

Leveraging the Relationship between
Days Wait to Appointment and
Outpatient Patient Satisfaction Scores
to Improve Retention Rates,
Reimbursement and Reporting Metrics

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Full Disclosure

Neither presenter has any actual or potential conflicts of interest in relation to this presentation

Objectives and Agenda

- Discuss the current environment, reporting requirements, and potential financial implications
- Summarize key drivers associated with days wait and patient satisfaction and our current experience
- Overview of management approaches to engage stakeholders around improving satisfaction scores related to appointment wait time

Background

- Families have choices for care and increasing responsibility of costs
- Access to care has potential to impact satisfaction with care and choice of provider
- It is important to understand relationship between days wait to visit and patient experience

Problem & Priority

 Problem: How does patient satisfaction with outpatient encounters relate to days wait?

 Priority: In a highly competitive market, improving access to care provides opportunity to improve volume and patient experience

A Changing Environment

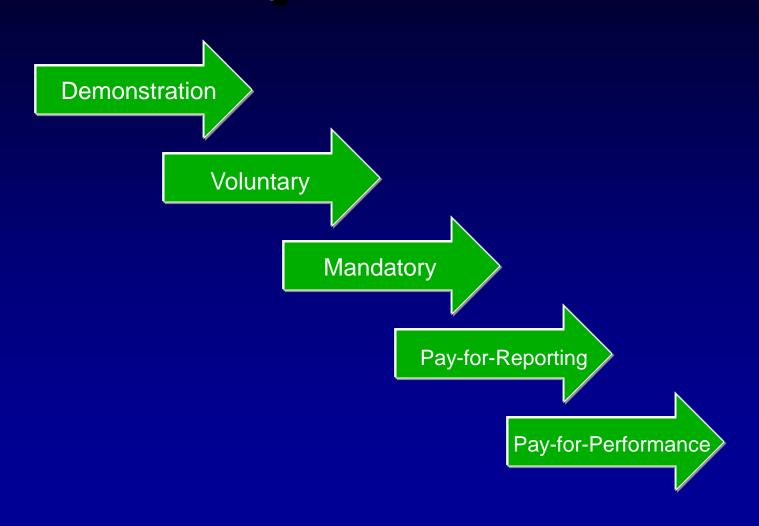
- Increasingly competitive market
- Shifting balance of responsibility for expenses
- Patients are more informed and selective
- Growing emphasis on preventative measures and ambulatory care
- Pay-for-performance and public reporting

Reporting requirements and financial implications

- HCAHPS Hospital
 - Launched in 2006 and public reporting started in 2008
 - 2013 Value-based purchasing incorporates 8 dimensions

- CG-CAHPS Physician Office
 - CMS plans to include in PQRS reporting in CY2013

Familiar Patterns: Path to Pay-for-Performance



ConsumerReportsHealth

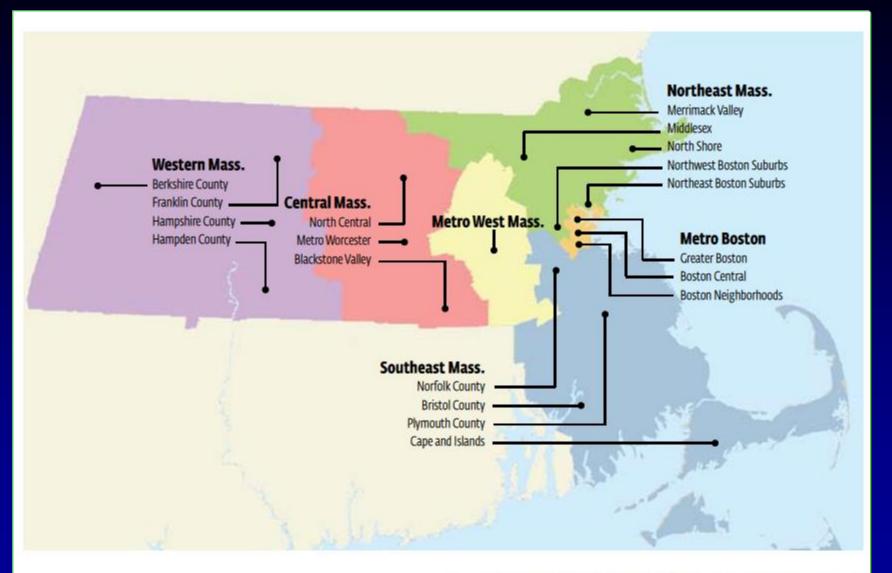


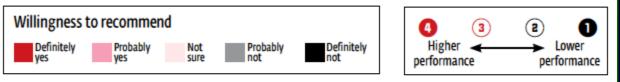
Special Report for Massachusetts residents

How Does Your Doctor Compare?

- D Exclusive:
 Patients rate 487
 adult, family &
 pediatric practices
- How to get the best care
- Quiz: Does your physician measure up?







