SR Health

Texting As a Tool to
Improve Patient Outcomes and Increase Practice Efficiency

A few decades ago, you knew a doctor was in the room when you saw someone with a pager. In some public place — a restaurant, a theater, a school — someone would look down at a plastic box and make a quick exit.

"That's a doctor, there must be an emergency," people would whisper.

The understanding was that a doctor must be on call, ready at all times to tend to the sick or the wounded. Doctors were uniquely important.

Fast forward to now. Thanks to the smartphone, we are all as important as doctors, and we expect the medical profession to respond to us as urgently as if we were suffering an emergency. On the other side of the coin, as care managers in a highly competitive and consumer-driven marketplace, we aim to treat every interaction with a patient as an urgent opportunity. Might text messaging be a way to give your patients what they want?

> *The first text message was sent on Dec. 3, 1992.*
>
> *By 2020, 2.27 trillion texts were sent every year in the US alone.*
>
> *Text messaging is now the most used data service worldwide.*

TEXTING HAS BECOME UBIQUITOUS

"How many Americans own a smartphone?"

A few years ago, that was a meaningful question. Now that the vast majority of Americans own at least one (81% as of November 2018), a more meaningful question for businesses is, "How many times a day do most people check their phone?" The answer, according to a 2018 Global Mobile Consumer Survey conducted by Deloitte, is 52. That's 52 times every day. No data service is used as frequently.[1]

Some of that texting use is spent on commerce, including scheduling healthcare services. A Patient-Provider Relationship survey conducted by Solutionreach, an MGMA partner, found that 73% of patients want the ability to text their doctor's office, and 70% want to receive text messages from their doctor. Additionally, the report found that texting may not simply be adjunctive to phone calls, it may have replaced phone calls entirely. The Solutionreach study found that 90% of patients report that *they do not answer phone calls*, and 19% report that they do not check voice mail.[2]

Kevin Westcott, vice chairman and US telecommunications, media and entertainment sector leader at Deloitte, said, "This year's survey really advances the story of smartphones as the true center of our lives, both inside and outside the home. The smartphone remains the go-to device for consumers, enabling them to do anything they desire: communicate, work, socialize, consume entertainment, stay fit or take care of things at home."

PATIENTS WANT TWO-WAY TEXTING REGARDLESS OF AGE

In *Text Communication: The Next Generation of Business Communication*, a 2019 report by EZ Texting, consumers in the age brackets of 18-29 and 45-60 check their text messages the most: seven times per hour. The age bracket of 30-44 checks their phone five times an hour. Perhaps most surprisingly, the over-60 crowd checks their phone three times an hour.

The same report finds that 84% of consumers have received a text message from a business. Of these, 86% have received an appointment reminder, 55% have received a service notification, and 67% have received a coupon or discount. In a powerful indicator of consumer's preferences, over half of the respondents said they are frustrated when they are unable to text a business.[3] These results are in line with Solutionreach research, which found that 47% of patients *want* to text with their practice. While the desire to text does vary with the age of the patient, a large number of patients in each bracket have expressed a desire to text with medical practices. The following chart shows the results of a survey in communication preferences across four specialties: Primary Care, Ophthalmology, Dentistry, and Dermatology.[4]

Extremely or Very Appealing Touchpoints Averaged Across the Four Specialties			
Appointment Reminders	Millennial	Gen X	Boomers
Phone	74%	76%	76%
Online/Email	70%	66%	50%
Text	73%	70%	45%
Appointment Alerts	Millennial	Gen X	Boomers
Phone	71%	73%	67%
Email	71%	62%	44%
Text	75%	68%	46%
Reminders For Follow-Up Appointment/Treatments	Millennial	Gen X	Boomers
Phone	72%	73%	72%
Email	71%	64%	51%
Text	73%	67%	43%

For a deeper look into generational differences between patient satisfaction with their providers and communication preferences, see *The Patient-Provider Relationship Study: the ripple effect starts with boomers by Solutionreach*.

Produced in Partnership with

MGMA

DO MGMA MEMBERS' PRACTICES USE TEXT?

