

Healthcare Trends & Topics

WEBINAR SERIES

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2022 BDO PATIENT EXPERIENCE SURVEY

Confronting the Care Factor

The Future of Physician-Patient Relationships

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Welcome



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Survey Profile

Age



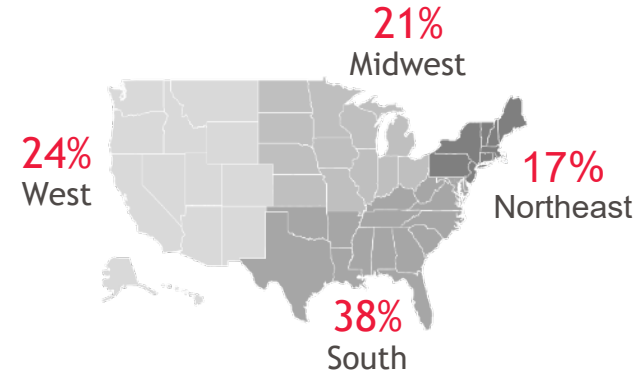
18-34	29%
35-44	17%
45-54	16%
55-64	17%
65+	22%

Race/Ethnicity



White (not Hispanic)	61%
Hispanic	17%
Black (not Hispanic)	12%

Region



Gender



HH Income



Less than \$50,000	29%
\$50,000-\$74,999	16%
\$75,000-\$99,999	13%
\$100,000+	39%

Education



High school graduate or less	33%
Some college, but no degree	32%
Bachelor's degree or higher	35%

Marital Status



Married	45%
Not married	55%

Urbanicity



Urban	29%
Suburban	50%
Rural	21%

Children in HH



Yes	36%
No	64%

Employment



Yes	59%
No	41%

2022 BDO Patient Experience Survey was conducted online within the United States between October 3 and October 5, 2022, among 3,037 adults aged 18 and over.

Key Findings



Access

91% of Americans have a healthcare provider for **routine medical care**, and 92% have some type of health insurance.



Delayed Care

58% of Americans admit to **delaying seeking routine medical care** in the past 12 months.



Cost Transparency

Nearly one in three Americans (31%) **haven't tried to obtain cost estimates** for their medical care.



Portal to Care

Roughly one in five Americans (19%) have **never used a patient portal**. Of those who have, 87% find it helpful.

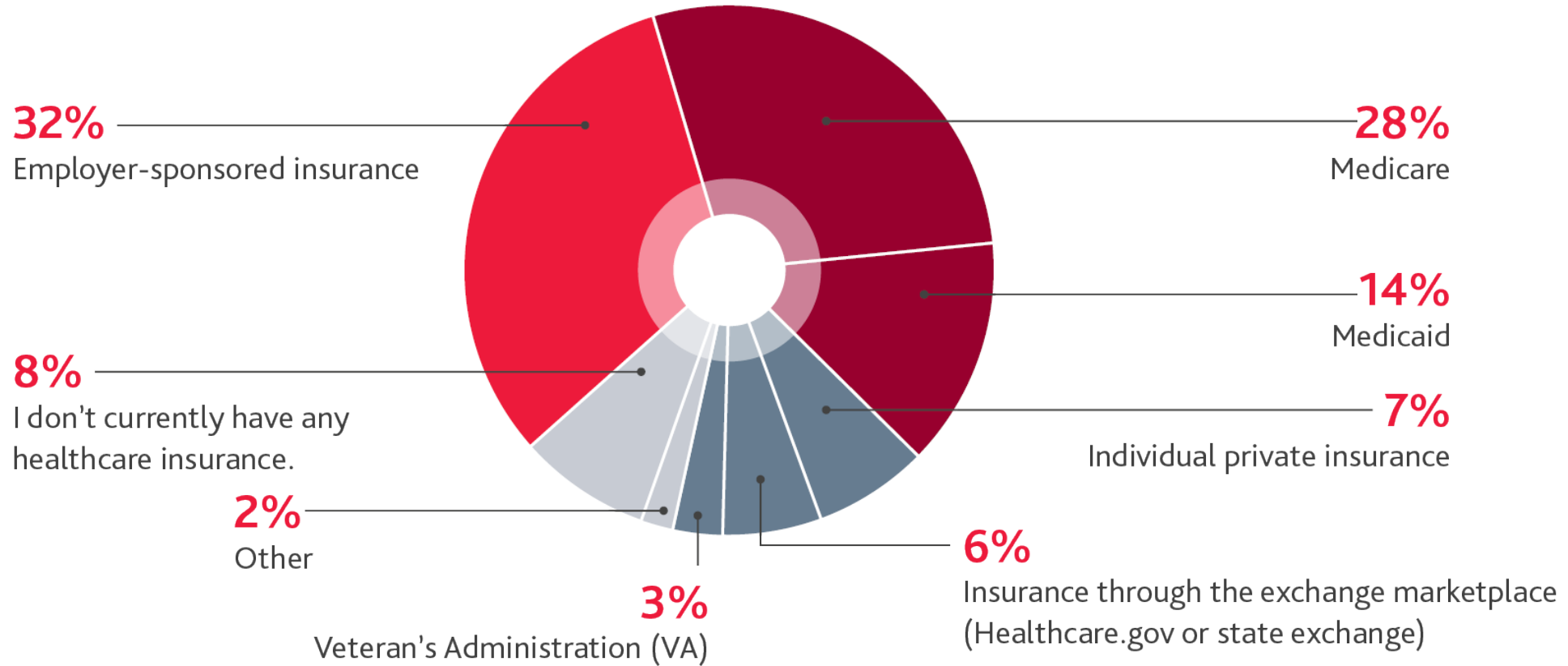


Friction

79% of Americans have encountered **frustrations** when seeking routine medical care, and **69%** have experienced frustration during a routine medical care appointment.

Patient Access

92% of Americans have some form of health insurance.





A deeper dive into the insured population.

