Academic medical center sees 24% leakage reduction, 19% referral increase and improved patient access with par8o

business challenges

A large Harvard-affiliated academic medical center in Boston wanted to reduce patient leakage as part of its initiative to improve patient outcomes. As part of this plan, the health care system needed to streamline its referral process. First, they needed to put the responsibility of scheduling referral appointments in the hands of the provider, instead of relying on the patient to contact the provider and schedule the referral appointment. Second, they wanted to make it as easy as possible for its primary care providers (PCPs) to refer patients to its own specialists instead of specialists outside of its network; and third, the center's PCPs needed additional support when deciding if a patient required a specialist appointment. Lastly, the medical center wanted to be able to refer a patient to a department instead of an individual provider to both better manage its capacity and provide greater appointment access to its patients.

actions taken

The medical center chose to use par8o's referral management software in order to shift appointment scheduling responsibility to the hands of the providers. To meet the needs of the hospital, par8o added the ability to send a referral to a group of providers instead of an individual provider. When the customization was complete, the hospital implemented par8o's referral management system at 72 of its departments over three months.

To ease the referral process for the healthcare center's providers, par8o worked with the hospital to create a feature called TeamCare. With TeamCare, providers could request that a team of specialists review a patient's case to help determine whether the patient required a specialist consult.

The hospital also used par8o's urgency feature to prioritize referrals.

results

The academic medical center saw significant results in both reduced patient leakage and increased patient access and utilization.

24% reduction in patient leakage. Over 16 months, the client reduced its patient leakage by 24%. Overall patient leakage was reduced from 34% to 26%, exceeding the hospital's 30% patient leakage goal. In some specialties, such as neurosurgery, leakage was reduced by as much as 40%.

19% increase in internal referrals. In addition to reduced leakage, the client noticed a 19% increase in the number of referrals sent from PCPs to specialists, growing from a monthly average of 2,656 to 3,169.

5% increase in scheduled appointments. Small changes in provider initiative resulted in large changes in referral follow-through. The client used par8o's reports to conclude that contacting patients within a certain time frame increased the likelihood that the referral appointment was scheduled. Across 41,349 appointments, calling a patient within a half day resulted in an 84% chance that the patient would schedule the referral appointment. However, calling within 2.5 days reduced this likelihood to 79%. When applied to thousands of appointments, this difference is highly significant. In this instance, calling sooner resulted in an increase of 2,067 scheduled appointments.

13% decrease in time to appointment for urgent referrals. The client also saw a significant increase in the ability to schedule patients when needed due to group referrals and specifying referral urgency. Within 60 days of launching the par8o referral system, referrals marked as "urgent", or requiring an appointment within three days, resulted in a 13% decrease in the amount of time from when a patient requests an appointment to the appointment itself, known as "time to appointment". Similarly, patients who needed to be seen within one week saw a 37% decline in their time to appointment, and patients who needed to be seen within one month saw a 32% decline. Patients with non-urgent appointments saw a 43% increase in their time to appointment, which translates to increased availability for patients with more urgent appointments.

Increased specialist availability due to TeamCare. With Teamcare, PCPs learned that 55% of the time, a specialist appointment was not required. The 45% of the time that the appointment was needed, the patient's case was escalated to the appropriate specialty. TeamCare greatly improved collaborative decision-making resulting in the most appropriate follow-up care for the patient.