Ratings of practices for adults In collaboration with MHQP

Based on patient experience In alphabetical order, within regions and towns

Town	Practice Name	Address	Willingness to Recommend Performance						
			0%	100%	How well doctors communicate with patients	How well doctors coordinate care	How well doctors know	Getting timely appointments, care, and information	Getting courteous
NORTHEAST	MASSACHUSETTS								
Merrimack \	Valley								
Amesbury	Lahey - Amesbury	24 Morrill Pl.	74		0	3	3	(2)	2
Andover	New England Medical Group	140 Haverhill St.	69		0	(5)	(5)	2	3
Billerica	Burlington Medical Associates - Billerica	790 Boston Rd.	72		0	(2)	3	0	3
Chelmsford	Chelmsford Primary Care	2 Meeting House Rd.	76		3	3	(2)	(2)	3
Chelmsford	Harvard Vanguard Chelmsford	228 Billerica Rd.	75		3	3	(2)	(2)	3
Haverhill	Pentucket Medical Associates - Haverhill	1 Parkway	69		3	(3)	(2)	(2)	(2)
Haverhill	Whittier Medical Associates	62 Brown St., Suite 200	76		3	(2)	2	3	3
Lawrence	Pentucket Medical Associates - RiverWalk	500 Merrimack St.	64		3	3	(2)	(2)	3
Lowell	Cardiology Associates of Greater Lowell	33 Bartlett St., Suite 206	70		3	(5)	(5)	3	(2)

Patient-Centered Appointment Scheduling

Time to 3rd Available
No-show Rates
Overall Satisfaction
Appt Satisfaction
Care Continuity
Health care Utilization

	Improv	ement	Worsening		
Studies	Sig ←			Sig	
8	5	3			
11	5	5	1		
4	1	2	1		
4		2	1	1	
9	3	4	2		
2		2			

Positive Effects on Satisfaction with Wait Time

- More frequent physician consultation
- Gender
- Patient older age
- Better baseline health
- Physician scarcity

Patient Trade-offs

 Patients are willing to wait 2.5 days longer for more a convenient appt time

 Patients are willing to wait 5.0 days longer to see doctor of choice

Preferences and Risks of Same Day Appointments

- Younger age
- Prior experience receiving rapid access
- Expecting a prescription
- Brief problem duration
- 10% increase in same day appointments associated with 8% reduction in days wait satisfaction (OR = 0.92)
 - Greater effect for older patients higher value on scheduling in advance

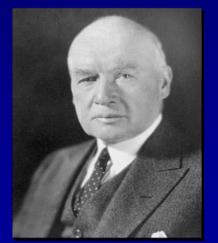
Association Between Satisfaction with Physician Communication and 1-yr Healthcare Utilization

	Least Satisfied	Most Satisfied	
ED Visits	17.6%	14.3%	p < 0.05
Admits	10.7%	11.5%	p < 0.05
Mortality	1.0	1.26	p = 0.02

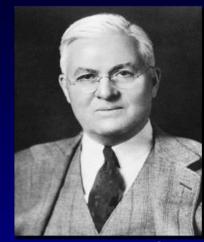
Cleveland Clinic 92 Years and Counting



Dr. Frank E. Bunts



Dr. William E. Lower



Dr. George W. Crile



Dr. John Phillips

- •Multi-specialty Group
- Founded 1921
- Based on WW I Team
- To "act as a unit"



Cleveland Clinic Today

- Academic Medical Center + 9 Hospitals in Ohio
 4 18 Family Health Centers
- Facilities in Florida, Las Vegas, Abu Dhabi
- >4 million Patient Visits
- 41,000 Employees
- > 3,000 Physicians & Scientists



Cleveland Clinic

Miller Family Pavilion 2012

Clinic Building 1921



Lou Ruvo Center for Brain Health - Las Vegas, NV





Group Practice Model

- Physician-led, not for profit enterprise
- Staff physicians employed & salaried
- Annual professional reviews/ reappointments
- No volume incentives
- Expectation of excellence

Multiple Implicit Directives with Uncertain Directions

- Accountable care
- ED visit and hospitalization prevention
- Consumerism and satisfying patient expectations

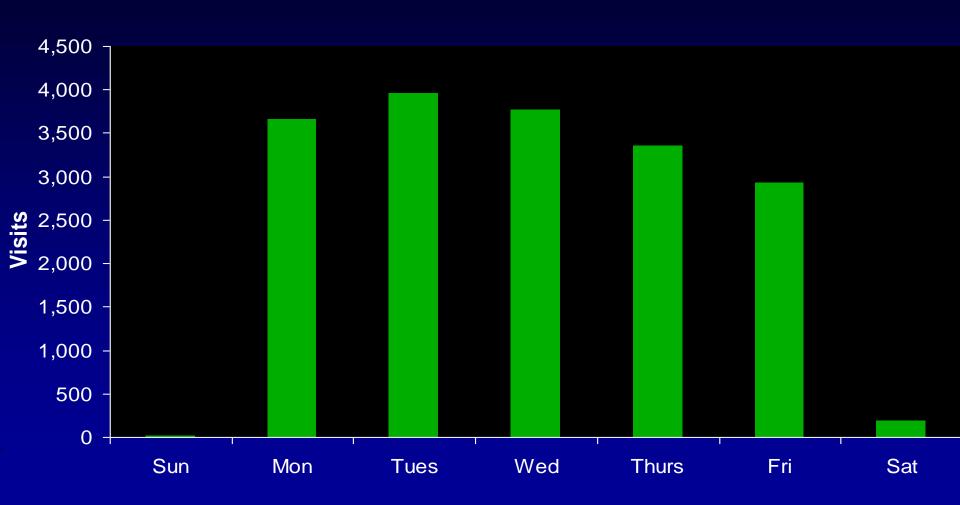
Study Data

- June 2010 through December 2012
 - 177,114 total visits
 - 17 service lines
- Visits
 - New = new patient to Cleveland Clinic
 - New Inst = new patient to service line
 - Established = established CC patient
- Only visits with returned survey responses and days wait < 100 days