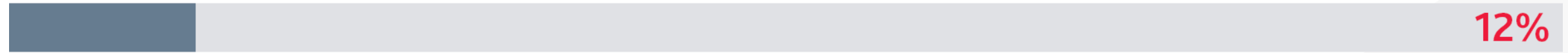
- ▶ Americans age 65+ are significantly more likely to have health insurance compared to other age groups.
- ▶ Americans with an annual household income of \$50k+ are significantly more likely to have health insurance coverage than Americans with a HHI of less than \$50k.
- ▶ Americans who live in urban and suburban areas are significantly more likely than rural Americans to have health insurance coverage.

91% of Americans have a Healthcare Provider for routine medical care.

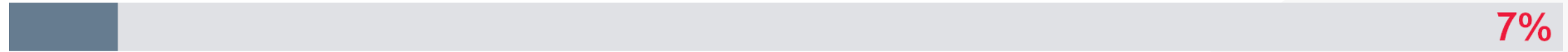
Primary care physician



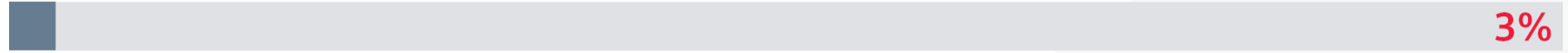
Primary care nurse/nurse practitioner or physician assistant



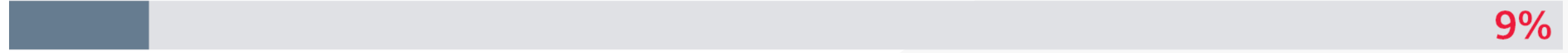
Specialist



Other type of healthcare provider



None – I do not have a healthcare provider that I typically see for routine medical care



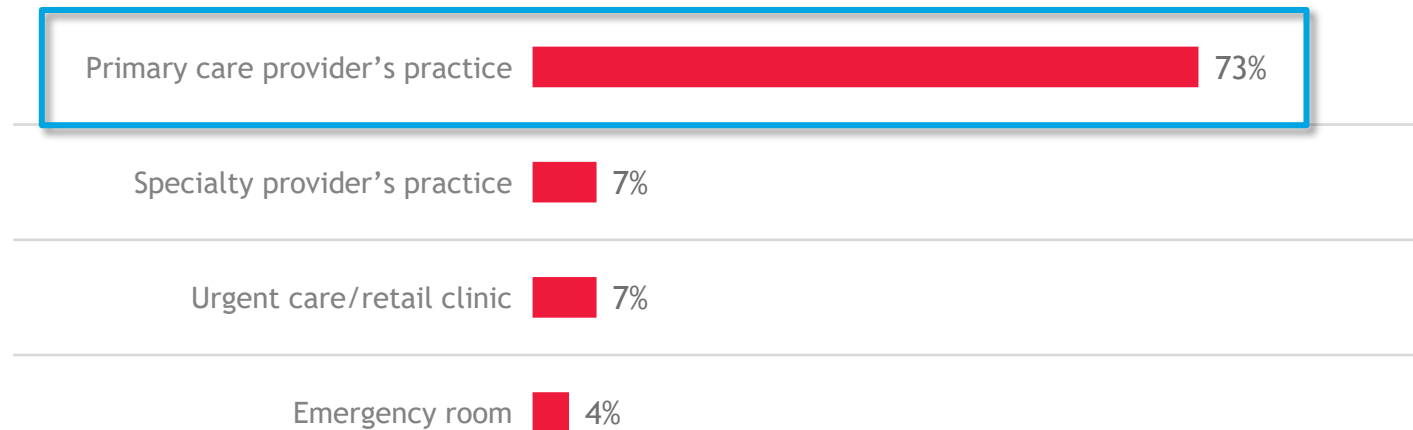


Of those 91% of Americans...

- ▶ Younger Americans (ages 18-44) are significantly less likely to have a healthcare provider they typically see for routine medical care compared to their older counterparts, but particularly those age 65+.
- ▶ Americans with an annual household income of under \$50k are the least likely to have a healthcare provider they typically see for routine medical care.
- ▶ Suburban Americans are more likely than rural Americans to have a healthcare provider they typically see for routine medical care.

Here's where most Americans go for their routine medical care.

Location for Routine Medical Care



There is clearly an income-related disparity among Americans when it comes to routine medical care.

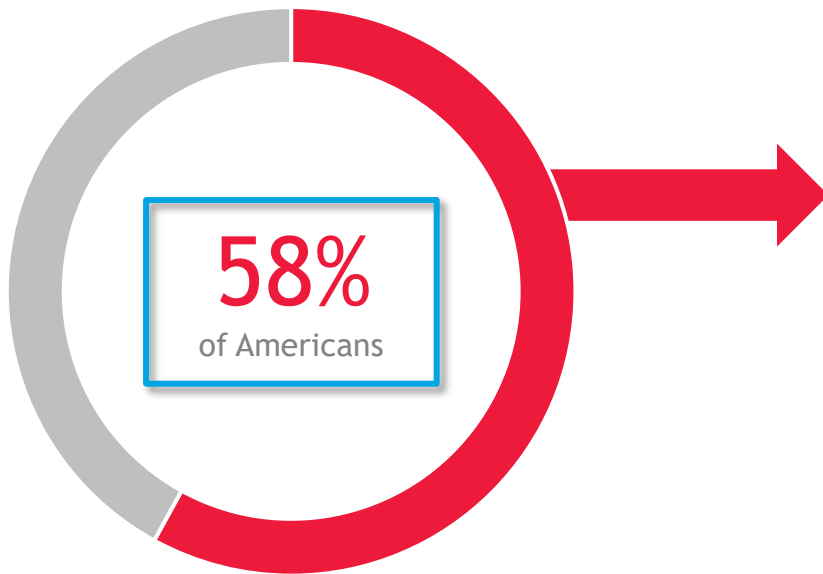
- ▶ Americans with an annual HHI of less than \$50k are significantly less likely than those with a HHI of \$50k or more to have health insurance coverage and to visit a primary care provider's practice for routine medical care.
- ▶ They are also more likely to end up at urgent care, a retail clinic, or the ER for routine medical care than those with an annual HHI of \$100k+.



