients throughout their care journey.



Source: Guidehouse

A photograph of a mountain biker riding a trail on a mountain ridge. The biker is wearing a purple jacket, bright yellow-green pants, and a backpack. The background shows a vast mountain range under a clear sky. The image is overlaid with a white geometric pattern of lines.

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CASESTUDY Tampa General Hospital



Patient access is care coordination

Nothing triggered the decision by Tampa General Hospital to make improving patient access a strategic objective of the academic medical center and area safety net provider. There was no access crisis. There was no financial downturn. There was no precipitous drop in volume. There was no alarming decline in patient satisfaction scores.

It was the realization, according to John Couris, the system's president and CEO, that Tampa General like all big hospitals and health systems is really in the care coordination business. "The first job to be done is getting every patient what they need, when they need it and where they need it in a single interaction with the system, whether that's a phone call, text, email or asynchronous chat. When that happens, quality goes up, costs go down and value for the consumer improves," Couris says.

But that can't happen in our national health system that Couris describes historically as "siloed," "fragmented" and "disjointed." Those are the challenges that Tampa General set out to overcome with its enterprisewide Experience Center program launched a little over a year ago.

"This is a fundamental shift in how we look at engaging

patients and seeing that through the lens of other industries that have figured this out and do it really well," Couris says.

The person charged with bringing that vision to life is Scott Arnold, the system's executive vice president and chief digital and innovation officer, who describes the foundational work to improve care coordination by improving patient access as "the unsexy work of getting access and scheduling as right as it can be."

This foundational work to build out the capabilities of the experience center — e.g., efforts to bring health care up to the service standards of other industries — falls into three workstreams: people, processes and technology.

The first and most important workstream was process, which, according to Arnold, was bogged down by artificial barriers and built-in friction. Disparate

SYSTEMSNAPSHOT

Tampa General Hospital

Headquarters: Tampa, Fla.

Hospitals: 5 (with 1 under construction)

Employees: 13,000+

Physicians: 1,480

Medical specialties: 120

Teaching affiliate: University of South Florida (USF) Health Morsani College of Medicine

Net revenue: \$2.6 billion (2023)

Source: Tampa General Hospital, USF

CASESTUDY Tampa General Hospital

PROTIP

THREE CRITICAL SUCCESS FACTORS

- 1 | Be patient and support your staff. Improving access is a dramatic change that takes time.
- 2 | Stay focused on your processes and information technology systems. It's easier to blame people than to take a hard, honest look at your legacy processes and systems.
- 3 | Involve both patients and front-line team members in the design of your new access initiative. It sounds simple, but many times the users are left out.

and disconnected technologies, variations in scheduling templates and decision trees, inefficiencies in internal communication tools, holes in access channels all made everyone's jobs more difficult in trying to provide consumers what they wanted at that moment. He compared removing those artificial barriers and sanding down built-in friction to clearing out brush from a field or yard.

Thirteen months into the journey, Tampa General has:

- Built an Experience Center with centralized scheduling and referral management across Primary Care and 20 specialties (and growing)
- Deployed more than 230 decision trees
- Rolled out updated templates for more than 750 providers in more than 20 medical specialties
- Reduced redundant visit types by 35%

The moves provided immediate relief to the experience center's staff, who then had a wider aperture to see what individual consumers needed and how the staff could help.

With the brush cleared and aperture widened, Tampa General started upskilling the Experience Center's staff

with new customer relationship management competencies and equipping them with new tools and technologies to enhance and speed their patient access work.

Today, Tampa General's Experience Center staff, which Couris likens to personal health care sherpas, handle 30,000 calls per week with each response designed to lift the burden of navigating the health care system from patients and their families. Arnold said the system has seen a 75% increase in available appointments online, a 47% increase in appointments scheduled online and a 20% decrease in appointment no-show rates.

Other Experience Center performance metrics are in the "formative stage," according to Arnold, but will include such measures as the percentage of calls converted to appointments and first-call resolution rates.

Building out the experience is just one facet of a multifaceted approach to improving patient access and the consumer experience. ●

"We must embrace the fact that we're in the care coordination business. But right now, our systems are siloed. We're fragmented. We're disjointed. We need to fix that. The beginning of that journey starts with access."

— JOHN COURIS
 President and CEO, Tampa General Hospital



Unleashing supply to meet demand

Some problems are bad. Some problems are good. Yale New Haven Health System (YNHHS), a prominent five-hospital health system in Connecticut, and its affiliated multispecialty medical practice, Yale Medicine, have a good problem.

Thanks to an enviable clinical reputation — buoyed by their affiliation with Yale University and its medical school — there always has been pent-up patient demand for care from the system’s providers.

This demand manifests itself in lengthy patient wait times for new and follow-up appointments with primary care doctors and medical specialists. Also, from a historical cultural standpoint, there was a high tolerance level for letting patients wait, said Margaret McGovern, M.D., CEO at Yale Medicine and Yale New Haven Health System’s executive vice president and chief physician executive.

