

What healthcare call centres can learn from their commercial counterparts

How to deliver patient experiences that deliver the best health outcomes, convert enquirers into repeat customers, comply with quality targets, and also meet the health system's budget requirements.



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1. Introduction



When they want to schedule an appointment with a healthcare provider, be it a hospital, physician, or specialist, the first thing most people do is pick up the phone.

Today it is highly likely that their phone call will go through to a dedicated call centre for the provider's health system rather than to a receptionist or nurse.

Even though patients sometimes have the option of booking online, it is thought that about 68% of all pre- and post-clinical patient interactions are handled by a call centre.

The experience gap

In most of their day-to-day dealings with companies, brands, and other organisations, consumers are used to highly personalised, high quality and efficient service over multiple channels including voice, email, web, SMS, messaging, and chat.

The level of service customers routinely get when shopping online or paying bills is exactly what

they now expect from their healthcare providers. It's no longer good enough for call centre agents to be manually rifling through ring binders or scouring Excel sheets to find provider information and schedule appointments.

When they deal with other businesses, customers are able to talk to an agent who has all their personal and historical information at hand in the CRM system. They expect agents to not only have that knowledge to hand, but also to use it to proactively suggest solutions and other courses of action. For the business the goal is to forge an ever-closer and more valuable relationship with the customer.

At the same time customers have nearly all gone digital and mobile, and they expect to be able to use those channels seamlessly to contact businesses and access services. So as well as the phone, if healthcare providers are to provide patients with the most efficient service possible, they need to be contactable by email, social media, instant messaging, chat, and other digital channels.

Many commercial contact centres have already been through this process with the introduction and expansion of multi-channel and now omnichannel digital customer experience technology over the last few years.

The call centre's role

The goal of a healthcare call centre is to facilitate patient access to the medical information, services and providers they need, whenever and wherever is most convenient for them. This could include setting an appointment, getting test results, or asking for initial clinical advice.

In an integrated system there could be one or more call centres supporting the affiliated physicians and health plans. Ideally the call centre should become a strategically important centre of the organisation as it has visibility over the whole operation and is responsible for coordinating activities between different departments and functions.

Other than nurse triage enquiries, which are usually managed by nursing staff at the hospital, the call centre should be able to handle all types of patient enquiries. Its primary functions are assessing callers' clinical needs, matching enquiries to relevant providers based on their insurance, location, and other preferences, and then scheduling appointments with those medical providers.

Handling this activity through a call centre should save patients time and the health system money and deliver the correct outcome.

Benefits of a call centre

For a healthcare provider or health system, the call centre should deliver a number of benefits:

- For physicians and other providers, the daily running of their practice is already heavy with administration and resources in terms of staff

are going to be scarce as these have a cost. Most providers receive a fixed amount of revenue per patient but have to manage their own operating costs. So the first role of a call centre is to take away some of the pre- and post-clinical administrative load, allowing the practice to better manage costs and focus on clinical work.

- Time and cost savings for the organisation are only one side of the coin; the call centre must also deliver satisfactory outcomes for patients. If enquirers are to be converted into first-time customers, and then repeat customers, then the experience offered must be excellent from the very first point of contact. In urban and suburban areas particularly, competition is intense. While most choose providers based on reputation, cost, and specialisation there is mounting evidence to suggest that customer service is now also a major factor that providers can optimise to gain a competitive advantage.

A study of 25 hospitals conducted over four years looked at 1.9 million calls received by their call centres, and then matched that data to those patients' eventual clinical transaction data. Solucient found that every dollar spent on the call centre resulted in at least 3 dollars of clinical billings for that group of callers. They concluded that call centres deliver return on investment at a ratio of at least 3 to 1 and are "an essential driver of hospital revenue, profitability, and patient loyalty."

In this white paper we look at how healthcare call centres are failing to deliver these benefits for their parent organisations, and then assess what changes need to be made to put that right. It turns out that many commercial call centres have already been on this journey.



2. Why healthcare call centres are failing

As we have seen, the primary goal of a healthcare call centre is to match patients to medical services and providers. The successful culmination of this usually results in the scheduling of an appointment or some other follow up activity, such as a call with a medical specialist to explain test results and procedures.