MGMA was an early adopter in using text as a communication tool with our members, as the weekly MGMA *STAT* poll attests. In May of 2018, MGMA asked its members whether their organizations used texting to communicate with patients. Sixty-eight percent affirmed they did. They offered their leading reasons for using text:[5]

- Texting offers patients the option to confirm, cancel, or ask to reschedule
- Texting is often the patients' preferred method of receiving reminders
- Text messaging is normally the most effective method over email, phone calls or mailings

Common responses from those whose organizations do not offer text messaging included:

- Not having a setup to offer text communications
- Exclusively using phone calls or emails for reminders
- Relying on a hospital's texting capabilities if part of a larger system
- Physician reluctance to move to text messaging

One interpretation of the discrepancies between the group that *does* use texting and the group that does not is that the use of text messaging seems strategic, while the non-use of it seems more a matter of convenience for the practice. Inconveniencing the patient, however, may not be terribly convenient for long, because inconvenienced patients quickly become ex-patients.

MGMAStat

DOES YOUR ORGANIZATION USE TEXT MESSAGING TO COMMUNICATE APPOINTMENTS TO PATIENTS?

MAY 22, 2018 POLL
1,569 APPLICABLE RESPONSES
OUT OF 1,615 TOTAL RESPONSES
MGMA.COM/STAT
#MGMASTAT

68% YES
24% NO
7% CONSIDERING IT
1% UNSURE

Add to this the finding that 43% of millennials, 44% of Generation X, and 20% of Baby Boomers indicate that they are unhappy with their primary care physician and are likely to switch in the next three years. If patients truly want to text, but only 68% of MGMA member organizations are texting, it is logical to conclude that non-text practices may be missing patients.

Produced in Partnership with

"In healthcare, the times aren't just changing — they have already changed. As CEO of a successful clinic and a member of the MGMA Board of Directors, I see a lot of emerging technologies. By far, patient-provider communication is an area that needs to be upgraded to better serve patients and help improve their long-term well-being."
— William Hambsh, CEO, North Florida Women's Care, Chairman of the Board, MGMA

AN OBGYN CLINIC TESTS TEXTING FOR A YEAR

MGMA published an article recounting the experiences of an OBGYN clinic in the southeastern region that tried texting for a year. The clinic carries special weight at MGMA: it is run by the current Chairman of the Board, William R. Hambsh.

The experience of the clinic pinpoints some key success areas[6]:

20-minute holds and no-shows were significantly decreased

Recognizing that high hold times were contributing to no-shows and cancellations, the clinic set up a new communications system with texting as the cornerstone. Reminders were sent one week in advance of an appointment, then two days prior, and finally two hours before a patient's scheduled visit. No-shows decreased by half, and more lead time was given for rescheduling. Patient reaction was positive.

Automated waiting lists brought more patients to care

When appointments were not available, the system placed patients on an automated waiting list. If someone cancelled their appointment via text, the system automatically offered that slot via text to the first patient on the waiting list. Each person in the queue got five minutes to accept the appointment. If they did not respond, the system automatically offered the appointment to the next patient, and so on. Nearly 1000 patients successfully responded to open waiting list offers in the first year or so of implementation.

Referral phone tag was eliminated

Texting allowed the clinic to eliminate the resource-draining and frustrating phone tag when attempting to reach new referrals, which led to a 25% increase in seeing referrals. Because some patients want to be able to speak to someone, the clinic added a link to its dedicated phone line for referrals directly in the text message. This system also allowed the clinic to better track and report on referral sources, which in turn allowed the clinic to improve resource alignment.

Patient guidance was improved

Patients need to prepare for certain types of visits. In the case of the OBGYN clinic, patients need to arrive with a full bladder to allow for a quality image scan. If they arrive with an empty bladder, they must fill it upon arrival, which takes time and affects the entire schedule. Texting allowed the clinic to automatically generate a message two hours in advance of such visits. The result was a decrease in scheduling bottlenecks.