Delayed Care

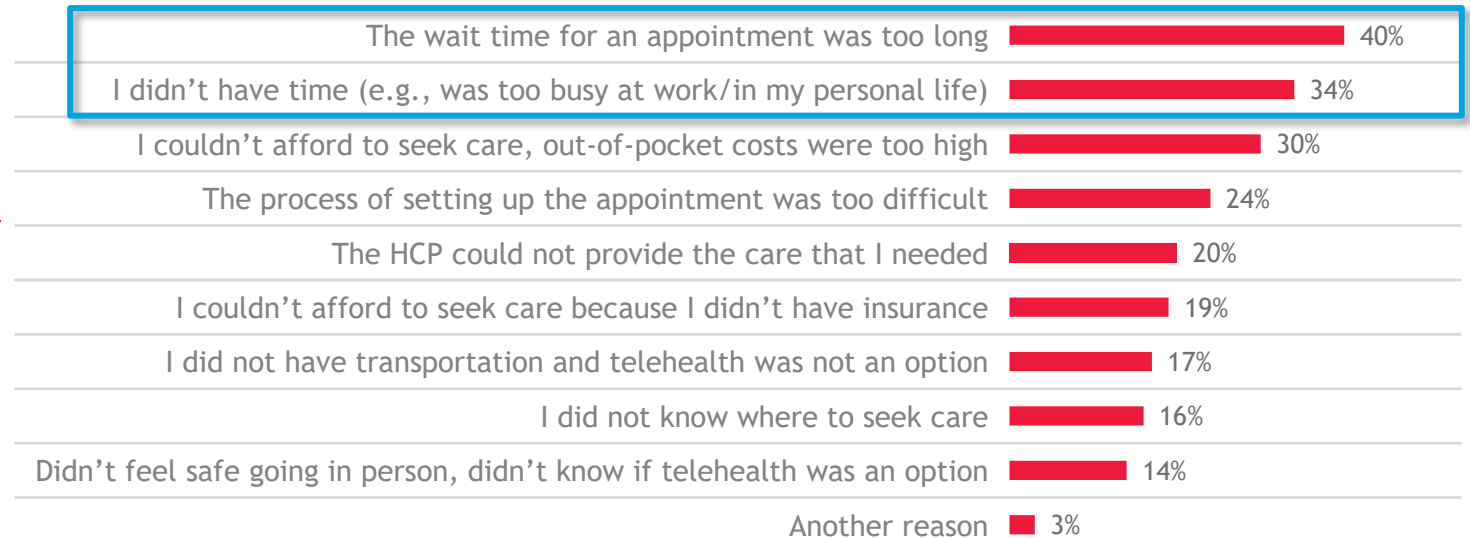
In the past 12 months, over half of Americans delayed seeking routine medical care. Among those who have, the top cited reasons are the long wait time for an appointment and not having the time due to work or personal reasons.

Delayed Seeking Routine Medical Care in the Past 12 Months



Reasons Why Seeking Routine Medical Care was Delayed

Among Those Who Have Delayed Seeking Routine Medical Care in the Past 12 Months



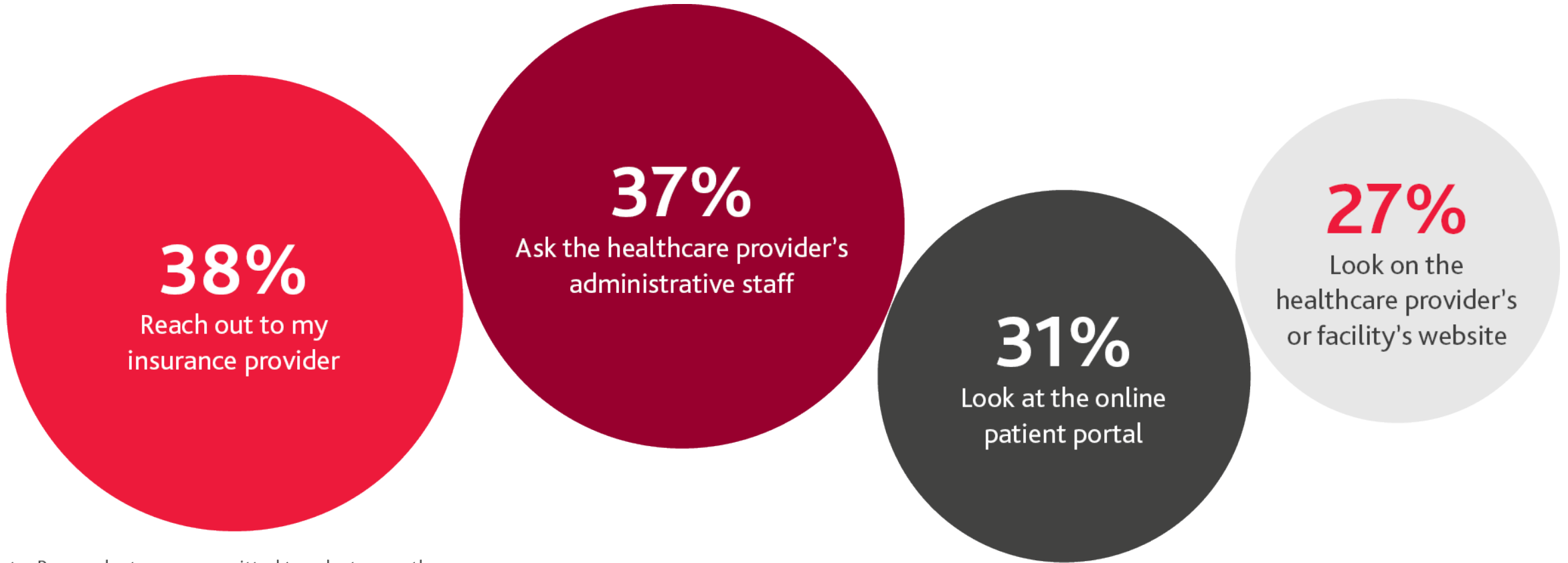
Reasons why seeking medical care was delayed, by demographic.

