

ARTICLE

To improve physician referrals, look to your patients: Three key questions to ask

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Nationally, provider organizations lose on average 10% to 30% of their revenue to patient referral leakage, resulting in significant annual losses.¹

Many health systems have traditionally responded with top-down tactics, such as improving operational efficiency or enhancing their brand and reputation. Now, leading organizations are also starting to focus on what drives referrals at the individual level—and how those dynamics are changing.

In fact, patients themselves increasingly influence how providers make their referral choices and how they ultimately render care. While specific needs of referring providers themselves will remain the primary consideration, health systems and referring providers must also account for this increase in patient agency to improve referral loyalty.

This article is the first in a series that shines light on the key drivers of physician referrals. The series draws on Chartis' work with health systems and WebMD Ignite's data analytics and insights on consumer access and referrals. This article examines the impact of patient preferences on physician referrals.

Providers are making referrals based on patient experience

Patient experiences are increasingly informing referring providers' care choices.² Online reviews are taking precedence over system awards and honors. Patient feedback, often relating to specific experiences with physicians and their offices, has increased by 150% across the industry.³ While many providers still challenge validity and accuracy of patient online reviews, a recent study still found that 84% of patients won't go to a referred physician with four or fewer stars.⁴

Patient feedback, including online reviews and consumer satisfaction surveys, drive physician behavior as well. More than half of physicians surveyed indicate they consult their own online reviews to understand their patients' perspectives and identify opportunities to improve patient experiences.⁵ Further, recent surveys indicate that physicians are also increasingly considering patient reviews when making referrals, a trend we expect to grow.⁶ To respond to this changing dynamic, health systems must understand their patients, align

their services with patients' articulated preferences, and make it easy for their own providers to be the referral partners of choice.

Three questions to bring the patient experience into focus

Health systems play a key role in helping their providers better understand and consider patient experience. Following are three questions to consider.

1. What do your current (and future) patients value?

Analyzing data from sources such as online reviews and satisfaction surveys to better understand your patients is the first step to establishing a positive experience and encouraging a follow-up referral. For example, understanding the importance of honoring a patient's preferred language and cultural sensitivities is critical to effective communication, a key measure of patient experience.⁷ Understanding patient preferences for digital interactions, such as virtual care or online scheduling, can improve patient follow-up. Documenting barriers to care, such as lack of transportation, can help health systems better support high-need patients.

A leading academic medical center (AMC) recently enhanced the patient-centricity of its cardiovascular services. During a journey mapping exercise, patients described long commutes and traffic as major obstacles to receiving care. These insights drove the AMC to tap into its physician office network for screening and lower-acuity services. These changes will reduce patient travel times, increase the percentage of patients that choose the AMC, and reduce the number of no-shows or late arrivals.

2. How well do your offerings meet patient preferences?

As health systems act on patient preferences, they must quantitatively and qualitatively track the impact of their efforts. They should look at the key elements of the patient experience itself and on subsequent referral patterns. Mapping patient needs to a gap analysis framework can identify valuable new capabilities and better inform how patients and physicians use existing capabilities.

Tailored communication and outreach can connect patients with new or underutilized resources that may better meet their specific care needs. Online feedback platforms across the health system's website, third-party directories, and social media can surface key insights into patients' feelings about their own experiences and the impact of health system efforts.

Health systems can also assess how well they meet patient needs by measuring increases in volume and market share capture among specific subsets of patient populations. Using claims data and analytic platforms, health systems can examine market shifts more quickly and efficiently than ever.

A prominent integrated delivery network recently leveraged a claims data platform to analyze its referral patterns. The analysis surfaced opportunities across multiple service lines to better connect patients from specific populations with in-network providers and facilities, enabling more coordinated patient care delivery

and providing a direct financial benefit to the health system.

3. How easy is it for your patients and their referrers to choose your providers?

Health systems must focus on making it as easy as possible for patients to engage with their preferred providers for referrals. They should pay special attention to their online presence, as the entry point for virtually any elective patient referrals is increasingly “digital first.” Clear messaging across websites, direct and targeted patient messages, and social media platforms help draw patients to health system offerings.

Real-time online scheduling allows patients to seamlessly schedule follow-ups, especially if priority slots are reserved for referred patients. More efficient digital processes also free health system resources to assist patients who may be less technologically savvy.

One health system tested the impact on referral retention by adjusting its processes and tools to better respond to patients’ desire for online interactions. The organization standardized templates, refined decision trees, and configured online scheduling capabilities to make more appointments readily available online.

It also actively messaged referred patients with clear, simple, and actionable next steps. The messages directed these patients to scheduling tools and educational information about their upcoming visit. As a result, the health system proactively engaged and supported more patients throughout their referral journey. Doing so improved their experience, grew volumes, and increased loyalty to the health system.

Focus on your patients to increase referrals

The patient experience is increasingly impacting physician referrals, with their unique preferences shaping the requirements for health system capabilities. Health systems must respond by understanding their consumers, ensuring their offerings meet patient preferences, and making it easy to be the referral provider of choice. Doing so will also allow health systems to react meaningfully to the true underlying drivers of physician loyalty.

In the [second installment of this series](#), we will dive into best practices for market analyses to define physician behavior and uncover areas of opportunity.

Additional contributor:

[Jeff Herman](#), Senior Vice President, Product Management, WebMD Ignite

Sources

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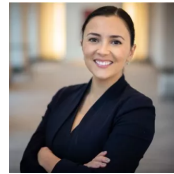
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Jon Freedman
Partner



Domenica Gilbert
Engagement Manager



Juhyung Sun
Senior Manager