**FOUR KEY TRENDS IN PATIENT RELATIONSHIP MANAGEMENT, BY THE NUMBERS**

The experience of the OBGYN clinic above is mirrored in a survey of medical, dental, and vision practices conducted by Solutionreach.[7] The survey focused on Patient Relationship Management (PRM) technology, of which text messaging is a crucial part. The four key findings are:

- Improvements in patient communication, experience, and outcomes
- Reduction in no-shows and cancellations
- Increase in revenue
- More efficient staff time

Trend 1: Improved Patient Communication, Experience, and Outcomes

Nearly one-third of those surveyed listed improving patient communication as their top priority. Overall, 83% of those who use some kind of PRM technology in their organization say that it facilitates better communication with patients. As a result, those practices saw other benefits as well, including improved patient engagement and outcomes. The majority, 62%, said patients were more engaged. In addition, survey participants responded to specific questions about how different aspects of PRM improved patient experience and outcomes.
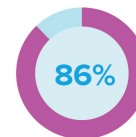
Patient Experience
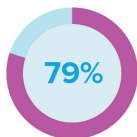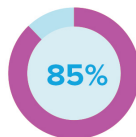
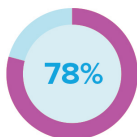**79%** said automated recall improved patient experience

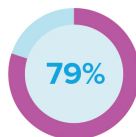**85%** said automated reminders improved patient experience

86% said that using text messaging improved patient experience
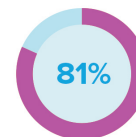
Patient Outcomes

78% said automated recall improved patient outcomes
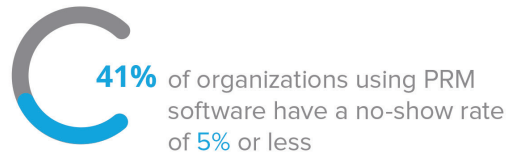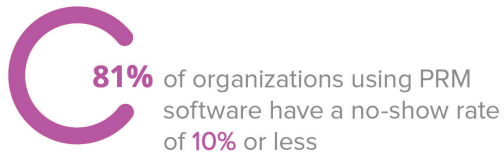
79% said automated reminders improved patient outcomes

81% said that using text messaging improved patient outcomes

Produced in Partnership with

Trend 2: Reduced no-shows and cancellations

Reducing no-shows was the top priority of 30% of respondents. With no-show rates ranging from 10%-30% on average, it makes sense that this remains such a high priority, and it among the main reasons practices are adopting PRM software that includes texting.

The lowest no-show rates are a result of using a proven cadence of reminders along with patient preferences for delivery method. A recent analysis of over 20 million reminder and confirmation messages showed that a message sent three weeks ahead, followed by a message sent three days ahead, and another three hours ahead increased the number of confirmations by 156%. According to the National Institutes for Health (NIH), 75% of patients want their appointment reminders via their mobile device.

81% of organizations using PRM software have a no-show rate of **10%** or less

41% of organizations using PRM software have a no-show rate of **5%** or less

Trend 3: Increases in revenue by reducing no-shows and increasing recalls

Reducing no-show rates to 10% is a reasonable expectation of a properly implemented texting plan. Providers may calculate the revenue contribution of a 10% no-show rate against these current no-show rates in three key practice areas:

Medical: average no-show rate: 20%
Dental: average no-show rate: 15%
Vision: average no-show rate: 25%

Beyond improving revenue around scheduled appointments, PRM software also helps automate recall outreach. Recall outreach, or "recare," is very time consuming when done manually, and many practices who lack a recall program also lack PRM technology. Only 17% of respondents using PRM software do not have a recall program. Among practices without the technology, 39% also lack a recall program.

Trend 4: Staff time efficiencies

Survey respondents who use PRM software reported that their staff spent less on time on the phone.