- ▶ While the wait time for an appointment is cited as the top reason for delaying care across all age groups, those age 18-34 are much more likely than older adults to mention lack of insurance, lack of transportation or not knowing where to seek care.
- ▶ Reasons for delays in seeking medical care are largely consistent across all income levels. Those with household incomes of 100k+ who delayed care are more likely than their counterparts to say it was due to difficulty setting up the appointment.
- ▶ Americans living in urban areas who delayed routine medical care are more likely than their suburban and rural counterparts to cite difficulty setting up appointments and not feeling safe to go in-person and not knowing about telehealth as an option.



Cost Transparency

69% of Americans have tried to obtain cost estimates for their care. Here's where patients go to easily obtain them.



Note: Respondents were permitted to select more than one response.



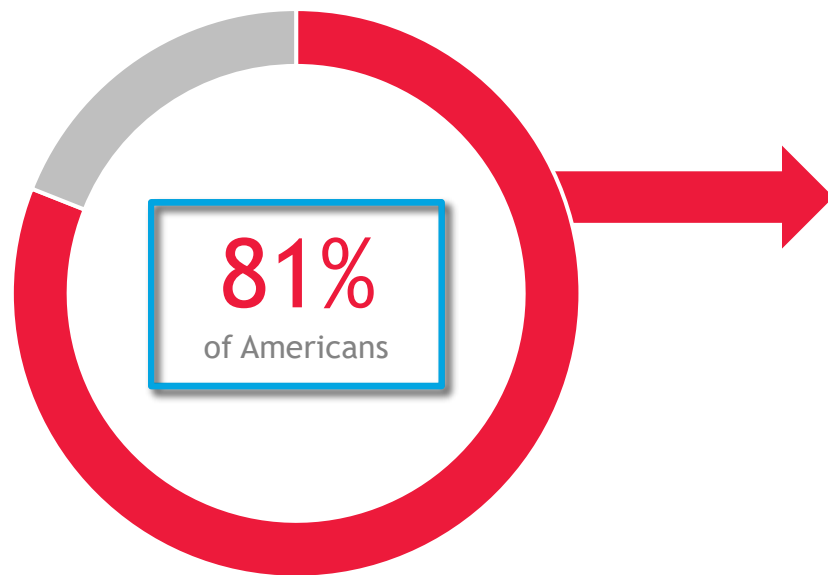
Obtaining cost estimates, by demographic.

- ▶ Among those who have tried to obtain cost estimates for medical care, Americans under age 65 are more likely to use online patient portals and those under age 55 are more likely to utilize the healthcare provider's or facility's website.
- ▶ Among those who have tried to obtain cost estimates for medical care, Americans with an annual HHI of \$100k+ are significantly more likely to look on their healthcare provider's website compared to those with an annual HHI of less than \$75k.
- ▶ Among those who have tried to obtain cost estimates for medical care, urban Americans are significantly more likely to easily obtain cost estimates by reaching out to their insurance provider, looking at online patient portal and looking on healthcare provider's website.

Portal to Care

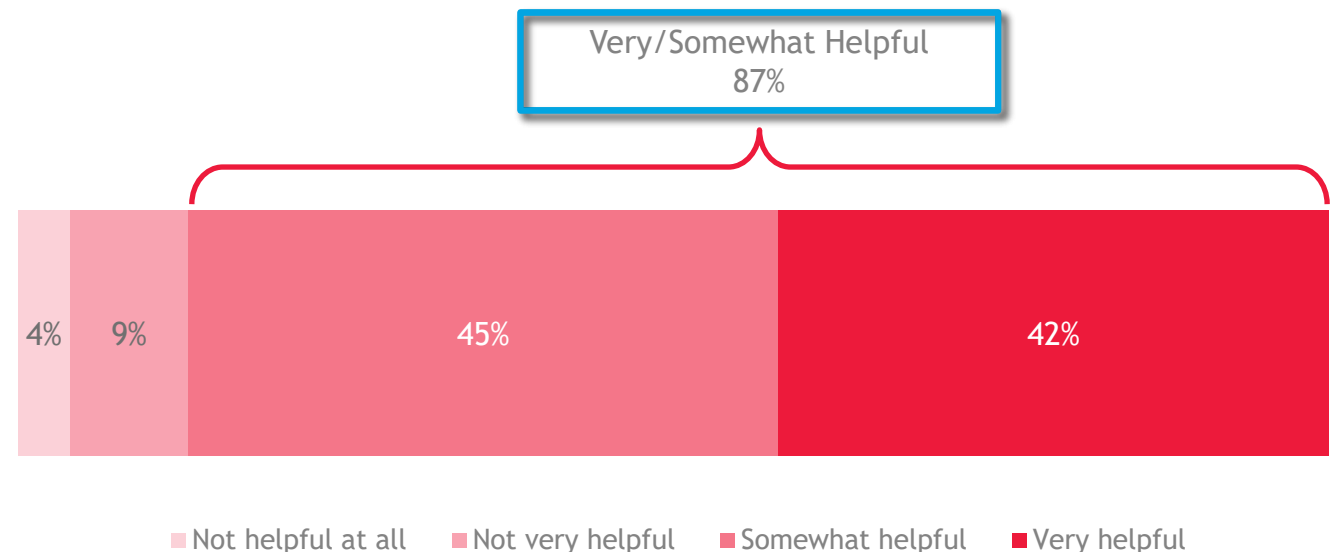
Over eight in ten Americans (81%) have used online patient portals. Among those who have used them, a large majority find them helpful.

Online Patient Portal Usage



Helpfulness of Online Patient Portals

Among Those Who Use Patient Portals





Who is most likely to use patient portals?

- ▶ Not surprisingly, the incidence of using online patient portals is notably higher among younger Americans, particularly those 18-54.
- ▶ Americans in households netting six figures or more annually are by far the most likely to use online patient portals.
- ▶ Americans in urban and suburban areas are significantly more likely to use online patient portals compared to those living in rural areas.