Definitions

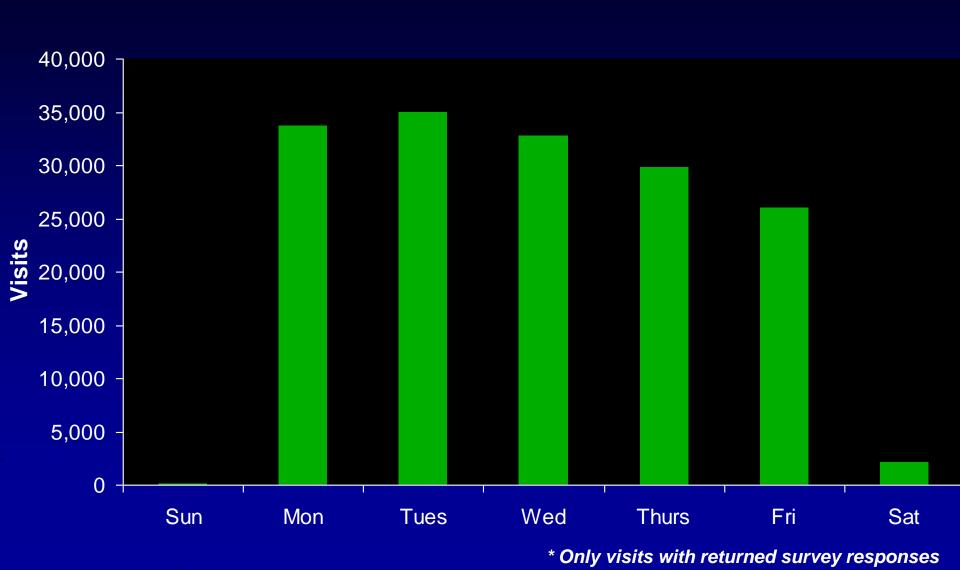
- Days Wait
 - Calendar days between when appointment was scheduled and the appointment date (including weekends).
- Appointment When Wanted
 - Outpatient provider survey, stratified random sample
 - 'Very Good' response to survey question, "Ability to get an appointment for when you wanted."
- Service Area
 - Home zip codes mapped to primary geographic service areas

New Appointments by Day of Week June 2010 through December 2012

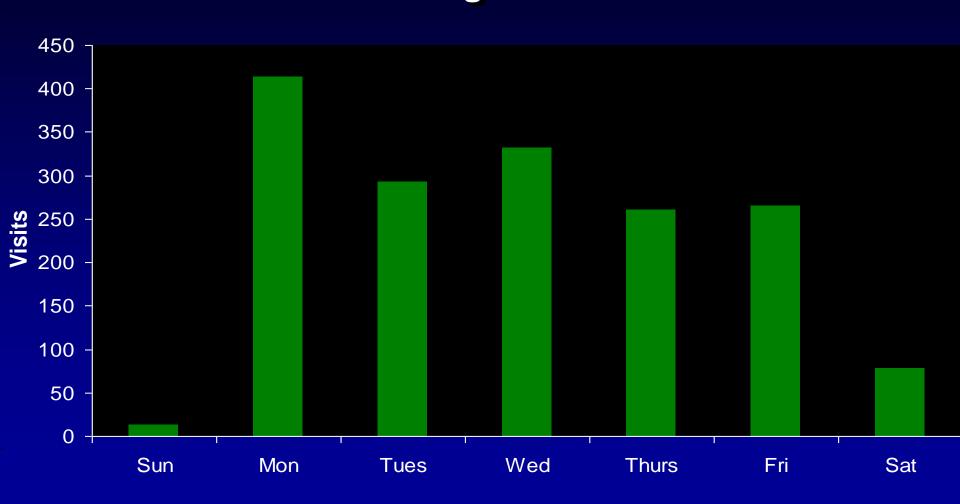


^{*} Only visits with returned survey responses

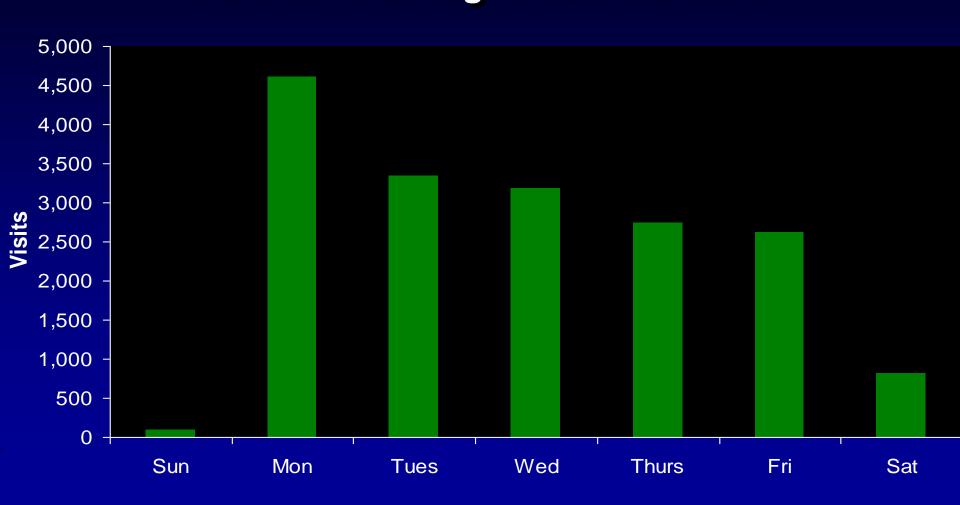
Established Appointments by Day of Week June 2010 through December 2012



