



Back to Basics: Creating a Seamless Digital Front Door

Three Key Insights from AVIA's Secret Shopper Assessment of 40 Hospital
Systems

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THREE KEY INSIGHTS FROM AVIA'S SECRET SHOPPER ASSESSMENT

Overview:

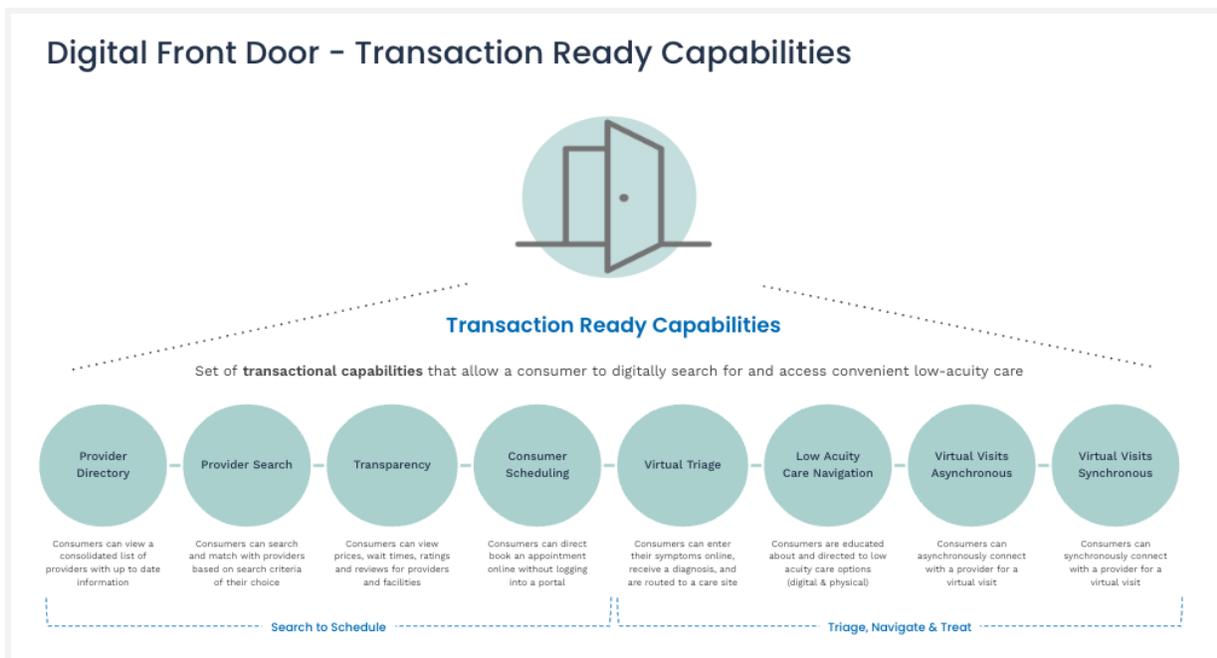
To continue healthcare's consumerism transformation, health system leaders must maintain focus on creating and enhancing the digital front-door experience – not letting headline-making technologies distract from foundational strategies. Findings from AVIA's national secret shopper assessment of over 40 health systems reveal that organizations still have a lot of work to do in closing gaps around basic digital front door capabilities to create a seamless consumer experience, attract and retain patients, and to provide a trusted and credible alternative to digital-first disruptors.

Background:

In 2019, AVIA and its network of more than 50 health systems embarked on a journey to get “transaction-ready.” In short, this work together created the “digital front door” framework, which is a taxonomy to organize the discreet digital capabilities that are required to create a seamless, integrated experience that enables healthcare consumers to search for, schedule, and receive treatment (low acuity).

This framework simultaneously addresses increasing patient expectations for consumer-grade, self-service experiences and the need for efficiency in delivering these core functions to improve the organization's cost position and address workforce challenges.

Digital Front Door - Transaction Ready Capabilities



AVIA's digital front door framework contains ten discreet capabilities that every health system needs to transact efficiently with consumers, organized into two categories - *search to schedule* and *triage, navigate and treat*.

Search to Schedule capabilities include provider directory, provider search, transparency (pricing, cost estimates, rating and reviews) and consumer driven scheduling.

Triage, Navigate and Treat capabilities include virtual triage, low-acuity care navigation, and synchronous/ asynchronous virtual visits

Lastly, woven across these eight capabilities are interaction capabilities most commonly thought of as chat and text boxes that allow consumers to access and navigate through the digital front door in a guided or unguided manner. An example of a guided interaction would be a chatbot that guides a consumer to select the appropriate provider, schedule an appointment or jump into an on-demand virtual visit.

Methodology:

AVIA's secret shopper methodology evaluates these ten capabilities with objective scoring to understand if basic functionality exists for consumers coming to a health system's digital properties, evaluating the public facing, non-authenticated experience.