Patient Frustrations

79% of Americans encountered frustrations when seeking care. Here are their top frustrations:

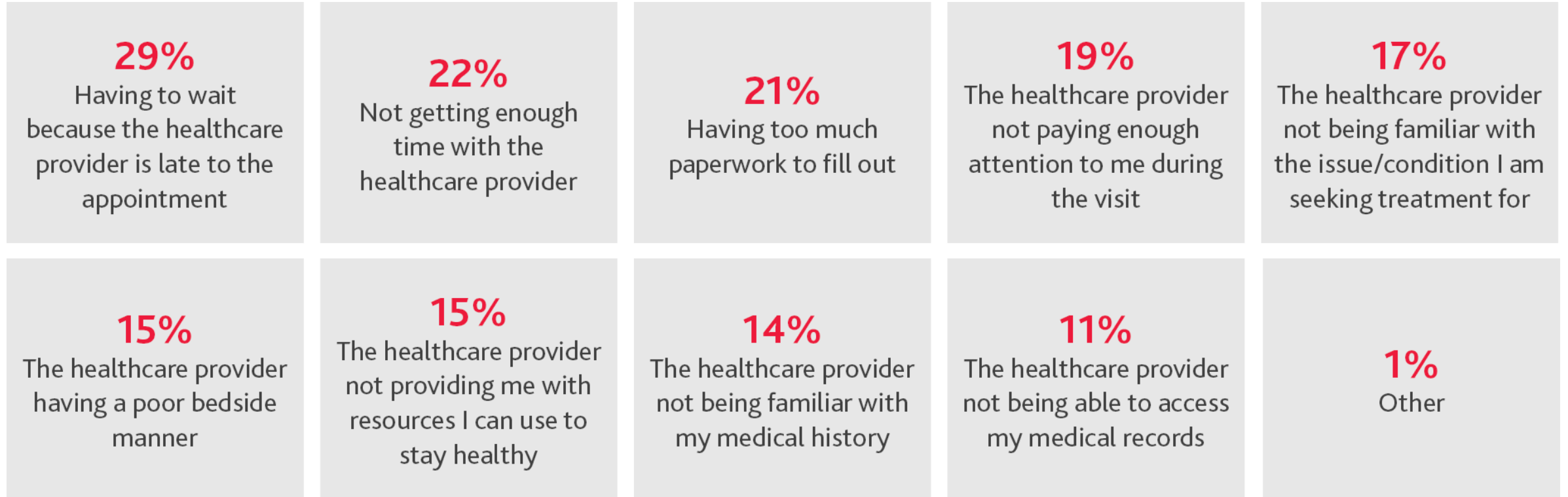


Note: Respondents were permitted to select more than one response.

Patient frustrations before the appointment.

- ▶ When seeking routine medical care, younger Americans (age 18-44) are much more likely than those age 55+ to experience frustration, particularly around finding a HCP who meets their needs, treats their condition, and verifies coverage.
- ▶ Americans with annual household incomes of \$100k+ are more likely to experience frustration when seeking routine medical care than Americans with household incomes of less than \$50k.
- ▶ Urban Americans are much more likely to experience frustration when seeking routine care - finding the right HCP to treat or diagnose their condition appears to be particularly challenging for them, perhaps due to a lot of choices available.

69% of Americans encountered frustrations at routine care appointments. Here are their top frustrations:



Note: Respondents were permitted to select more than one response.

*Includes both in-person and telehealth visits

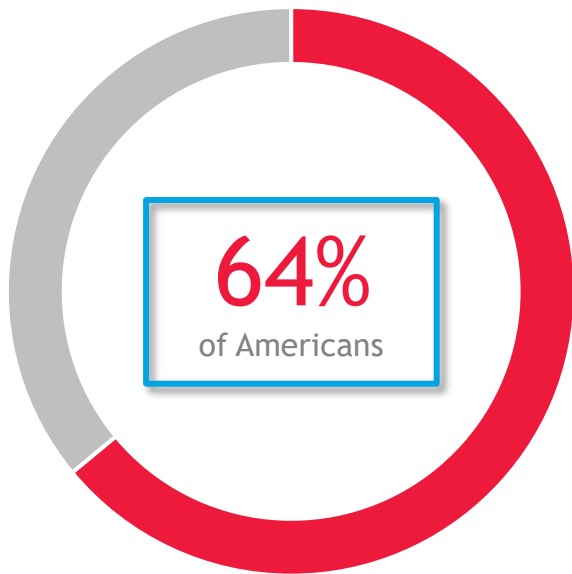


Patient frustrations during the appointment.

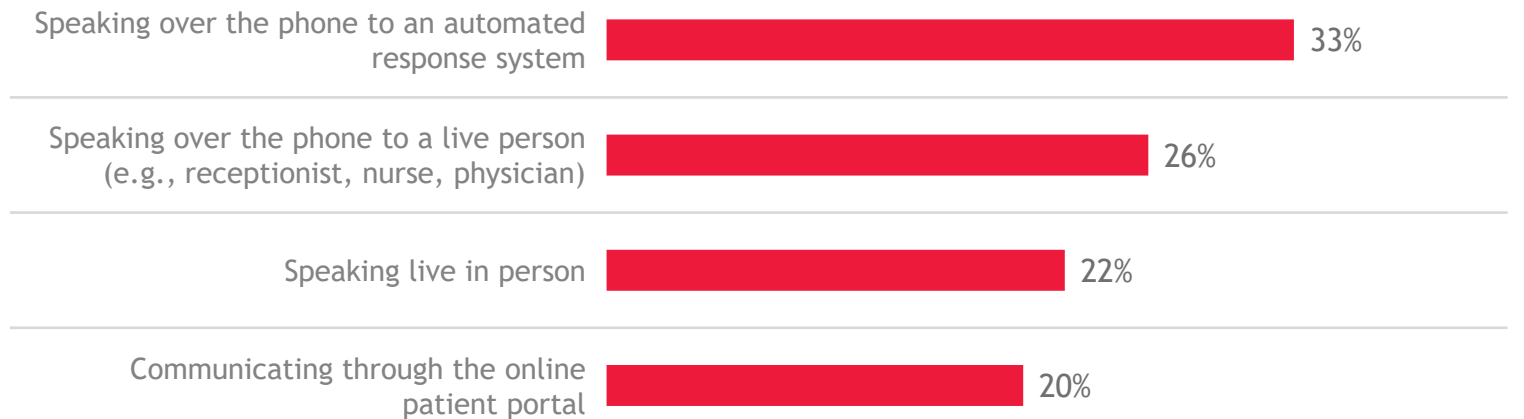
- ▶ Younger Americans are significantly more likely to experience frustration during routine appointments, and much more often complain that the healthcare provider does not pay enough attention to them or is not familiar with their issue/condition.
- ▶ Overall, Americans with a household income of \$50k-\$74.9k and \$100k+ are more likely to experience frustration at routine visits than their counterparts. Wait time appears to be much more of an issue for those with incomes of \$50k+.
- ▶ Urban Americans are the most likely to experience frustration during routine visits and are more likely to complain about the healthcare provider not paying enough attention to them or not being familiar with their issue/condition.

