ACCESS IS EVERYTHING

How Demand for Digital Innovation is Changing Healthcare

It was a year like no other in healthcare. Covid-19 proved to be the most unexpected catalyst for change in industry history. It set the tone for transforming patient access, and the pace at which it happened, on fire.

Prior to the pandemic, stodgy legacy systems had stood for decades with modest demand for innovation. Moreover, there was little motivation to nurture patient engagement through digital channels. But 2020 changed all that. Patients now want— and expect -- the same access to healthcare that they have for everything else in their daily lives.

They are increasingly choosing providers and services based on convenience. Many consumers prefer to book online and would actually switch providers for the ability to do so. The availability of telehealth also means they can access care where, when, and how they want it. In short, they're starting to view themselves as consumers of healthcare, not merely patients. And they won't take status quo for an answer.

Providers already have much of the data to improve the continuum of care and, in turn, encourage patient retention. But data is more than electronic health records. In fact, the majority of data impacting patient health are social or behavioral in nature. Creating digital solutions that enable patients to share this data empowers them to easily and affordably engage the relationships they need to maintain wellness.

Today, the industry is pivoting in response to how digital life is shaping consumer demand for care. In an uncertain environment, one thing is certain: Patients expect healthcare on their own terms. Here are three trends that impact patient access and the financial well-being of healthcare providers.

CONVENIENCE IS KING

Driven by the adoption of digital devices, consumers have become far more mobile in the past decade. They're actively seeking alternate options for convenient and affordable care, wherever they may be. And the data supports this. Experian Health's survey, "The State of Patient Access: 2021," found that nearly eight in ten consumers want the ability to schedule their own appointments, 24/7, from their home or mobile device. A 2019 survey by Digital Commerce 360 revealed that 50% of 1,000 respondents who prefer to book online would actually switch providers for the ability to do so.

Today's patients expect providers to deliver a standard of care customized to their needs in a manner suited to their personal schedules and lifestyles. According to the Experian study, 49% of consumers surveyed listed "convenient locations" as a primary driver for selecting a provider. Further, 52% listed "convenience" as the second-most important driver of choice.

Patients are also seeking access to care without potential exposure to coronavirus. Contact-free, on-demand healthcare is part of the *new norm*. Many no longer want to see a doctor in a physical location in order to get care. Compounded by increasingly complex lifestyles, patients are simply unwilling to sit in waiting rooms for routine visits.

This desire for convenience is likely contributing to the growth of non-traditional care models. Overall telehealth usage has nearly tripled since 2018 and continues to rise. States have abandoned legislation stipulating that telehealth could only be provided by a patient's existing provider, leading to increased access and less deferment of care. Wait times are also greatly reduced as those needing care can often get access to a health professional the same day— all achieved virtually.

In addition, providers are finally seeing the value of telemedicine. Primary care physicians, behavioral health professionals, and some specialists offer virtual visits as an optional means of delivering patient care. To some extent this is because it helps keep their practices financially viable. Remote medicine also allows medical professionals to squeeze more patient consults into their busy schedules while minimizing the risk of spreading infection.

For hospitals, contagious working environments and social-distancing protocols have become a stimulus for new care practices. Some have expanded urgent care access at a low cost by instituting easy-to-use, online diagnosis and treatment platforms for minor health conditions. Once a physician completes a diagnosis, the patient receives a text or email with his or her treatment plans, prescription information and follow-up guidance.