The scoring scale has three grades;

- 1) No capability present
- 2) Basic, average functionality exists
- 3) Above average functionality

“Functionality”, is based on AVIA's proprietary research in studying “what good looks like” for each discrete capability.

The data for this report was based on observations completed over the last 18 months and represents a snapshot in time, recognizing that health systems may have made advancements since the evaluation. The systems evaluated in this report were identified based on AVIA's network of clients and their relevant competitors. This work was not intended to be a statistically significant, comprehensive evaluation.

Consumer Expectations:

Consumers are continuing to have their expectations set by industries and experiences outside of healthcare, and as such, consumers are demanding digitally-enabled experiences that are simple, convenient, and personalized. Digital front-door capabilities are critical enablers allowing health systems to meet and exceed these expectations.

Consumers want simplicity. Consumers want easy-to-use functionality paired with transparency, being empowered to take action when and where they want it. In doing so, consumers seek frictionless experiences, with 68% of consumers saying they would be more likely to select a provider who offers the ability to book, change and cancel appointments online¹. Simple

¹ Patient Pop

<https://www.patientpop.com/wp-content/uploads/PatientPop-infographic-Why-healthcare-practices-must-offer-online-scheduling.png>

experiences can be powered through digital front-door capabilities like low acuity care navigation, ratings & reviews, and price transparency.

Consumers want convenience. Consumers want convenient, on-demand, 24/7 access via multiple channels across clinical and non-clinical interactions. Other industries have set this expectation in experiences ranging from meal delivery and media streaming to booking travel at all hours of the day.

Consumers are already acting with convenience in mind, with 60% strongly considering a virtual visit over a one-day wait and increasing to when that wait is extended to a week for an in-person visit². Digital front door capabilities like virtual visits, synchronous and asynchronous, and virtual triage can enable the on-demand, 24/7 convenience consumers expect.

Consumers want it personalized. Lastly, consumers today are seeking more personalized and curated experiences than the traditional, one-size fits all approach. Netflix offers recommended shows based on prior watch history. Amazon presents recommended items based on purchases. Consumers expect brands to have their context and history, leveraging that to continue to build a trusted, loyal relationship that extends beyond one transaction.

The digital front door capabilities start to lay the groundwork for engaging your consumers, but ultimately, must become more advanced functionality in the orchestration and stitching together across capabilities. For example, the linkage of virtual triage to pricing of care options and nearby locations and wait times for the triaged condition. These three factors are essential to deliver on business impact - growth, retention, and cost effectiveness as examples.

Capability-Specific Findings

Insight #1 - As health systems create additional care venues, consumers continue to be burdened with navigating their care needs and frustrated by trying to quickly identify the best venue of care.

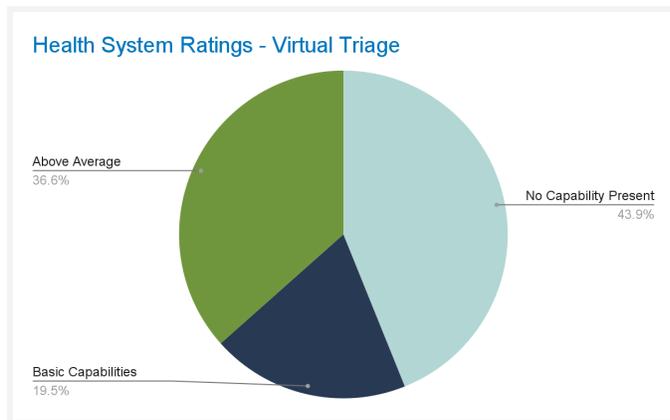
Virtual triage capabilities across the health systems evaluated remain slightly below average, providing an urgent care subpage from the main website,

² The Advisory Board (January, 2021)
<https://www.advisory.com/blog/2021/01/covid-19-telehealth>

perhaps listing locations and wait times. Leading health systems are deploying conversational AI and virtual assistants on the homepage with

robust functionality to guide consumers to the right resource across both clinical and non-clinical needs. Consumers need this assistance, as health literacy continues to remain low, with individuals being challenged with understanding terms, references and navigation where to go. 88% of patients do not have proficient literacy to navigate the healthcare system; however,

they want to use digital channels to meet their needs with more than 75% of patients checking symptoms and looking online for care.^{3,4}



In a recent conversation with a senior leader from a large health system, they related the complexity of digital navigation to the “hit zero” experience from contacting early day call centers; whereby, callers would hit zero as many times as necessary to get to a human who could assist them. We have seen the same thing happen with navigating digital resources - consumers are clicking through content trying to find a resource. With each click along the way, there is the opportunity for the consumer to abandon the potential transaction, and seek information or care elsewhere, at a minimum lost visit revenue, perhaps losing a longer term patient relationship, and at its most significant, an adverse health outcome from delayed care.