Approximately two-thirds of Americans experience frustration when communicating with a Healthcare Provider. Frustration is most likely to occur when speaking over the phone to an automated response system.

Experience Frustration When Communicating with a HCP



Specific Frustrations When Communicating with a HCP



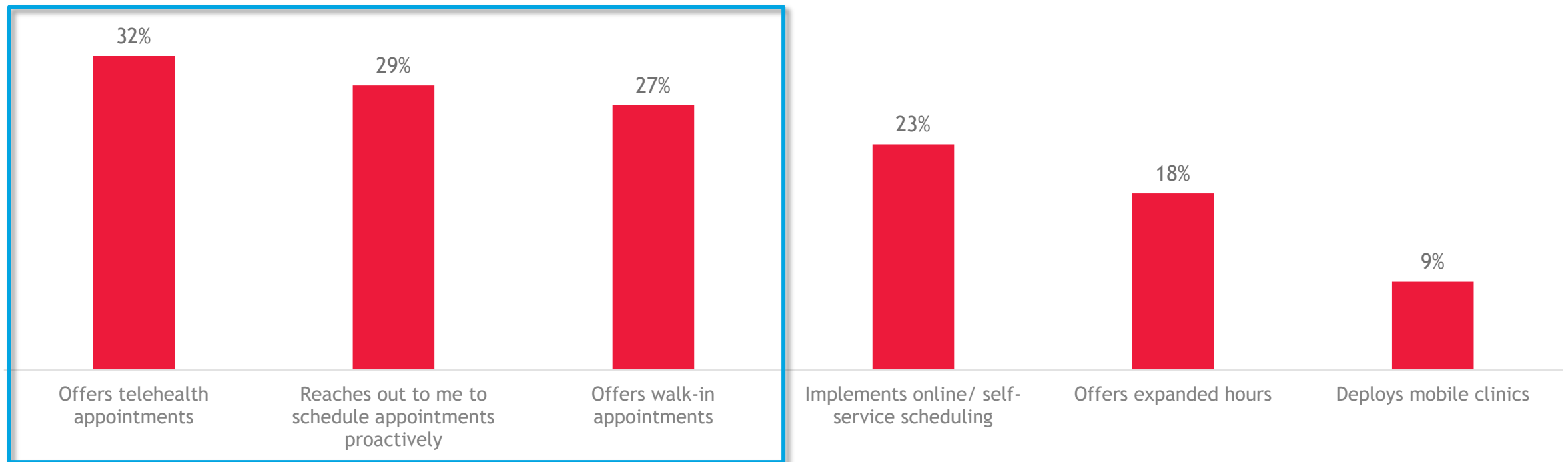
Specific frustrations when communicating with a Healthcare Provider.

- ▶ Younger Americans ages 18-34 are much more likely to report being frustrated when communicating with a healthcare provider over the phone, in person, or through the online portal compared to those age 55+.
- ▶ Americans with a household income of \$100k+ are more likely to be frustrated when speaking over the phone, with an automated response system or a live person, as well as through an online patient portal compared to those with a household income of less than \$50k.
- ▶ Urban Americans are significantly more likely to be frustrated speaking to a live person, over the phone or in person, than their suburban and rural counterparts.

Patient Preferences

Roughly three in ten Americans indicate that their Healthcare Providers make it easier for them to receive care by offering telehealth appointments, proactively reaching out to schedule appointments, and offering a walk-in appointment option.

Ways in Which HCPs Make it Easier for Patients to Receive Care



BASE: ALL QUALIFIED RESPONDENTS (n=3,037)

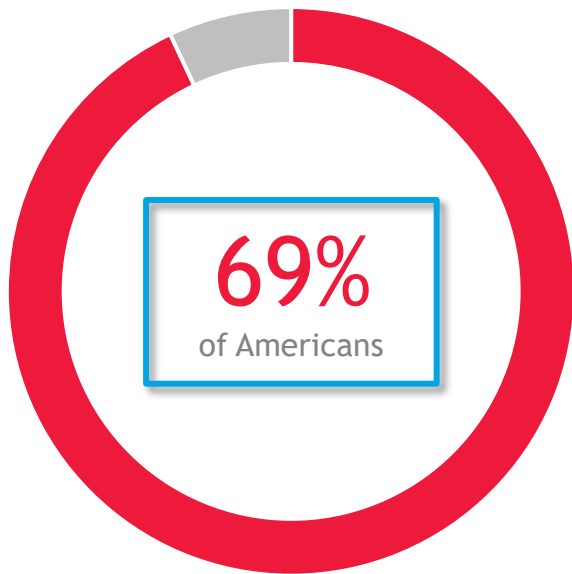
Q9. Which of the following does your Healthcare Provider(s) do, if anything, to make it easier for you to receive care? Please select all that apply.

How do Healthcare Providers make it easier for Americans to receive care?

