



Doubling Down on Ambulatory Access

Access is a critical driver of strategic growth, consumerism and margin improvement.

Strengthening the commitment to ambulatory patient access is more critical than ever for healthcare organizations striving to grow programs, expand their consumer base and bend the cost curve. Securing relationships with current patients and offering new patients ready access to healthcare is increasingly important as competition with traditional and nontraditional providers and a self-service consumer culture become

more prevalent. Boards and organizational senior executives have a responsibility to work together to simplify consumer choice in health systems. Ambulatory patient access is a meaningful differentiator and important strategic advantage.

The access experience in many organizations still falls short of patient and organizational goals, despite significant investments to make health services

and information more convenient for both patients and referring providers. This includes the implementation of new call centers, scheduling systems, policies and customer service training programs. Using all existing capacity continues to be an area of significant untapped opportunity and an underlying limitation that will prevent other improvement efforts from reaching full potential. According to healthcare experts, a health system can typically serve 15–30 percent more patients with its current capacity, and also significantly improve margins by deploying a rigorous and structured approach to capacity management. Yet, many organizations continue to leave this money untapped, resulting in unmet patient demand and underutilized resources.

A Dual Imperative

Easing patient access and building lasting consumer loyalty begins by addressing consumers' needs and preferences for how, when and where they access care and information. Health system boards and management teams must consider several key questions (see box on this page) and focus on two interrelated imperatives:

- ***Expand the range of entry points or portals*** to enable consumers to conveniently access services and information.

Key Questions for the Board and Management Team

1. Do we have a well-understood vision of consumer access for our system and, if so, a robust strategy to achieve it?
2. How do we measure access performance, and are we setting goals based on how our consumers are defining timely, convenient and affordable services?
3. What mechanisms are we using to understand what our consumers prefer regarding access to our system?
4. Do we understand what makes our current consumers—patients, referring providers, payers and employers—choose us? And, do we understand their possible concerns regarding ongoing access to our health system?
5. Do we know what competitors in our market(s) are doing regarding access and how we will aim to differentiate ourselves?
6. How aligned with our vision for access are our physicians? Are they actively engaged and helping to lead improvement efforts?
7. Have we extended our reach to consumers through new and more convenient portals in an organized and thoughtful manner?
8. Are we actively managing provider capacity to optimize patient access, including creating a portfolio of options for both providers (e.g., physician, advanced practice providers and other providers) and modality (e.g., in person, virtual)?

- **Actively manage ambulatory capacity** to ensure timely and adequate appointment availability with preferred providers across a broadened portfolio of care modalities.

Expanding Entry Portals

Today's healthcare consumers have high expectations for convenience and accessibility and are demanding new ways to initiate contact, navigate the health system, and secure the services and information they need through a single phone call or digital interaction. Consumers are looking for a one-stop resolution that can address appointment scheduling, rescheduling and cancellations or allow them to acquire test results and referrals, whether connecting at the front desk, through a phone call, online system or mobile app. Health systems must take a much more active role in coordinating services for patients across a broader portfolio of entry portals to ensure patients are consistently guided to the right information, location and services within the health system. An option like a fully interactive mobile app that seemed a long way off only a few years ago is quickly becoming the new standard in healthcare.

Actively Managing Capacity

Expanded entry points are only meaningful if the health system can provide the capacity needed for patients to access care in a timely manner. A new app, online scheduling system or centralized service center is only beneficial if it facilitates timely appointments with preferred and appropriate providers. A seamless and consumer-oriented scheduling experience will still leave patients dissatisfied if it results in a two-month wait to see a specialist. While the traditional approach to increasing

capacity has been to hire more providers, operational improvements and new enabling technology can permit organizations to expand capacity with current levels of clinical staffing.

As new care modalities and communication tools, like virtual visits, e-consults and patient portals, expand across both primary and specialty care, health systems must actively manage provider capacity across *all* modalities of care to ensure optimal patient access. It is more critical than ever to have strong alignment with physicians around proactively identifying the right physician, advanced practice provider or other care provider for the preferred delivery modality (e.g., in-person or virtual). This will require clear expectations for provider time and scheduling practices, and decisions on how to incorporate advanced practice providers in a meaningful way. Managing provider capacity will also help address physician burnout because this work includes ensuring an appropriate care team and operational support.

Understanding Your Consumers and Planning

Health systems must continuously refresh their access strategies and deploy new competencies, technologies, modalities and portals to keep up with changing consumer expectations and requirements. The good news is that many organizations are already focusing on improving aspects of their access performance, improving their positioning to manage an increasingly complex array of access platforms and addressing new competitors in their markets. The same foundational competencies essential to optimizing performance in traditional

models based on seeing more patients in person are critical building blocks in supporting more advanced and consumer-oriented access strategies. Moving toward these more advanced strategies and platforms requires strong organizational alignment with goals, performance requirements and a vision for the future. It will also require new expertise around advanced call center management and digital health, and the active engagement of physicians and other stakeholders in successfully implementing and sustaining changes.

A clear assessment of where your organization is today and a vision of where it aspires to go together reflect a true understanding of the wants and needs of your organization's patients and referring providers. This is a critical starting point. A thoughtful, system-level access plan can help move your organization from its current state to its end goal, and help it avoid letting the bright shiny object of the moment guide its decision making. ▲



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