Best Practices for Provider Engagement & Curbing No Shows
March 14, 2018
Today’s Agenda

1. Welcome & Introductions

2. Why Provider Engagement & No Shows?

3. Part 1: Strategies for Provider Engagement & Generating Telehealth Visits


5. Closing
“Telehealth Trifecta” Team

- Veenu Aulakh
- Alexis Wielunski
- Chris Perrone
- Jeanne Russell
- Kathy Chorba

CCI
Center for Care Innovations

California Health Care Foundation

TRC
California Telehealth Resource Center
Participating Sites
Health Plan Partners
Select patients appropriate for referral

Participate in the consults when necessary

Follow up with recommendations once the consult is complete

Champion the program to encourage widespread adoption amongst colleagues
Patient no-shows are a key element in program failure

You spend as much time preparing for a no-show as you do preparing for a consult, and no-shows don’t count toward your target goal for completed consults.

No Show patients are expensive!

• If the clinic is paying the specialty provider group by the hour, the clinic loses $

• If the clinic or health plan is paying the specialty provider group by the completed consult, the specialty provider group loses $

• Specialty provider groups tend to avoid clinics with a moderate to high no show rate
Average Monthly Clinic Volume as of Jan 2018

- Clinic A: 15% Completed, 8% No Show
- Clinic B: 2% Completed, 12% No Show
- Clinic C: 8% Completed, 13% No Show
- Clinic D: 12% Completed
- Clinic E: 29% Completed
- Clinic F: 13% Completed
Effectively show providers the value in the program for their patients

Explain the benefits:

- Access to specialist
- Cost savings to health plan and the patient
- Shorter wait times to be seen
- Conveniently located, no travel
- High quality care, as good as in-person
- Continuity of care, notes in electronic medical record
Primary care provider engagement

- Show that it is a tool for educational purposes, shadowing, and training.
  - Residency, NP/PA fellowship, PCP facilitating clinics
- Open lines of communication with Telemedicine staff
  - Remain available for questions, let PCP’s drop in
- Consistently promote the specialties and the program
  - Meetings, handouts, and emails
- Strong physician champion to advocate
  - Program should have own CMO
Increasing volume

- Evaluate your referral volume to determine what specialties you need
- Analyze your local resources, what is currently available for patients
- Consider current equipment, capabilities, and peripherals
- Is it worth it to invest in the initial cost if equipment investment is needed
Increasing volume

- Don’t grow too fast, think about staffing, workflows, and patient needs
- Consider your space available
- Twice as much administration time to clinical time
- Reduce clinics that are not fully utilized in order to make time for clinics with higher needs and more patient volume
- Be flexible, open to change and restructuring your program
Competition and recognition

Meet and greet with specialty partners

Building rapport between the providers and the telehealth coordinator
Part 1 Discussion

Questions for our speakers?

What are others doing to engage providers or otherwise generate telehealth visits?
Avoiding and Mitigating No Shows

• Background:
  • 4 active sites
  • Tele-psychiatry is our largest Synchronous Specialty
  • One behavioral health provider for all sites
  • Large portion of telehealth patients are follow-ups
  • Majority of are Spanish speaking only
Factors Involved with No Shows

- Type of specialty
- Different sites have different show rates and volumes
- The process for scheduling patients
- If the patient needs to be seen to get a refill
- If the specialist is bi-lingual
- 115 degree weather in the afternoons
Strategy #1: Scheduling and Reminders

• Telehealth working in together with front office
• Letting new patients know what to expect
• Scheduling with a specialist who speaks their language
• Reminders: phone calls, text, letters
• Patient experience with the presenter
Strategy #2: Strategic Double Booking

• Measure the baseline no show rate
• Double-book just under the expected no show rate
• Double-book early, taper off towards the end
• Don’t schedule any patients in the last hour
• You may get push-back from specialist
• If they all show up, we may need to re-schedule
• Inform the patient ASAP if they need to be re-scheduled
Questions?

Alberto Quihuis
Telehealth Manager

albertoq@cdsdp.org
Northcoast TelePros
No-shows

Darlene Coop - Telemedicine Coordinator
Michelle Cook - Referral Coordinator
A few reasons why patients might no-show their appointment

• Patient is unaware of their appointment.
• Patient unaware of the importance of keeping their appointment.
• Phone number is not up to date.
• Bad Weather.
• Illnesses.
Challenges

What happens when Patients No-Show

- Telemedicine Coordinator is waiting for the next appointment to show up.
- Specialist is waiting.
- The valuable specialty appointment was not utilized.
- The patient who no-showed, medical needs were not addressed.
• Double Book/Triple Book appointments

  • Double book a new patient with a follow up patient
  • Stagger the start time of double booked appointments
  • Triple book specialists with high no-show rates - i.e. psychiatry

• Keep the Specialist up to date on which appointments are double booked
• Appointments are confirmed multiple times
  • Appointments are confirmed 2 days in advance and the day before
  • Sometimes a 3rd call is made

• Appointments require patients to call back and confirm
  • If not confirmed, appointments are cancelled and another referral is scheduled.
• Draft Standardized Telemedicine Workflows and Protocols

  • Specific for Telemedicine
  • Written
  • Living documents - Revise as needed
    • Scheduling Workflow
    • Confirmation Workflow
    • Scheduling Script
Best Practices
For reducing No-Shows

- Require patients to confirm their appointment.
- Confirm appointments multiple times.
- Double book or Triple book the specialist appointments.
- Standardized Telemedicine Operating Procedures.
Part 2 Discussion

Questions for our speakers?

What are others doing to prevent no shows or deal with them when they happen?
WELCOME, TELEHEALTH TEAMS!

This website is a support center for the use of Sustainable Models of Telehealth in the Safety Net participants. Program updates, report due dates, resources, newsletters and more will be posted to this website. This website is managed by Center for Care Innovations.

For more information about Sustainable Models of Telehealth in the Safety Net, please visit the program page.
Join us at
The 6th annual CTRC/CTN Telehealth Summit
Sustainable Models of Telehealth in the Safety Net
2018 Telehealth Summit Pre-Conference Workshop
May 16, 2018 | 9:30 am – 4:45 pm
Hyatt Regency Mission Bay in San Diego, CA

• Networking & relationship building
• Peer sharing
• Program Updates

• Knowledge Dissemination
• Skills building