76%
spend less than two hours on the phone each day

76%
spend less than an hour on reminders each day

33%
spend one hour or less on the phone each day

68%
spend less than an hour on recalls each day
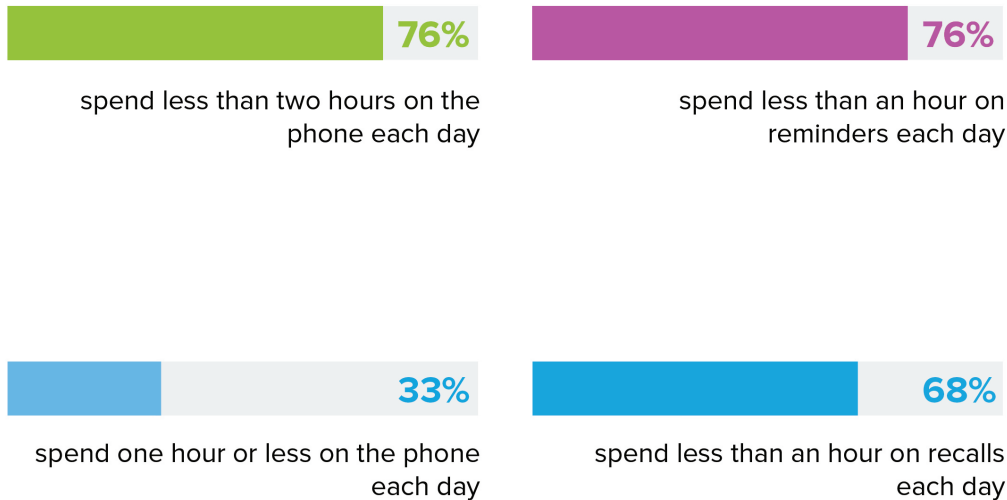
BUT IS IT COMPLIANT?

Text messaging healthcare compliance got off to a confusing start a few years ago. Regulations were passed that seemed to make texting with patients illegal, but industry and privacy experts, conscious of the desire among patients and practices to allow texting, pushed for a more thorough policy review. Ultimately, texting was allowed, with a few cautions to protect privacy and restrict unsolicited marketing.

Enacted in 1996, the Health Insurance Portability and Accountability Act (HIPAA) provides rules around uses and disclosures to keep protected health information (PHI) private. The HIPAA Privacy Rule defines PHI as individually identifiable information transmitted or maintained in any form or medium by a covered entity or a business associate.

HIPAA regulates:

- How and when to disclose PHI
- Ways you have to protect PHI
- Patient rights to access their own information

Both covered entities (healthcare practices) and all of their business associates are required to follow HIPAA regulations. Business associates are any vendors or contractors that work with your practice. This would include a vendor who assists with patient communication like email and text. When entering into a relationship with any business associate, practices must obtain written assurances that the business associate will adequately protect and safeguard PHI. This is most often done using a business associate agreement. This agreement may also

set limits on how much information will be exchanged between the practice and that business associate. The amount of PHI provided should be the minimum amount necessary to complete the necessary functions of that business associate. Note: It is the responsibility of the practice to make sure a business associate agreement is completed.

The Telephone Consumer Protection Act (TCPA)

The Telephone Consumer Protection Act (TCPA) is a law that was originally created to battle telemarketing calls and fax spam. Today it also includes text messaging. Under this act, it is unlawful to make a robocall, send a fax, or text someone in the United States unless the recipient of the communication gives express consent. There are a few exceptions to that law, including healthcare-related messages.

If a practice is communicating a healthcare message to a patient, they are exempt from the express written consent rule. This means that as long as your patient has given you their phone numbers, you are allowed to text them healthcare-related messages. These messages include the types listed above — appointment reminders, confirmation messages, etc.

Note: marketing messages are not exempt under the TCPA. You are required to have express written consent to send the following types of messages:

- Advertisements for new services
- Solicitations to events
- Special offers
- Accounting, billing, or collection messages

Produced in Partnership with

STEPS TOWARD IMPLEMENTING A TEXT MESSAGING PLAN

MGMA has developed a helpful guide to implementing technological changes that applies to text messaging.

DOs AND DON'Ts OF NEW TECH IMPLEMENTATION

DO prioritize change management — explain the necessity to cross-train for each technology. Make sure staff is comfortable talking to and training patients on the technology.

DO build time for pre-tech user engagement — allow input, create open-ended meetings to share issues (without supervisors/with supervisors) to ensure staff is encouraged to provide honest feedback.