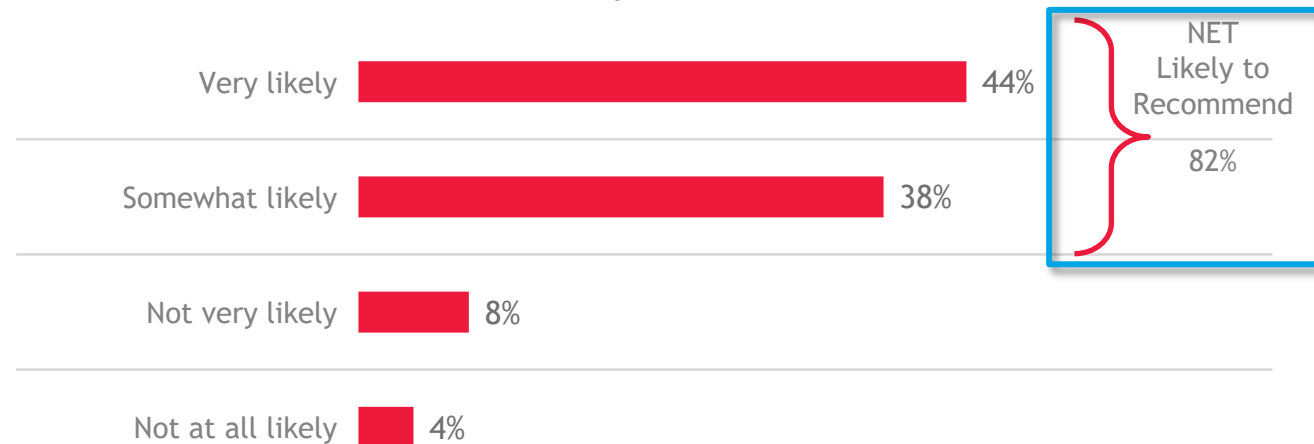
- ▶ Americans under the age of 55 are more likely than those age 55+ to report that their healthcare providers offer walk-in appointments, implement online/self-service scheduling, expanded hours, and deploy mobile clinics.
- ▶ Americans with an annual HHI of \$100k+ are more likely than those with an annual HHI of less than \$75k to report that their healthcare providers make it easier for them to receive care by offering telehealth visits, expanded hours and implementing online/self-service scheduling.
- ▶ Overall, urban Americans are more likely than others to report their healthcare providers offering ways to make it easier for them to receive care, particularly reaching out to schedule visits, implementing online scheduling and/or expanded hours and deploying mobile clinics.

69% of Americans have a Primary Care Physician (PCP) and around four in five are likely to recommend their PCP to family and friends.

Have a Primary Care Physician



Likelihood to Recommend PCP to Family and Friends





Does age, household income or urbanicity affect who would recommend their Primary Care Physician?

- ▶ Americans ages 65+ are more likely to say they would recommend their PCP than those ages 18-34.
- ▶ Americans with an annual household income of \$100k+ are significantly more likely than all other income groups to be likely to recommend their PCP to family and friends.
- ▶ There seems to be a strong consensus among all urbanicities when it comes to the likelihood of recommending their PCP to family and friends.

Patient Access in Action

An Optimal Patient Access Model Improves:

Patient access
and engagement

Market share

Long-term cost
efficiency

The patient
experience

Financial
performance



Increasing Revenue by \$94 Million Through Patient Access Transformation

CHALLENGE

An integrated delivery network was experiencing with long wait times for appointments, a decrease in provider productivity and loss of market share to competitive health systems.

APPROACH

BDO addressed the organization's challenges in the following ways:

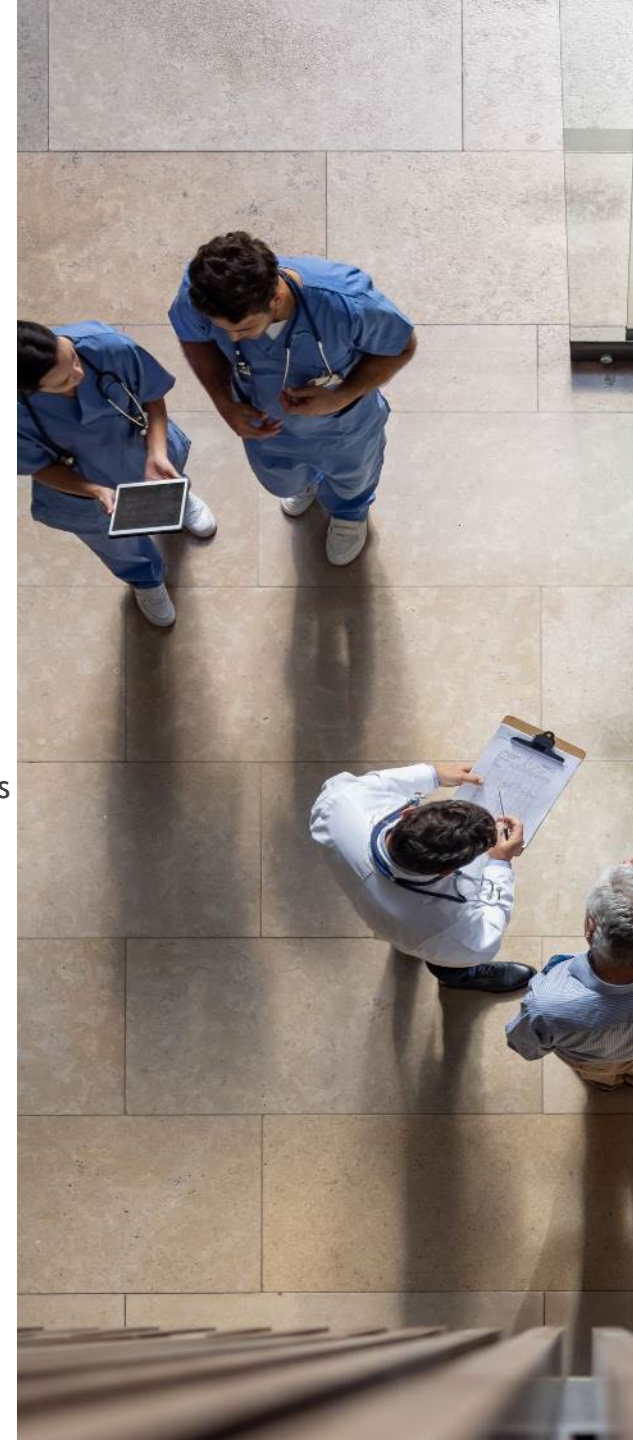
- ▶ Expanded and accelerated direct self-service scheduling capabilities through the organization's patient portal and consumer-facing website
- ▶ Built a more efficient administrative staffing model based on automation to facilitate practice growth and reduce administrative burden on staff
- ▶ Addressed physician moral injury to reduce physician turnover
- ▶ Improved asset utilization

