Healthcare Providers are Risking Patient Satisfaction—and Revenue—Even Before Patients Walk Through the Door

Nearly half of respondents (48 percent) to a hospital/healthcare CEO survey say that “patient experience and satisfaction” is among their top three priorities in the next three years. Yet Accenture research shows providers falling short in meeting customer expectations in appointment scheduling—the first opportunity to create satisfying patient experiences. As today’s healthcare consumers look beyond clinical care to select doctors, will poor scheduling have big consequences for providers?

Making the call, but getting nowhere

To better understand provider scheduling, Accenture made more than 1,000 phone calls to schedule appointments across various specialties in 28 hospital systems in five US metropolitan areas. The experience revealed that providers trail other industries in basic customer service metrics during scheduling.

Long wait times mean long call times

The average time to complete a scheduling call was 8.1 minutes—three minutes longer than the national average call length. This call time also exceeds the cross-industry best practice of 3.7 minutes, topping both cable industry (5.4 minutes) and banking industry (3.7 minutes) averages.

More than 30 percent of call duration was “unproductive time,” with callers sitting in queue, waiting on hold with an agent or transferring between agents. Provider agents took one minute to answer calls. This lag compares to an average speed to answer of just 39 seconds across industries and the cross-industry best practice (23 seconds).

Calls are transferred—again and again

The frequent need to transfer calls contributed to lengthy call times. In fact, provider agents transferred calls 63 percent of the time. This percentage is higher than national averages (11 percent), cable industry (11 percent) and banking industry (13.5 percent) averages, and cross-industry best practices (5.7 percent) combined.

Issues are not always resolved the first time

Despite long wait times and frequent transferring, Accenture callers were still largely unsuccessful in scheduling an appointment on the first attempt. Only a disappointing 59 percent of calls resulted in a scheduled appointment on the first try. This rate of first call resolution falls below cross-industry averages by 18 percent and below best practices by 25 percent.

A striking disparity

These findings suggest a troublesome reality. Scheduling a doctor’s appointment is often a less satisfying—and less productive—experience for people than scheduling appointments in other areas of their lives. Should scheduling an appointment when in need of healthcare be more aggravating than taking action to fix the cable?

If asked, most people would likely say no. Consider first the simple notion that people want—and need—easy access to their doctors, especially when they are ill. Consider too the impact of a changing role for patients today. With the rise of consumerism and the shifting of the cost burden in healthcare, patients are increasingly making more informed decisions about their providers. What’s more, retail pharmacies and minute clinics are making it easier to access care, which spotlights the challenges with traditional physician appointment scheduling.

1 HealthLeaders Media, CEO Report: Optimism on the Upswing, January 2013
2 Cross-industry averages and best practice benchmarks provided by Benchmark Portal, All Industries Benchmark Report: Best-in-Class Call Center Performance, May 2013
3 National averages are for inbound calls to business-to-business
Healthcare reform and the digital revolution have transformed patients into healthcare consumers. They are shopping for and selecting caregivers based on service and price, not just quality of care. As such, providers must address patient service and satisfaction as competitive differentiators in the new marketplace.

Not only do patients demand a more active role in their care, they expect health IT tools that enable ready access. According to Accenture research, the majority (77 percent) of US healthcare consumers asked feel it is important (very or somewhat) for them to have the ability to manage appointments electronically. Such technology is readily available in other industries with complex scheduling systems, such as airlines or restaurants, even dental or primary care. Yet very few of the leading provider systems that Accenture called offered patients online self-scheduling capabilities.

Providers must recognize that healthcare consumers will not tolerate eight-minute scheduling calls. With the potential to bear more out-of-pocket expenses in today’s post healthcare reform environment, patients will look to measures beyond quality of care—such as convenience of access—in selecting their doctors.

Revenue is at risk

Without making changes in the appointment scheduling process, providers can expect the patient experience to continue to deteriorate, potentially driving people to seek treatment elsewhere—or even not at all.

What’s more, providers are putting revenue at risk when they do not get the first impression right because revenue is now tied to patient satisfaction. Thirty percent of the clinical quality scoring system that determines the dispersion of withheld Medicare reimbursements is tied to HCAHPS patient satisfaction scores.

Act now to remain competitive

Congressional Budget Office estimates project that roughly 14 million uninsured Americans will obtain coverage in 2014, with continued growth in subsequent years. More insured people mean more strain on the system, which heightens the need for scheduling improvements.

Forward-thinking providers are making inroads. Some are developing health IT solutions that understand patient conditions and match them with right-skilled providers. Centralizing call centers helps agents schedule appointments across systems, reducing hold times and transfers. Training and scripting standardize patient experiences. Providers are also empowering people with digital scheduling tools, simultaneously giving them the control they want and reducing call volume.

Patient satisfaction can often begin with scheduling. With demand rising for patient access, providers must act now to get first impressions right before consumers walk in—and revenue walks out.

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Methodology

Accenture catalogued more than 1,000 scheduling calls to 28 hospital systems across service lines in five metropolitan areas. The calls were placed between December 2012 and August 2013. Performance indicators and outcomes were tracked and analyzed across call duration, complexity and reliability. Time until first available appointment and patient experience scores were also recorded.

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