As for those in underserved areas, access to health care remains a significant challenge. Patients come from a variety of backgrounds and demographics, are located in both rural and urban settings, and manage a range of family and work dynamics. Telemedicine is only as effective as connectivity is available for underserved patients. Technology can be an excellent tool to bridge gaps in care but it isn't a panacea for overcoming poor accessibility.
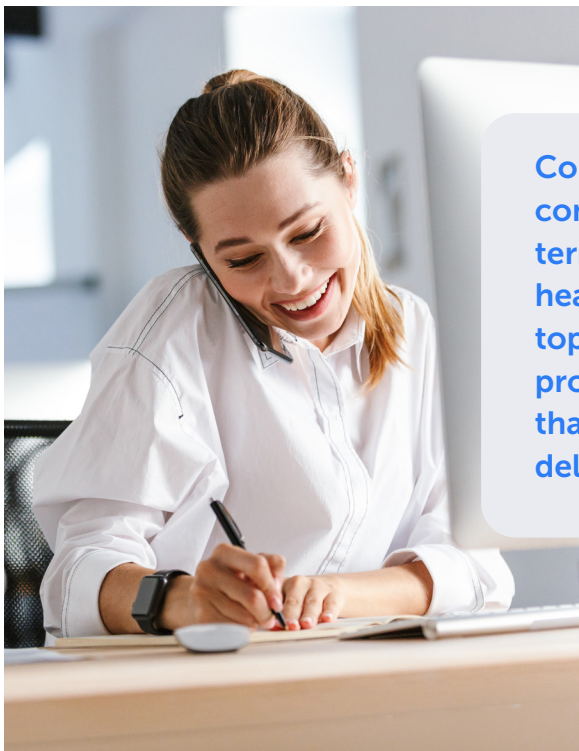
Consumers will continue to appeal for convenience and purchasing on their own terms. Unlike generations before, savvy healthcare consumers aren't looking for top-down, authoritative relationships with providers. They're looking for partnerships that respect their time and judgment while delivering an exceptional patient experience.

BUYING INTO THE BRAND

Another aspect of shifting dynamics in healthcare delivery is its effect on the brand. Providers spend millions to build awareness and reputation over time. But if processes don't align with changes in demand, those dollars are wasted. Consumerism puts the burden on brands to reshape the patient experience rather than rely on past community standing.

Further, downstream revenue potential is compromised when patients don't believe they're being heard. Both large and small organizations can wisely leverage the voices of patients, families and providers to help develop a brand strategy that attracts patients and encourages engagement.

Since a large chunk of provider profitability is driven by patient loyalty, preference becomes synonymous with long-term viability. However, NRC Health's 2021 Healthcare Consumer Trends Report found that more than a third of consumers currently show no particular preference for a healthcare brand, and lack of preference is on the increase.

The pandemic has only exacerbated this trend. In the wake of COVID-19, 45% of consumers report that they have already changed their healthcare brand preference. In addition, 62% expect their brand preferences to change once the pandemic has ended. Yet responses in NRC Health's Real-time Feedback database show that patients think highly of their existing providers.

This means that healthcare systems can capitalize on that goodwill by offering easy access options via these same providers. Consumers, especially younger ones who represent long-term revenue opportunities, are eager to find wellness partners who can meet their convenience and digital needs. This means ensuring that the brand permeates every facet of the patient experience, for consumers and those who work in the organization. The brand promise must meet the reality of delivery if brand preference is to thrive.

In addition, the "pull effect" of consumerism is putting pressure on organizations to function like retailers. This means mirroring the best practices of other industries, from packaged goods to service providers like restaurants. By digitizing data, OpenTable, a popular restaurant reservation app, has improved the dining experience while minimizing the potential for no-shows. Offering similar conveniences in healthcare scheduling, however, is slow in coming because it requires hospitals to integrate disparate provider EHRs into one central system.

Changing preferences in communication channels have similarly altered the way contact centers help connect consumers with the right providers. In particular, social media has expanded the agent's role as brand ambassador. Today they must be trained in social customer service to address potentially unfavorable or inflammatory comments. With social commentary visible to large audiences, the brand image can be adversely affected if not quickly addressed by properly trained agents.

Contact centers must likewise support a more diverse patient base. Multi-lingual agents must be able to speak or write in a fluent, conversational manner with non-English speaking consumers. The ability to switch to a caller's native language during a transaction is highly advantageous. It offers the opportunity to connect more fully with the customer, understand the issue and resolve it quickly, providing the best possible brand experience.

DATA MEANS DOLLARS

One of the most compelling opportunities to apply big data for positive change is in healthcare. It offers the potential to improve patient outcomes, reduce the cost of delivery, and advance quality of life in general. In short, it translates to clear financial advantages for both patients and providers.