RESULT

After one year of engaging BDO:

- ▶ Revenue to system increased by \$94 million
- ▶ Professional revenue from new patient appointments increased by \$12 million
- ▶ Scheduling lag decreased by 60%
- ▶ The number of no shows decreased by 50%
- ▶ Call center costs decreased by \$3.4 million

In addition, since this engagement has been completed, operational efficiency has improved by 10% across team and client productivity and the organization's bump rate has decreased by 50% as a result of cleaner schedules, which reduced provider- initiated cancellations.





Improving Patient Satisfaction Through Referral Management Strategy Optimization

CHALLENGE

An academic medical center was experiencing referral leakage to competitive health systems due to long wait times.

APPROACH

To enhance the patient referral experience, BDO:

- ▶ Built the foundation to support high-quality integrated and coordinated patient care access
- ▶ Implemented consistent streamlined referral workflows, supported by optimized Epic functionality
- ▶ Implemented a cross-entity governance structure
- ▶ Developed a future state roadmap with supporting recommendations

RESULT

- ▶ Optimized 85 referral order composers cross- entity with department collaboration
- ▶ Deactivated 158 unused work queues
- ▶ Removed over 25,000 erroneous referrals from work queues
- ▶ Automatically authorized 14,200+ referrals via rule issue identification and correction

Has your organization been thinking about the patient experience?
 Download these checklists and insights www.bdo.com/healthcare

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8 WAYS TO GET THE MOST OUT OF YOUR EHR SYSTEM

Struggling with your EHR system? You're not alone.
 EHR systems present healthcare organizations with the opportunity to improve workflows, enhance the patient experience and generate better clinical outcomes.
 Unfortunately, EHR systems aren't always optimized, which can cause more work — and greater headaches — for both your clinicians and patients.

Want to know how to get the most value out of your system?
 Check out these steps to ensure you're taking full advantage of all the benefits your EHR system has to offer:

- 1 Foster a partnership with IT.**
 To get the most value out of your EHR system, IT and Operations need to be working in tandem. An Informatics leader can act as a crucial bridge between the two departments to ensure everyone is speaking the same language.
- 2 Create an EHR Leadership Advisory Council.**
 This council should be prepared to advise on matters of quality of care, cost of care, clinician adoption of technology and future enhancements from the EHR.
- 3 Check your benchmarks.**
 If you're in a particularly competitive market, you should be benchmarking yourself against your peers to identify opportunities for improvement in areas like patient satisfaction and readmission rates. Then, explore how your EHR system can support your plans to address these gaps.

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Optimizing Patient Access: A Checklist

From the digital front door to developing lasting relationships.

At its core, patient access is about ensuring patients have access to high quality care and information they need in a timely and efficient manner. From a provider perspective, patient access is essential for efficient practice operations, balancing patient demand with clinical resource productivity, managing patient populations and successfully managing value-based contracts.

To ensure patients receive the care they need, provider organizations need to be as easy to navigate as possible. To that end, providers need to analyze key patient-facing systems and tap stakeholders to evaluate performance and implement digital solutions, including patient self-scheduling and online patient symptom evaluation. With the right digital tools, providers can expand patient access to both online and onsite care.

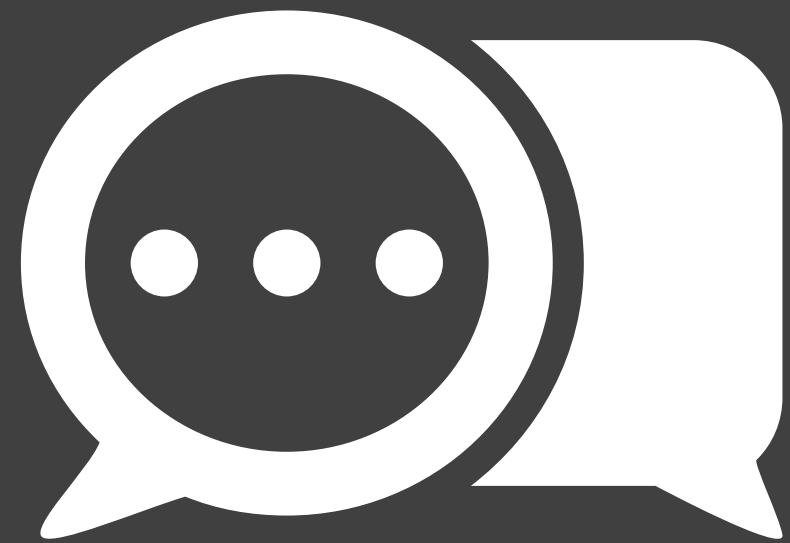
Improving patient access across an organization can be overwhelming. Fortunately, there are actions providers can take now to achieve immediate results for both onsite and virtual care: improve scheduling templates, refine referral strategies and upgrade call centers.

WHY SHOULD I OPTIMIZE PATIENT ACCESS?
 Organizations that optimize their patient access experience significant benefits. Some of the results our clients have achieved include:

- 50% reduction in bump rates
- \$94 million increase in system net revenue
- 50% decrease in no-shows
- \$12 million increase in net revenue from new patient appointments
- 60% decrease in scheduling lag
- \$3.4 million reduction in call center costs

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Q&A





Thank You!



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