New Same Day Appointments by Day of Week June 2010 through December 2012

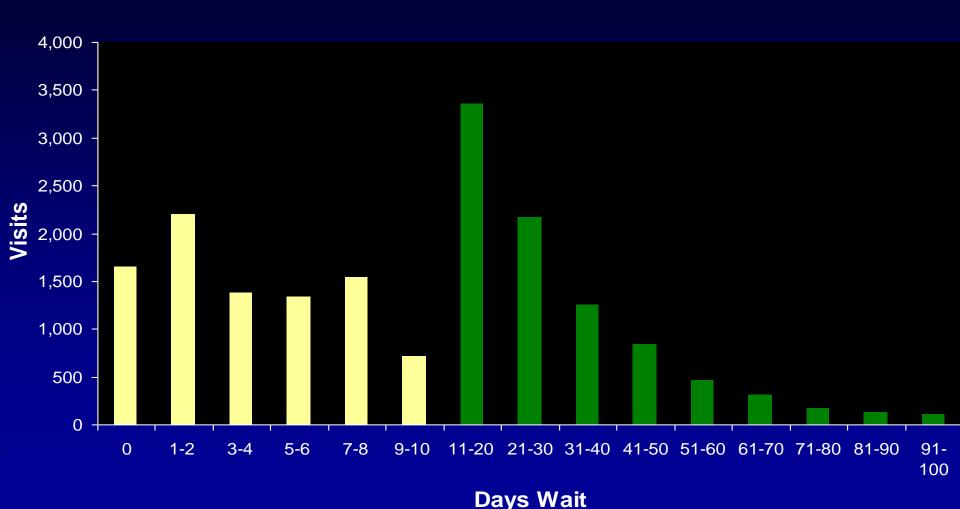


Established Same Day Appointments by Day of Week June 2010 through December 2012



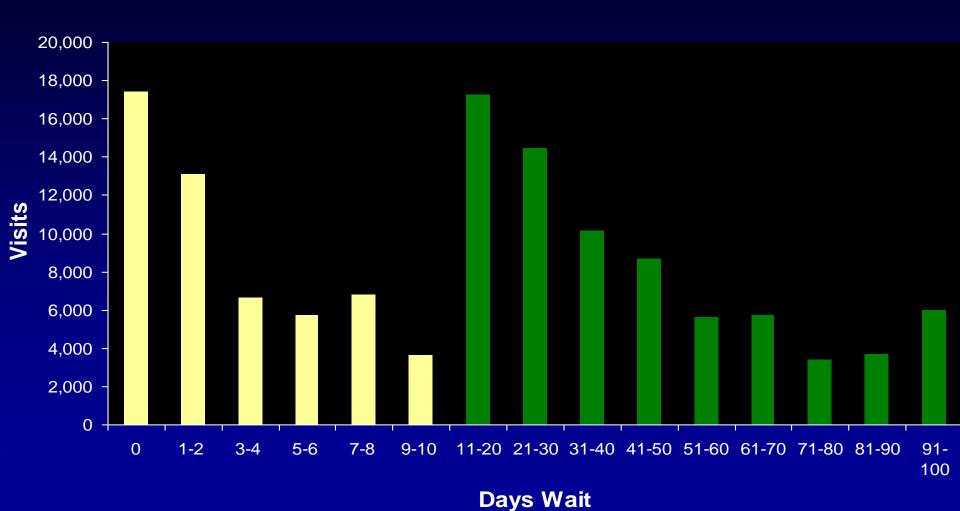
^{*} Only visits with returned survey responses

New Visit Days Wait Frequency June 2010 through December 2012



* Only visits with returned survey responses

Established Visit Days Wait Frequency June 2010 through December 2012



* Only visits with returned survey responses

Summary Findings

Female

Service Lines

Locations

Providers

New Visits

Established Visits

46.5 (46.1-46.9)	54.7 (54.6-54.8)		
55.1% (54.3-55.8)	59.5% (59.3-59.8)		
19	19		
75	85		
1,677	2,203		

Days Wait

Appt Wanted – All

Appt Wanted – Same Day

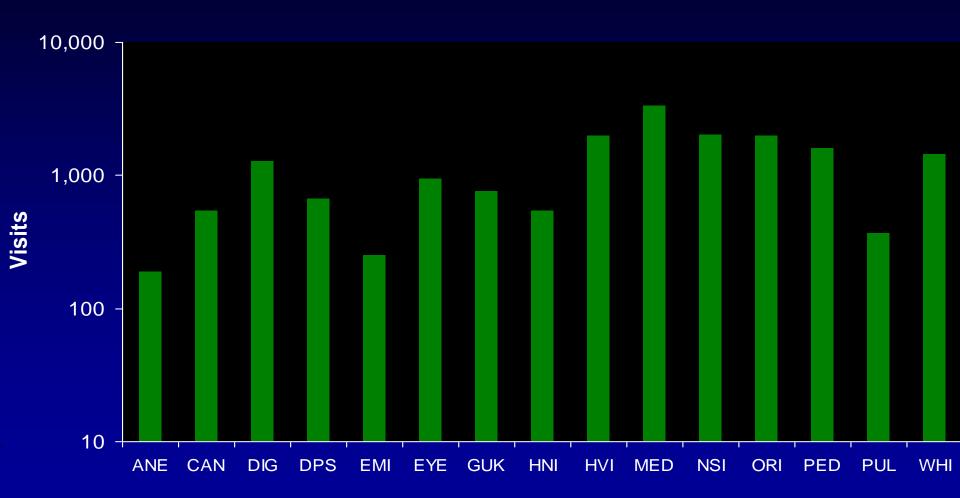
4.44 (4.42-4.45)

4.59 (4.55-4.63)

4.39 (4.38-4.40)

4.55 (4.54-4.56)