DO walk before you run — superusers must gain mastery of first-gen functions in any solution prior to expanding its functionality. While deciding on which technologies to implement, identify your top three needs and leave room to fail and switch tactics.

DOs

DON'Ts

DON'T worry about starting small — you can grow with most technologies.

DON'T downplay the cost of implementation — get solid numbers and add one-third (home improvement projects model).

DON'T wait to do at least one project —use this report to pick the simplest effort for the most impact.

Produced in Partnership with

Finally, Solutionreach has provided a helpful checklist to ensure your text messaging implementation succeeds[8].

1. **Use your existing number:**

You don't want your texts coming from a five or six-digit short code. You want them to come from the number your patients already know. While a short code isn't necessarily bad, it isn't the best option. Those numbers in your short code don't have any relation to your practice, and your patients don't know your short code from the one their pharmacy uses to let them know their prescription is ready. Pick a texting solution that will text-enable your existing landline so patients can text you from the number that's already saved in their phones.

2. **Two-way initiation:**

Not all of your conversations with patients will start with you. Your patients need to be able to reach you just as much as you need to be able to reach them. And they would prefer to do it over text. About two-thirds of your patients would rather text you than call your office. So make sure you give them that option.

3. **Message history:**

Instant access to previous messages sent between a patient and your practice makes things so much easier for your staff — and your patients. Your staff can reference back to past messages to see what information was already given so they aren't asking for the same information over and over again. Easy access to the message history also means any member of your staff can respond to any incoming text message.

4. **Prioritize messages:**

Some texts will require an urgent response or some might need your staff to do a little bit of researching before responding. Flagging individual messages is a way to set those messages apart so others can see they are being worked on, or that they need an immediate response.

5. **Sync to your patient database:**

Knowing who a text is coming from just makes the whole process easier. Choose a texting solution that links to your patient database so you don't have to ask your patients to identify themselves in every conversation.

6. **Easy to use:**

Texting doesn't have to be complicated or require you to log in to multiple programs every day. All you really need is a notification on your desktop or through an app on your smartphone and you can read and respond to texts from wherever you are. Your schedule gets busy, choose a texting solution that lets you be flexible with your texts.

Produced in Partnership with

In conclusion, empirical and anecdotal evidence supports the use of texting with patients to increase case volume, improve practice efficiency, and, most importantly, to improve the quality of patient care.

1. *Americans are checking their phones now more than ever, report says. https://www.cnet.com/news/americans-are-checking-their-phones-now-more-than-ever-report-says/. Accessed January 31, 2020.*

2. *Everything you need to know to make texting work for your practice. Solutionreach. https://www.solutionreach.com/guide/everything-you-need-to-make-texting-working-for-your-practice. Accessed January 31, 2020.*

3. *Text Communication: the next generation of business communication 2019 report. EZ Texting.*

4. *The Patient-Provider Relationship Study: the ripple effect starts with boomers. Solutionreach. https://www.srhealth.com/resources/the-patient-provider-relationship-study?__hstc=233546881. fc8a3f5cb258a22475441d198d9d20e7.1580776446598.1581459767518.1581465102655.22&__hssc=233546881.3. 1581465102655&__hsfp=1312878196*

5. *Fabrizio, Nick. Text messaging remains an effective tool for patient appointment reminders. MGMA. https://www.mgma.com/data/data-stories/text-messaging-remains-an-effective-tool-for-patient-appointment-reminders. Accessed on January 31, 2020.*

6. *Hambsh, William, CPA, FACMPE. Getting the message: what one clinic learned from a year of texting patients. MGMA. https://www.mgma.com/resources/quality-patient-experience/getting-the-message-what-one-clinic-learned-from. Accessed on January 31, 2020.*

7. *State of PRM Report: four key trends. Solutionreach. https://www.srhealth.com/resources/four-trends-in-state-of-prm?__hstc=233546881.fc8a3f5cb258a22475441d198d9d20e7.1580776446598.1581459767518.1581465102655.22&__hssc=233546881.2.1581465102655&__hsfp=1312878196. Accessed on January 31, 2020.*

8. *Everything you need to know to make texting work for your practice. **Solutionreach**.*

Produced in Partnership with