Various recent studies by industry organisations have shown that the vast majority of healthcare centres are failing in multiple areas by:

- Not answering calls quickly enough,
- Not assessing clinical needs accurately enough,
- Not matching patients to providers often enough,
- Not managing to set appointments.

Those are some fairly serious charges, so let's dig in.

- **Time to answer**

The Centres for Medicare and Medicaid Services (CMS) contractually binds all Medicare Prescription Drug Plans (PDPs) to answer 80% of all calls within 30 seconds, with a maximum 5% abandoned rate. In commercial call centre circles this would be considered a fairly low service level to aim for, however evidence suggests that many healthcare providers are unable to meet it.

A recent study by Kyruus made calls to 40 leading health system call centres. They found that it took an average of just under 3 minutes to connect callers with a live agent. Most of these call centres answered with an IVR system – so within 30 seconds by a strict definition of the rules. However nearly 3 minutes to navigate an IVR and wait for an agent is a fairly poor experience from a customer service point of view. It should also be noted that 12.5% of calls answered with an IVR system were never connected to a live agent. The longest wait time for an agent was an incredible 18 minutes.

- **Assessing clinical needs**

To be able to fulfil the call centre's most valuable functions it is vital that call centre agents are able to make relatively simple clinical assessments of patients' needs to be able to identify which providers would be most appropriate. (Even when this is not possible it should still result in an appointment with a physician so that a referral to an appropriate specialist can be made.)

In the Kryuus benchmarking study, 40% of agents were unable to match patients with a clinically appropriate provider. This was either due to an inability to assess the clinical need correctly or find the right provider. Too often healthcare call centre agents are still relying on ring binders full of information to assess clinical needs, and they are naturally unable to hold all the required information in their heads to know where to look for the answers they need.

- **Matching patients' preferences**

Once appropriate providers have been identified from a clinical point of view, patients' other preferences need to be taken into account. For example, call centre agents need to be able to match patients to providers based on which providers are approved by their insurance company, their preferred location and appointment time, and even the gender of the consultant.

While 42% failed to match based on insurance preferences, 50% failed to find providers in

proximity to the caller, and 60% failed to match based on gender preferences. Again, the problem seems to be that agents do not have easy access to the provider information they need to be able to meet patients' preferences.

- **Booking an appointment**

Appointment scheduling is, for most callers to a healthcare call centre, the primary objective of their call, and yet overall 82% of call centres in Kryuus' study were unable to do this directly over the telephone, at least in that first phone call.

When a provider is found it often requires the call centre agent to initiate a three-way call with the provider to set the appointment – which is time consuming and tedious for everyone involved even if the outcome is successful.

What's going wrong?

Most of the problems which are leading healthcare call centres to under-deliver on their potential value are operational and technological, resulting from an under-investment in the kind of processes and systems adopted by most commercial call centres.

Whether that is due to a failure to think commercially in an environment that focuses on health outcomes above profits, the reality is that patient expectations are not being met – and that needs to change.

The Solucient study into call centre ROI found that repeat callers use more hospital services than one-time callers; that the retention rate for callers is 24% higher than for non-callers; and that repeat callers are twice as likely to respond to marketing campaigns as non-callers.

The issues can be broadly categorised as follows:

- **Lack of focus on the customer experience**

Prioritising KPIs (key performance indicators) such as AHT (average handling time), abandon rates, and time to answer in a regulated environment might be understandable, but sometimes hitting these targets can come at the expense of giving customers what they think is important. For example, answering all calls with an IVR system rather than a live agent might allow the call centre to meet its time to answer targets, but is it really a good customer experience if it takes an average of 3 minutes to talk to a live agent?

- **Lack of access to information and systems**

In our experience, healthcare call centres lag several years behind their commercial counterparts in their use of technologies that aid agents. These include agent desktops, workflow solutions, knowledge bases, speech and sentiment analytics, and – in this particular context – rule-based look up and booking systems.

Where agents are still using paper directories to find appropriate providers for a caller's clinical needs, and Excel sheets or three-way calls to schedule appointments, efficiency suffers dramatically, as does customer satisfaction.