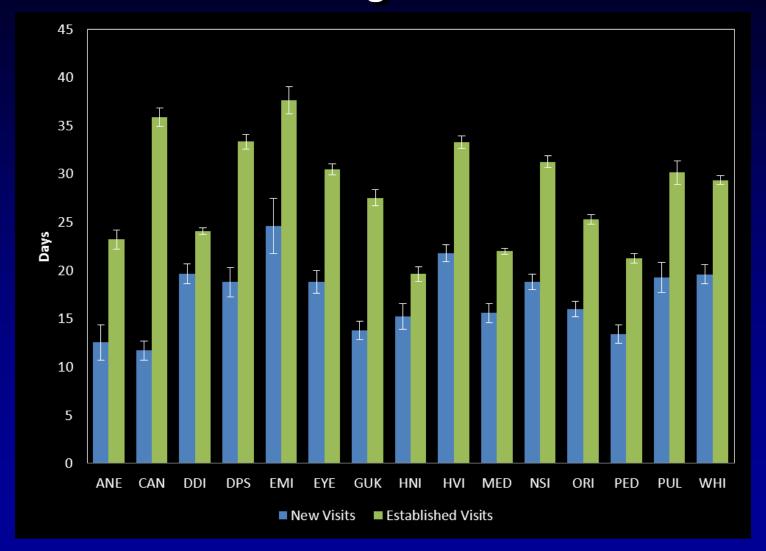
New Appointments by Service Line June 2010 through December 2012



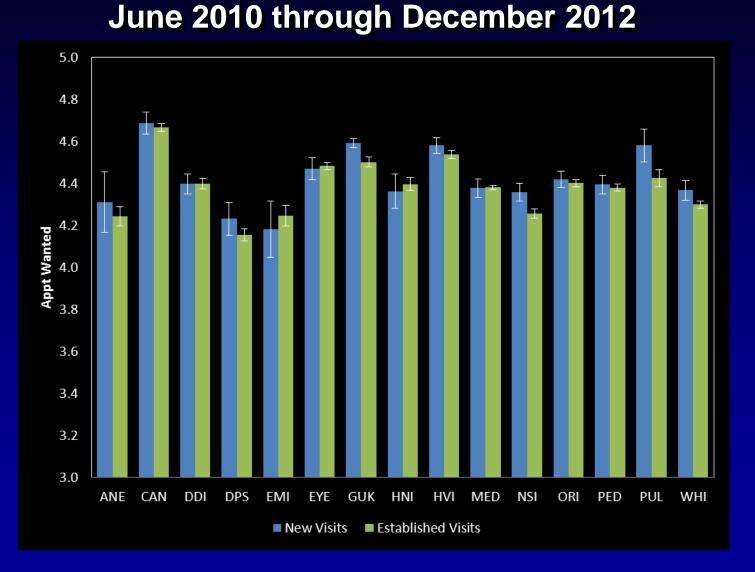
Established Appointments by Service Line June 2010 through December 2012



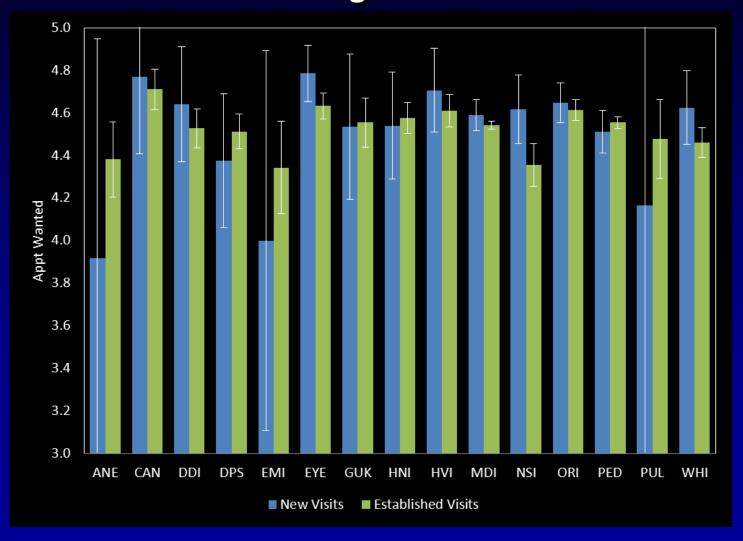
Mean Days Wait by Service Line June 2010 through December 2012



Satisfaction with Appointment When Wanted by Service Line



Satisfaction with Appointment When Wanted Same Day Appts by Service Line June 2010 through December 2012



Travel Distance

Same Day Appts

Service Area
Beyond Srvc Area

13.8%
5.5%

	New Visits	Established Visits
Days Wait		
Service Area	15.5 (15.2-15.8)	25.7 (25.6-25.9)
Beyond Srvc Area	21.0 (20.4-21.5)	33.2 (32.6-33.9)
Appt Wanted – All		
Service Area	4.40 (4.38-4.42)	4.39 (4.38-4.40)
Beyond Srvc Area	4.52 (4.50-4.55)	4.52 (4.51-4.54)

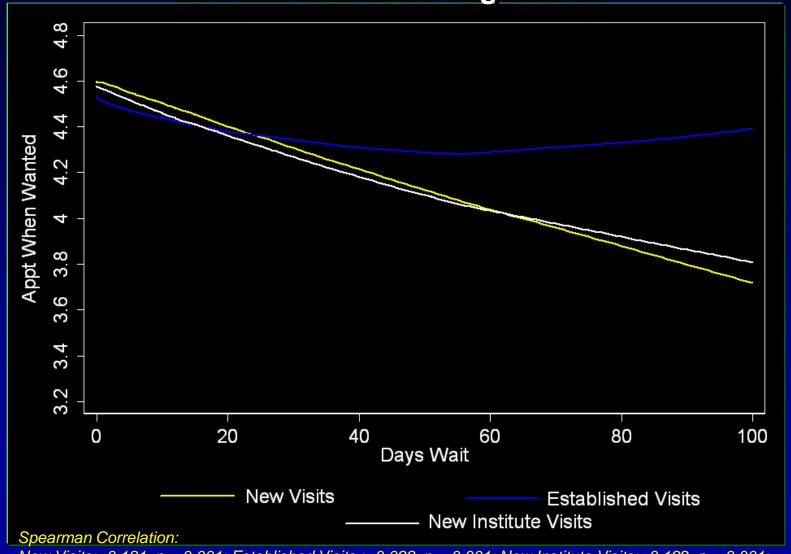
Relationship between patient satisfaction with appointment when wanted and days wait by service line

