

Solving Patient Accessibility: Developing a central scheduling system for a nationwide healthcare system

Problem: The client is a nationwide healthcare system with over 100 separate locations. At one specific location, the clinic was abandoning more than 60% of their calls with those either going to voicemail or not being answered at all. Of the close to 2500 calls that were received per month, 26% were abandoned and 34% were going to voicemail. The result was lost revenue, below average patient experience, reduction in long term patients, inefficiency and effectiveness of office staff, and as we looked at a larger scale, the problem worsened.

Challenges:

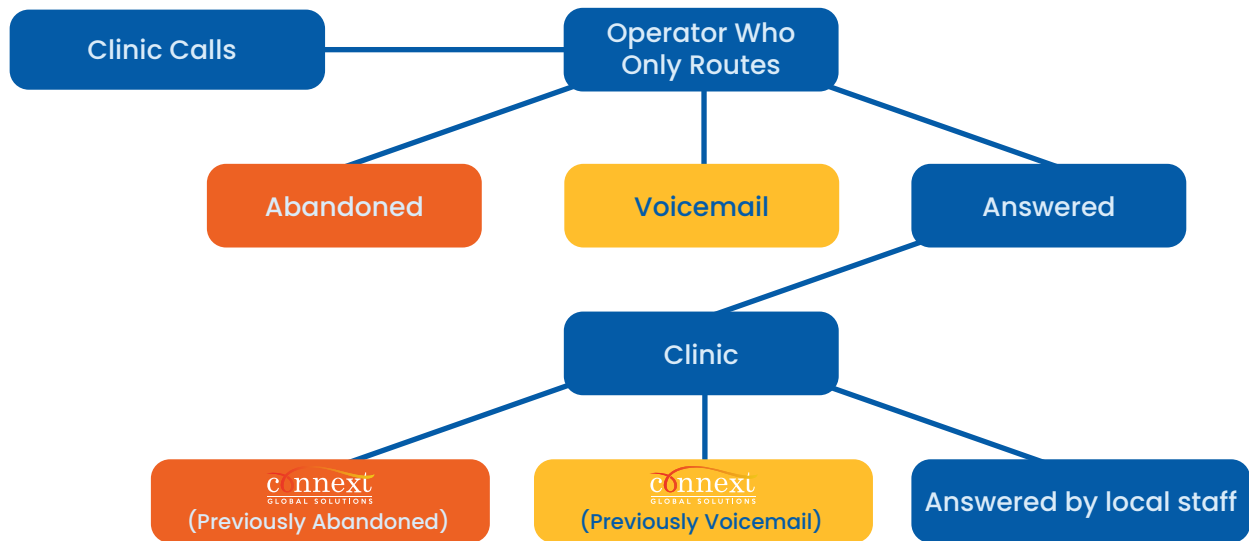
- Local staff had too much going on a daily basis to be able to answer every phone call
- Scaling local staff was not possible due to budgetary constraints and talent shortages

With over 10M jobs open in the United States, the local clinic simply could not find, attract, or retain the necessary talent to answer calls. In addition, clinical and back office staff was far too consumed with day to day activities to answer the phones and take care of patient service needs.