- **Lack of training in processes and systems**

Perhaps unsurprisingly, agents in healthcare call centres do not lack soft skills such as empathy, listening, and understanding – they really want to help callers. What they lack in terms of training is more process-oriented, such as how to use the systems at their disposal to make a clinical assessment and match the caller with a provider. There are so many medical conditions and different providers for each, which makes it extremely difficult for agents to hold that information in their hand, or remember exactly where to find it. Even with access to knowledge systems, knowing which questions to ask is a skill in itself.

The Solucient study also delved into customer satisfaction in the healthcare sector, and found that the main driver – at least for the Medicare members consulted – was their perception of the level of care they were delivered, rather than the range or diversity of features they were offered.

This suggests that healthcare call centre agents' soft skills are of prime importance, so the basics needed to satisfy patients are already in place. Those skills, and that desire to help patients, now needs to be complimented by putting in place the systems needed to empower agents to accomplish callers' goals.

3. Putting the systems in place

In our talks with healthcare providers we've found that what they want most of all is to deliver agent consistency and accuracy across all their sites, departments, and channels.

They want standardised working processes for agents to follow so they can control, measure and improve the patient experience and provide a consistent service. The level of skill or experience of an agent, or their ability to use a piece of technology, should never be the difference between great service and a call that is just OK. While in commercial centres this could be the difference between a sale or not, in healthcare centres the consequences of poor service or bad advice can be much more severe for the patient.

As the systems and technologies used by healthcare providers get more complex, staff must be given tools which simplify and systemize the job. Desktop workflows formed of multiple screens consisting of single question / answer / information prompts help agents ask the right questions and follow processes correctly.

Whether for medical triage, appointment setting, or claims management, all processes can be broken into simple steps and built into a workflow that offers a positive user experience for the agent, enabling them to quickly and methodically answer queries.

These types of workflow can provide intelligent guidance during the call by prompting the agent to ask questions and allow them to take actions based on the responses – including assigning priority levels, asking follow-up questions, or matching the caller to appropriate services. Such a system has the added benefit of being integrated into the call centre's other systems, so they are able to act as central repositories of information for data collection that can be turned into operational insight.



Types of systems

Clinical assessment

At its most basic level, making a clinical assessment is a question and answer exercise. Doctors and nurses can call upon years of training and experience to know what questions to ask, what the answers might mean, and what further information to gather. A call centre agent trying to make an initial assessment, no matter how roughly, does not have the benefit of all that medical knowledge. That is why they rely on reference materials that allow them to look up information on what patients' say their conditions are in order to make the assessment and find an appropriate provider.

When agents have to rely on ring binders or a rolodex to do this, the process is slow, cumbersome, and prone to error. What's needed instead is a computerised 'triage' system that prompts the agent to ask certain questions based on the patient's answer to previous questions. At the end of this flow of questions and answers – which the agent inputs – the system arrives at a simple initial diagnosis. The beauty of the system is that the agent needs no medical knowledge at all, just a knowledge of how to use the software.

The conclusions the system arrives at are pre-determined (by the healthcare professionals who create the workflows) and so completely consistent. With a paper-based system each agent could interpret each answer differently, and ask different questions, therefore arriving at

different assessments. With a computerised system the danger of matching patients to inappropriate providers due to an incorrect assessment is eliminated (assuming the workflow is built correctly of course).

Matching and scheduling

As we have seen, the objective when a patient calls the call centre is to usually to schedule an appointment, following the initial clinical assessment. In too many call centres this is still done either using paper directories, complicated Excel sheets, or by a three-way call to the provider. All of these methods however are slow, tedious, and potentially unreliable. The call centre should aim for a scheduling accuracy (appointments that don't have to be rescheduled due to some error) in the high 99% range, otherwise work ends up getting redone.

Instead a scheduling app can be used that agents just access on their desktops when the time comes to set an appointment. The availability of all the health system's affiliates and providers is kept up-to-date in real-time, and the rules for scheduling appointments are automated in the system. Ideally the 'triage' system can talk to the scheduling app and pass along its assessment, thereby automating even more of the process.

The results are that appointments can be set more quickly, more accurately, and with everyone spending less time on the phone.

Analytics and reporting

In commercial contact centers, KPIs will be defined and measured to assess the company's progress towards its commercial goals.

In our experience the use of similar KPIs – analogues of customer satisfaction, NPS (Net Promoter Score), and customer effort – in healthcare centers is less prevalent.