Effect of Days Wait

	New Visits	Established Visits
Same Day	4.59 (4.56-4.63)	4.55 (4.54-4.56)
1-7 days	4.58 (4.56-4.59)	4.50 (4.49-4.51)
8-14 days	4.47 (4.44-4.50)	4.40 (4.39-4.41)
15-21 days	4.42 (4.39-4.47)	4.37 (4.36-4.39)
>21 days	4.20 (4.18-4.23)	4.31 (4.30-4.32)

Appointment When Wanted by Days Wait June 2010 through December 2012

Lowess Smoothed Regression

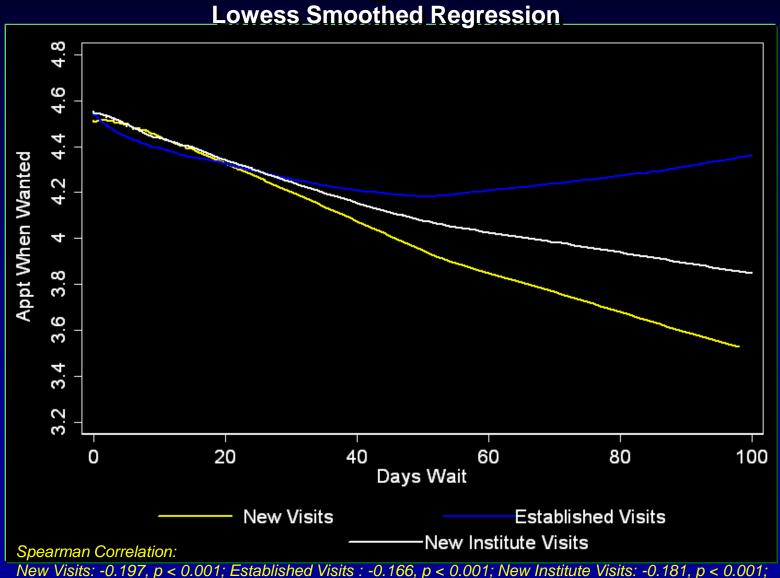


New Visits: -0.181, p < 0.001; Established Visits: -0.098, p < 0.001; New Institute Visits: -0.192, p < 0.001;

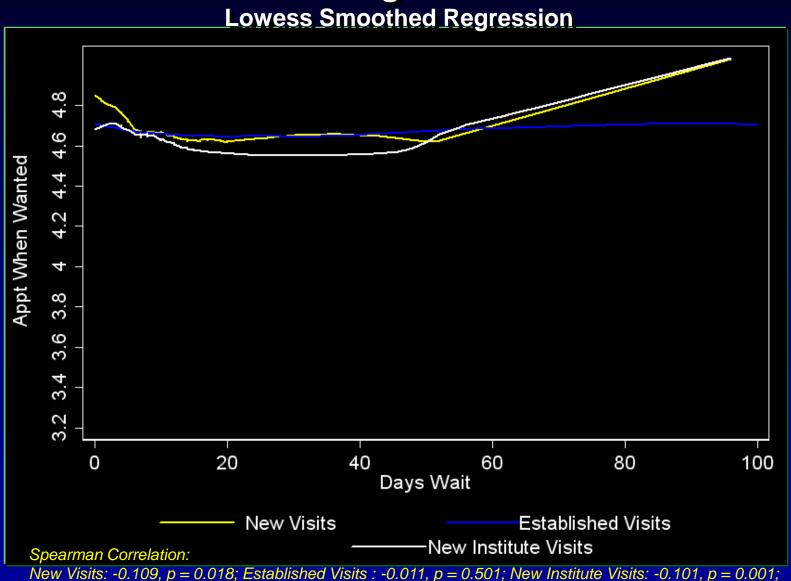
Medicine Institute Appointment When Wanted by Days Wait June 2010 through December 2012

Lowess Smoothed Regression 4.6 Appt When Wanted 4.2 3.6 3.4 3.2 20 40 60 80 100 Days Wait **New Visits** Established Visits New Institute Visits Spearman Correlation: New Visits: -0.233, p < 0.001; Established Visits: -0.117, p < 0.001; New Institute Visits: -0.182, p < 0.001;

Pediatric Institute Appointment When Wanted by Days Wait June 2010 through December 2012