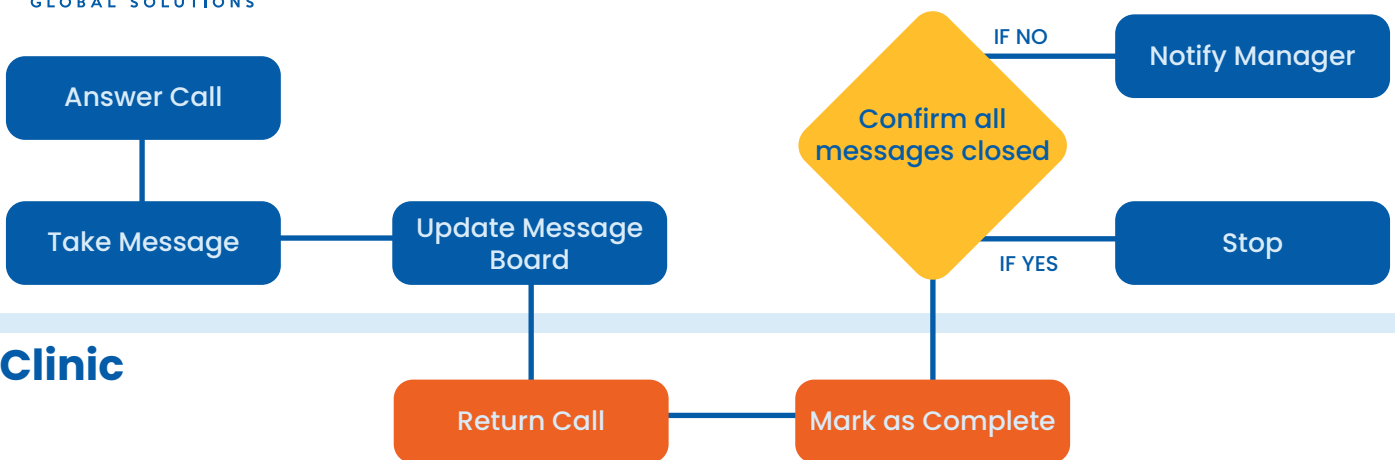
Solution:

Connex implemented a plan where Connex staff would answer those calls that would be previously abandoned or sent to voicemail. Due to the complex nature of clinical calls, the Connex staff would answer the call, take a message, update a central message board, and then responsibility to respond to the message was pushed back to the in-office staff.

Pilot Call Roadmap

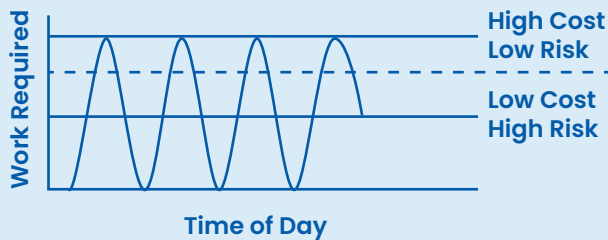


Call Workflow



Clinic

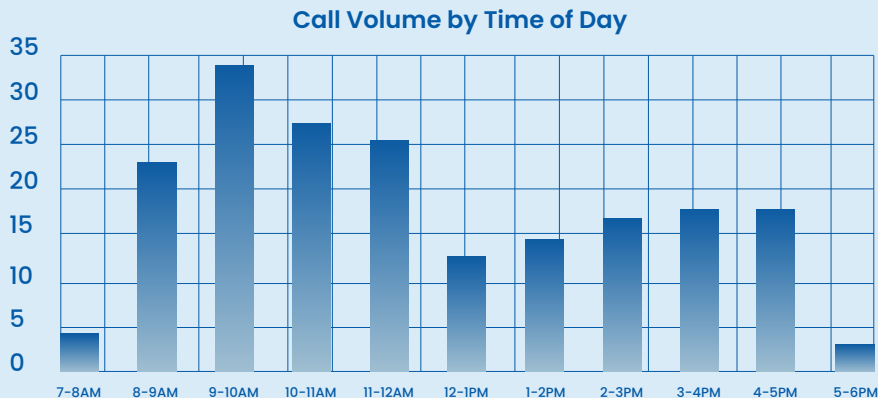
To determine the appropriate staffing level, Connex looked at call volume by time of day, average handling time, average follow up per call, and came up with a hourly call capacity per person which allowed us to determine the appropriate staffing level.



Optimal Staffing Level

24 Calls Per Hour Capacity

Average Handling Time	2:30
Average Time for Follow Up	2:30
Total Average Call Time	5:00
Hourly Call Capacity Per Person	12



Results:

- Improved in person answer rate
- Improved tracking
- More efficiency in the clinic
- System in place to ensure messages are closed out
- Lower cost than increasing clinic staff
- Staff now in place whose only job is to answer phones
- Abandonment rate decreased to within industry standard, <10%
- Improved clinic revenue and patient experience

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