Solving Patient Access Issues

by Keith Genest

How would patients rate their access to your practice? Most practices may not want to know the answer to that question, but it's worth taking a look at what causes patient access problems. In the short-term, patient access problems can lead to irritated patients and frustrated staff; long-term problems can have a much greater impact—such as lost patients and, consequently, lost revenue.

Identify the pain points first

The key to solving patient access issues is to first identify your practice's pain points. Consider the following:

1. Do patients spend a long time on hold when they call your practice?
2. Does a large volume of voicemail require your highly paid clinical staff to retrieve and transcribe messages? Are they chasing down patients to clarify information?
3. Do your patients hang up because they get tired of waiting?
4. Do clinicians cut short the time spent with patients because the phones are out of control?

A "yes" answer to any of these questions can signal a path to low patient satisfaction, decreased operational efficiency, and possible lost revenue.

Misconceptions about common fixes

Many practices try to solve their patient access issues with some common fixes that might not yield the long-term benefits for which they were hoping. Take a look at the following misconceptions and their true benefits.

Misconception #1:
Hiring more people will solve our problems.

Truth: Without identifying and solving patient access problems, simply bringing new people on board can result in more overhead in terms of salaries, benefits, training time, and equipment, while merely distributing the phone challenges to more staff. True, more employees can now share the volume of calls, but for practices that are space-locked and trying to keep their overhead low, this might not be a viable option. It can also be challenging to predict how much additional staff should be added due to variability in call volume.

Many practices try to solve their patient access issues with some common fixes that might not yield the long-term benefits for which they were hoping.

Misconception #2:
Adding more phone lines will solve our problems.

Truth: This will be an additional expense that can increase the volume of calls a practice is able to receive. However, it doesn't solve the problem of a practice's inability to manage calls or address the all-important issue

of patient satisfaction. Also, adding phone lines typically means adding more staff, which leads to the problems mentioned above.

Misconception #3:
Installing an auto-attendant with multiple options will solve our problems.

Truth: An auto-attendant can be helpful if the right person answers the right option off of the auto-attendant. The downside is that it has a tendency to be ineffective if it is answered by the wrong person, goes to voicemail, or places the patient in a hold queue.

So what's the answer?

Patient access issues caused by call management problems can be solved with either internal or external resources. What your practice chooses depends on your practice's pain points.

For example, hiring part-time staff to assist with peak phone times may be an option. On the plus side, part-time staff do not require the benefits and overhead associated with FTE's. On the downside, it can be difficult to predict peak call times, which makes predicting the number of part-time staff needed on a given day quite challenging.

The other alternative is to consider enlisting the help of a vendor to manage phones and call volume. This can allow for managing peaks and valleys of calls without adding additional staff. A vendor can handle certain call types, e.g. prescription refill calls, that do not require immediate attention, thus freeing staff to focus on patients in the office. It can also be more efficient than adding staff or expensive technology, and it helps your practice keep your overhead low.

The downside is that not all call management vendors are the same, so there are some points to carefully consider when vetting one. Look for a vendor who can scale their solution to your size of practice, is HIPAA-compliant, and can handle the call types you need them to. It's also important to ask how the vendor documents patient requests and if those can be imported easily into your PM or EMR system, depending on your goals for these systems. Another question to ask is if the vendor offers live voice connections—you want to ensure you aren't spending money on another automated system.

When you are in the middle of ringing phones, patient challenges, and staff frustration, it can be difficult to step back and examine what the challenges to patient access truly are, but identifying the weak spots can help your practice improve patient satisfaction, increase operational efficiency, and improve practice revenue.

Keith Genest is the regional vice president of sales at notifymd, the nation's largest medical-only answering service. He is from Augusta, Maine, and handles sales responsibilities in the Northeast.

For more information about notifymd and their call management solutions, please call 866-733-9450 or e-mail kgenest@notifymd.com. You can also view a demo of notifymd's daytime call management solution at www.notifymd.com.