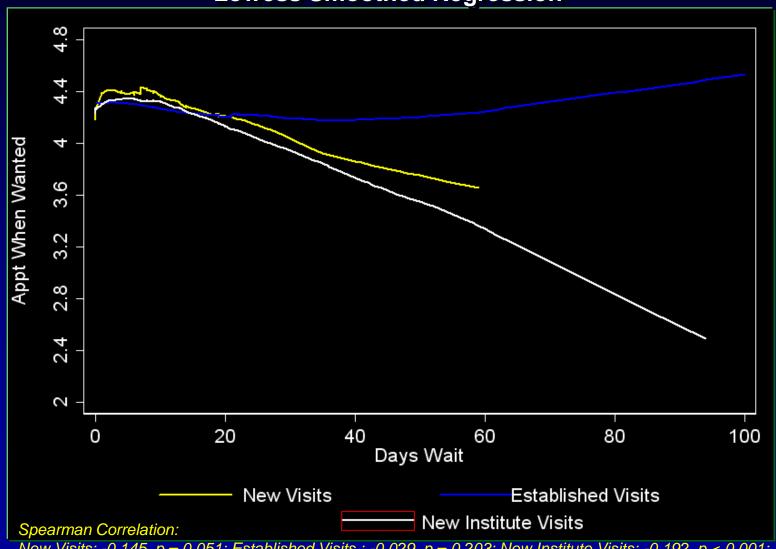


Taussig Cancer Institute Appointment When Wanted by Days Wait June 2010 through December 2012



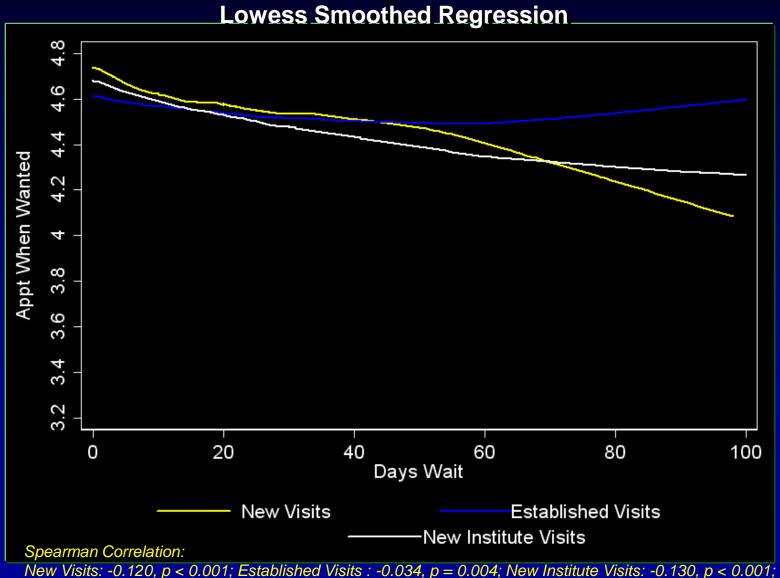
Anesthesia Institute Appointment When Wanted by Days Wait June 2010 through December 2012

Lowess Smoothed Regression

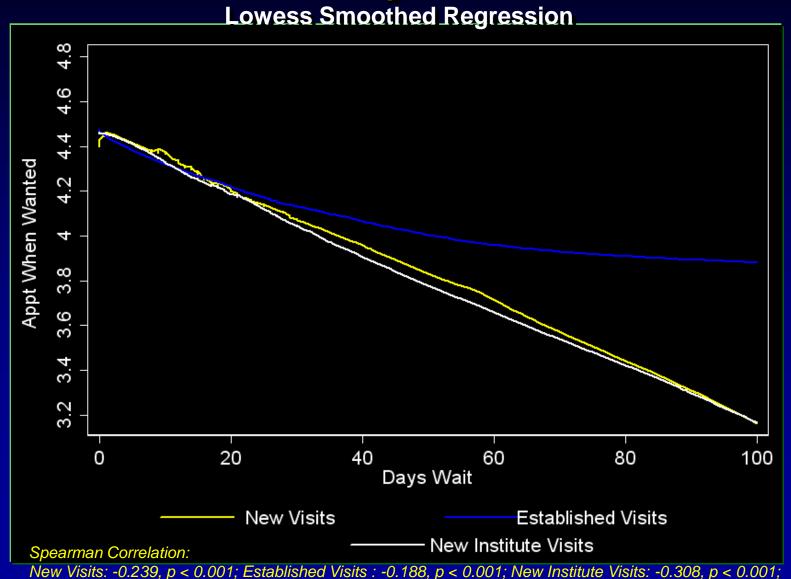


New Visits: -0.145, p = 0.051; Established Visits: -0.029, p = 0.203; New Institute Visits: -0.192, p < 0.001;

Heart and Vascular Institute Appointment When Wanted by Days Wait June 2010 through December 2012



Derm & Plastic Surgery Institute Appointment When Wanted by Days Wait June 2010 through December 2012



Recap

- Established patients wait longer for appointments
- Same day appts are more likely week day and result in higher satisfaction
- Longer travel distance is associated with lower rates of same day appts, higher days wait, but similar satisfaction
- New visits have a negative, linear relationship with longer days wait while established patients have a bowl shaped relationship
- There are notable differences in these relationships across service lines

Management Approaches for Stakeholders Engagement

Enterprise Business Intelligence

Business Intelligence is an interrelated set of processes...

Strategic & Business Planning

Financial Reporting

Operational Reporting

Performance Improvement

Enterprise Business Intelligence (EBI) is an *umbrella* term to describe a set of concepts and methods to improve business decision-making by *using information* in fact-based analytics, aligned with strategic priorities

Stakeholder Engagement Management Dashboards



Institute

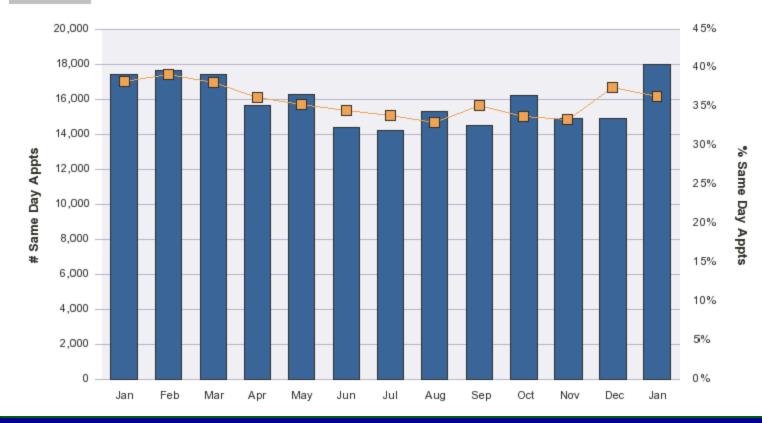
Medicine
Neurological
OBGYN
Ortho
Pediatric
Regional Operations
Respiratory
Urology
Wellness