For consumers, big data can mean improvements in the speed and ease with which they access healthcare services. A data-driven, connected health environment also enables patients to efficiently maintain the relationships they need to stay healthy. In certain instances, analytics can anticipate their needs and passively monitor patient health to ensure timely care.

There are multiple advantages for providers, too. Big data has the potential to drive positive, quality outcomes at cost points that are sustainable. It can also pinpoint ways to increase patient satisfaction and loyalty, an important method of reducing new patient acquisition costs. Further, big data can reveal opportunities to overhaul costly processes for non-clinical but necessary tasks.

Predictive analytics and artificial intelligence hold great promise in creating personalized patient health experiences. According to Ernst & Young, AI and analytics turn complex information into usable insights, including preventive and individualized wellness solutions. AI allows volumes of patient data to be aggregated from multiple sources to provide better treatment plans. In the future, researchers hypothesize that predictive algorithms could further cut costs on even the most expensive patient care.

Readmissions are another target to cut costs and improve overall care through applied analytics. Research shows that many readmissions can be avoided when more actionable information is available to both patients and providers at the time of discharge. By providing concise, real-time and correlated data, the likelihood of readmission is reduced through more efficient treatment support. For hospitals, this can mean significant opportunities to avoid financial penalties imposed by Medicare for high readmission rates.

But one of the most substantial threats to health system revenue streams is the deferment of care. NRC Health found that approximately 40% of patients who delayed care in 2020 mentioned Covid-19 as the primary reason, while 17.2% said they were "willing to manage on their own." Another 15.8% said they were merely unable to afford the cost of care. Much of the deferment in 2020 occurred in Q2 alone. Deferment will likely continue until patients are confident that providers can offer care in a safe environment.

The pandemic's influence on deferment was especially pronounced among older consumers. For those in the Silent Generation (aged 75+), COVID-19-related concerns drove nearly 68% of delays in care. For Millennials, only 21.3% delayed care, primarily because they believed their health problems were not serious enough to warrant an appointment.

Yet the cost of delaying care is even greater when conditions go untreated. When patient conditions are left to deteriorate, health systems may be less able to effectively treat an illness. This can affect payer reimbursement rates and drive higher out-of-pocket costs for the patient. Neither are preferable outcomes.

Although patients have had full access to their health data for some time now under HIPAA, the healthcare industry has been slow to embrace needed change. That's because the cost of modernizing infrastructure can be a tough pill to swallow. But future provider profitability hinges on investing in digital healthcare.

Consumers still seek a meaningful human connection, even in the face of a pandemic. And providers are stepping up to offer new alternatives of care in the safest, most effective setting possible. Perhaps that's why access to virtual care has grown exponentially over the past few years. For consumers, accessible care is valued care.

ABOUT
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Our secure solutions have been validated with our HITRUST Certification. For financial providers, HITRUST certification means that the organization in question (including its products) has already undergone rigorous scrutiny and is a verified-secure partner whose technology and organization could leverage for its digital transformation without fear, hesitation or time spent on an additional internal review.

We believe in the power of human relationships and that innovation in communication will connect people to help achieve financial security and live healthier lives. Revation Systems serves hundreds of healthcare and finance consumers in the U.S. with its all-in-one full contact center in the cloud with the ability to drive experience across digital and physical channels. LinkLive is unified communications software hosted in the cloud that offers a broad range of capabilities including rich digital messaging, a seamless ability to engage humans across physical and digital channels, and leading voice and video communications.

We offer the advanced, sophisticated capabilities are expected in a contact center like skills-based routing, session recording, workforce management, agent scheduling, and quality monitoring tools. We also offer a broad range of digital capabilities from chat, secure mail, and co-browsing to the ability for digital users to engage the physical channels and humans at a healthcare or banking organization. Since its founding in 2003, Revation has been dedicated to the belief that the quality of communications can be increased, while the costs and hassles can be decreased, using virtual communications with a cloud-based platform.

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