Dr. McGovern became CEO of Yale Medicine in 2022. Pame-

la Sutton-Wallace was appointed president of the health system in February. Both previously worked at health systems in New York, a state in which some would say a New York minute applies to patients waiting for health care services as much as it does to patrons waiting for a table at a restaurant.

Given the boom in the number of alternative care settings available to patients, Sutton-Wallace and Dr. McGovern said they knew that YNHHS/Yale Medicine’s good problem could turn into a bad one as quickly as someone could make an in-person care appointment with an in-market competitor or out-of-market virtual provider.

“Peg and I are both new to the organization. I think we

SYSTEMSNAPSHOT

Yale New Haven Health

Headquarters: New Haven, Conn.

Hospitals: 5

Employees: 30,800

Physicians: 7,500

Medical specialties: 100

Net revenue: \$6.2 billion (2022)

Yale Medicine: 1,500 physicians

Source, Yale New Haven Health, Yale Medicine

CASESTUDY Yale New Haven Health / Yale Medicine

PROTIP

THREE CRITICAL SUCCESS FACTORS

- 1 | Balance your supply with demand by adding advanced-practice providers and giving them their own integrated appointment types and scheduling templates.
- 2 | Create a multimodal communication plan to keep all clinical and administrative leaders up to date on your overarching access initiative and individual access projects.
- 3 | Install a sustainable structure with strong governance, formal work plan, senior leadership and transparent performance data to keep energy high and everyone inspired.

brought fresh eyes to the situation. We saw data that didn't match our own experience or industry benchmarks," Sutton-Wallace said.

"With new market entrants, patients will say, 'I'd rather not wait three months to go to Yale. I can wait three days to see someone else, and I'm satisfied with that access,' Dr. McGovern added.

So, Sutton-Wallace and Dr. McGovern did something about it. That something is the Access 365 initiative, which YNHHS/Yale Medicine launched in early 2023.

Execution of the strategic initiative is what Sutton-Wallace calls "classic process improvement" to knock down patient barriers to access and replace them with the people, processes and technologies to give patients access to what they need ideally at the first point of contact. It's an enterprisewide initiative with an initial project

timeline of three years but given this is a transformation on how YNHHS/Yale Medicine will continue to do business, there is really no end date to continuously improve the patient's ability to access care. The overall mission and vision of Access 365 is to "deliver a world-class consumer connection experience ensuring the right service at the right time in the right place."

YNHHS/Yale Medicine have been committed to the governance of Access 365 and ensuring that this is an enterprisewide initiative for all services — ambulatory, ancillary and inpatient. As senior leaders, Sutton Wallace and Dr. McGovern are actively engaged as sponsors of the initiative and have formed a steering committee that brings key senior leaders from across the organization to prioritize the approach, make tough decisions quickly and pave over the many institutional speed bumps that could prevent execution.

"Patients have choices. Those choices are getting more prevalent. They can create a more competitive landscape for us. Waiting is not good for anyone — not just from a service perspective but from a quality-of-care perspective as well. We want to get patients in to care for them and ensure their well-being."

— PAMELA SUTTON-WALLACE
 President, Yale New Haven Health

Implementation has been staged into a prioritized path with eight distinct “waved” rollouts to redesign the technology, operations and people across all access functions for all ambulatory and ancillary services across the enterprise. At the completion of the ambulatory and ancillary phases, the organization will pivot to Inpatient services. The initiative combines strategic, operational and digital technology transformation and will focus on access functions key to the patient journey including building a new Experience Center as a one-contact option to support patients with scheduling, clinical triage, wayfinding, pharmacy, medical record and financial needs.

They estimate Access 365 will be fully operational in two years as they streamline workflows, integrate technologies across sites and departments, add complementary digital tools, standardize appointment types and scheduling templates and build new measures to monitor access performance. The initiative already tracks performance measures like patient lag time to first appointment, no-

show rates, patient throughput capacity, call turnaround time and call abandonment rates.

Access 365 kicked off with Wave 1 focusing on radiology, orthopedics and primary care services, and YNHHS/Yale Medicine is already seeing impact from the early stages of this work. For example, Access 365 increased open CT scan slots by 23%, resulting in a commensurate increase in actual CT scans performed. Other outcomes to date include:

- **Standardization of visit, template and decision trees for Wave 1 specialties** (radiology, orthopedics, primary care)
 - Example: Reduced/simplified redundant or unnecessary visit types for radiology by 81%
- **Increasing physician and advanced practice practitioner appointment capacity across Wave 1 specialties**
 - Increased primary care by more than 30%
 - Increased orthopedics by ~24% ●

Conclusion

People ask why health care can't be more like Amazon or Apple or other prominent consumer retail or tech giants when it comes to customer service. The answer is health care can. But it's much harder to do.

Hospitals, health systems and medical practices are complex organizations operating for decades in a complicated economic system with people's health and lives at stake, not just meeting a same-day delivery promise for a lost phone charger.

At the same time, the health and lives of provider organizations are at stake unless they can elevate the consumer experience in health care to match that of other industries. The journey will be long, difficult and not for the faint of heart. But it's a journey worth taking with the first step being improved focus on a consumer access model. ●



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