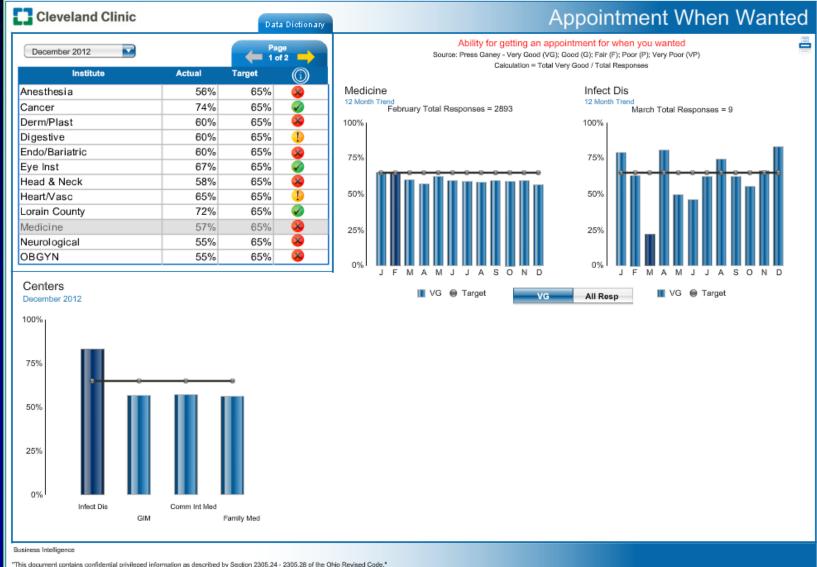
Same Day Clinic Access

Trend Report for Medicine by Center

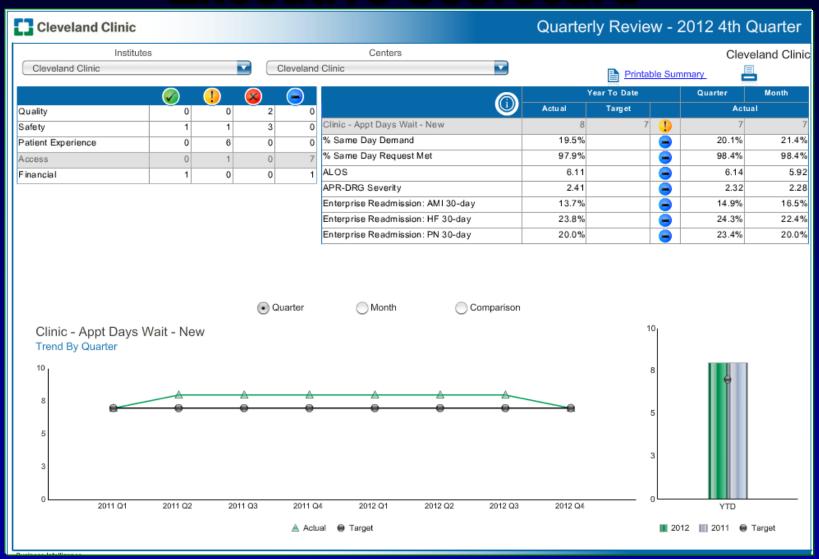




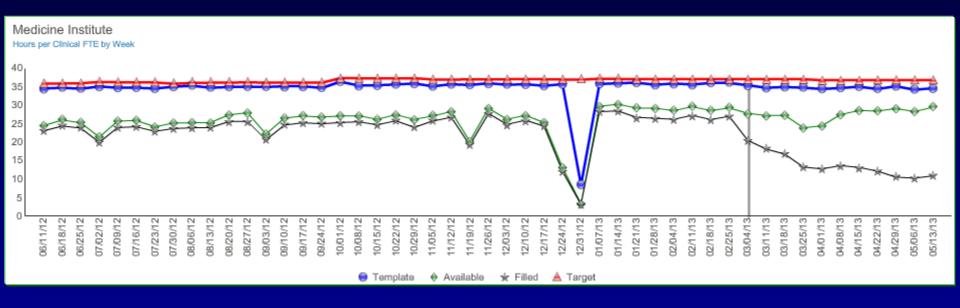
Stakeholder Engagement Management Dashboards



Stakeholder Engagement Executive Scorecard



Forecasting Service Line Volumes



Volume Forecasting

- Identify service lines with looming access challenges to guide recruitment efforts and resource planning
- Maintaining access mitigates lower satisfaction scores
- Physician shortage and ACA changes will pose significant challenges to access

Strategies to improve patient satisfaction with access to care

- Maintain access with innovative care delivery
 - Mid-level providers
 - Top-of-scope practice
 - Telemedicine/eVisits
 - After hours and weekend appointments
- Sub analysis of demographic and clinical factors predicting patients or conditions associated with lower satisfaction

Conclusions

- Satisfaction with access to care is directly related to wait time to appointment especially for new patients
- Patients are more willing to wait for subspecialists vs. primary care visits
- Tailored strategies to maintain access and perception of wait time will improve satisfaction scores

Cleveland Clinic

Every life deserves world class care.