While there is still too much of a focus on simple, operational KPIs the call centre's analytics suite should of course be able to provide fast and accurate analysis of data collected during the call process. Indicators such as user performance, Average Call Handling Time, calls by facility, calls by type should be available and presented via configurable graphical interfaces.

Additionally, data can be collected on an individual, team, and department level and broken down and presented in any number of reports, all of which can be drilled into by management to tease out operational insights. This can enable everything from really personalised one-on-one coaching, QA and compliance monitoring, as well as goal setting at the individual and team level.

Benefits

The main challenges facing hospitals, physicians, and health systems is the need to lower costs while improving quality of care, in an environment where competition for patients is intense and is based on reputation, cost, and specialisation. It is no longer tenable for healthcare call centres to continue to overlook technology that has

proven itself to help solve those very challenges in commercial call centres.

While training, systems, processes, head counts, and many other factors contribute to the success of any call centre, new technology investments have been shown to have the biggest immediate impact on performance. In our own experience of deploying the technologies discussed above in the world's largest contact centre outsourcers, we often see productivity gains of up to 20%. We have witnessed similar improvements since we implemented our telephone triage workflow solution with the largest 9-1-1 dispatch centre in the United States.

Flexible workflow and scripting software for clinical assessment, triage, patient matching, and appointment scheduling that you can completely customise, without recourse to IT, can help to promote agent consistency, capture data and analyse it for continuous improvement, and reduce costs by reducing call length, slashing training times, and eliminating wasteful processes.



Improve call centre operations

- Integration with existing environment allows agents to do more with the technology
- One system that can be scaled across multiple sites to consolidate operations
- Automation of processes reduces waste and lowers costs
- Training times and costs decreased as agents only use the one system

Enhance agent satisfaction and efficiency

- Streamlines processes, allowing agents to answer queries, access insurance information, schedule appointments etc.
- All information agents need is at their fingertips, so no time wasted juggling multiple applications and processes.
- Leads agents through calls by simple question, answer, information prompts, resulting in positive agent experience and faster, more accurate interactions.

Business intelligence to maintain/improve market position

- Use insights to improve services, processes and patient journeys, with a view to increasing revenues and profits whilst reducing costs
- All call data is captured and stored for reporting purposes
- Customisable, visual formats makes it easy to spot trends and problems
- Improves 3 main areas:
 1. Resources: optimised to ensure you meet cost to serve targets

2. Performance: improved to ensure you meet quality of service targets
3. Patient experience: enriched to ensure you meet satisfaction and loyalty targets

Support patient acquisition and retention

- Agents have access to information needed to service patients effectively.
- Have visibility of personal and historic data, so are empowered to deliver personalised experiences.
- Eliminate long wait times and multiple transfers.

In the healthcare call centre, meeting patient's healthcare needs is obviously the primary concern. Our experience in the commercial contact centre and customer service world has taught us that improvements in service levels, diversification of services, better working practices, new processes that put customers first – all of these have been accompanied and made possible by new technologies that assist agents to do their jobs more effectively and more efficiently.

Up until now, most of the world's most agile and powerful call centre technology has been used to help people pay bills, get quotes, and shop – but it has not routinely been used to improve the levels of healthcare that consumers are able to access. When deploying these systems in the world's largest contact centre outsourcers, and now 9-1-1 centres, we often see productivity gains of up to 20% - imagine how that could transform healthcare call centres and patient outcomes?

About Infinity

In our talks with healthcare providers, we've found that what they want most of all is to deliver agent consistency and accuracy across all their sites, departments, and channels.

We help large organisations in fast-paced, complex environments like healthcare and public safety that are providing critical services to communicate with patients and the public more accurately, quickly, and consistently by providing workflow and scripting software that they can use to help front-line staff handle all predictable scenarios in a consistent way.

Our mission is to empower healthcare organisations to improve their quality of care via telephone and other channels by providing workflow and scripting software that the client can completely customise, without recourse to IT, and use to promote agent consistency, capture data and analyse it for continuous improvement, and reduce costs by eliminating wasteful processes.



To arrange a demo of Infinity Reach and discuss how we can adapt it to your needs, please get in touch.

 +44 (0)121 450 7830

 info@infinityccs.com

 www.infinityccs.com