As health systems evaluate virtual triage solutions, it is important to link the symptom checker results to the appropriate venues for care, be it virtual or physical. By presenting consumers with this information via their digital assets, there is an opportunity to shift what may have been calls to a clinic or contact center, to a self-service function, meaning health systems facing labor shortages could reallocate staffing to other priorities, as well as reducing wait

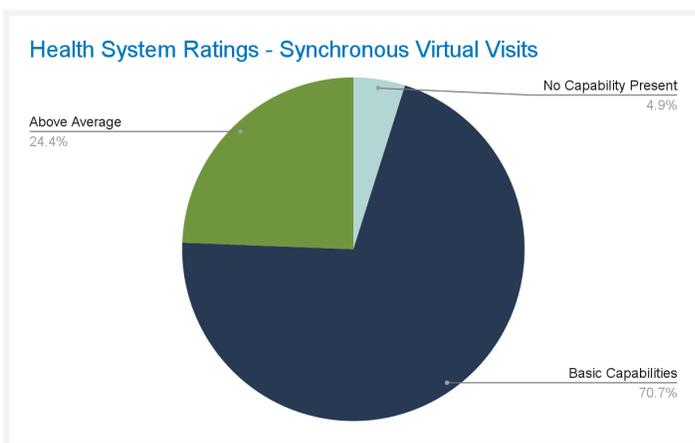
³ Health Literacy in the United States, The Milken Institute (2022) https://milkeninstitute.org/sites/default/files/2022-05/Health_Literacy_United_States_Final_Report.pdf

⁴ Patient Perspectives on the Usefulness of an Artificial Intelligence-Assisted Symptom Checker: Cross-Sectional Survey Study (January, 2020) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7055765/>

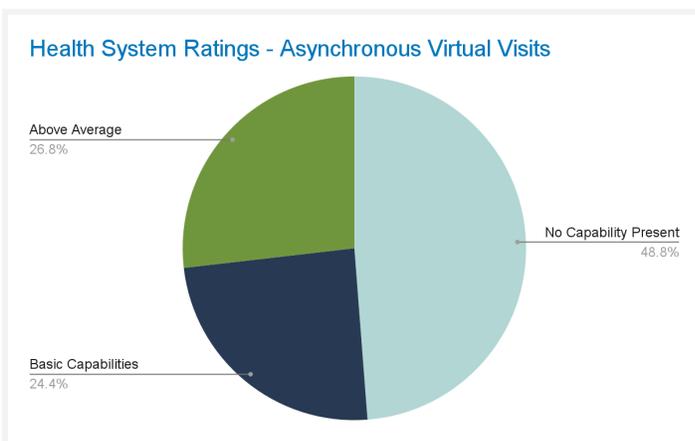
times. Thus, solving for both enhancing the consumer experience, as well as operational constraints.

Others in the ecosystem are offering virtual triage and navigation capabilities, including payers, employers, and disruptors. If consumers go there first to determine where to go for care, health systems lose the opportunity to navigate consumers to appropriate care within their system.

Insight #2 - Virtual Visits, both synchronous and asynchronous, continue to be a challenge for health systems to implement, scale and sustain.



When evaluating virtual visit offerings across the 40+ health systems, an above average rating requires consumers having the ability to complete on demand video visits and scheduled synchronous visits, as well as the ability to provide asynchronous visits.



Across the board, we found health systems to be challenged with providing this functionality to consumers, likely due to the unpredictability in the reimbursement rates and the challenge of providing the seamless flow between technologies and building the requisite processes and care models to enable efficient,

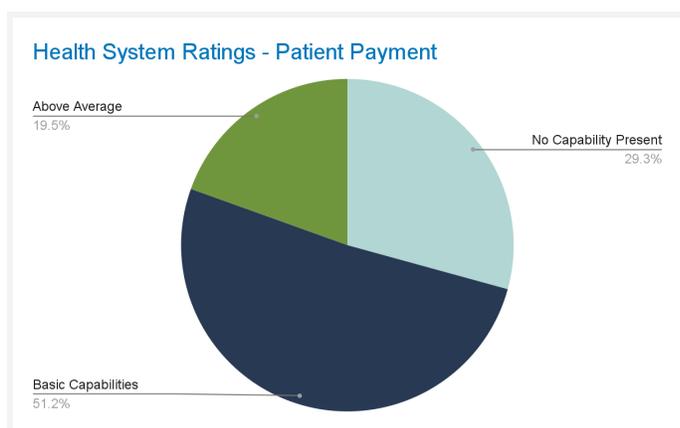
consistent delivery. Highlighted on the pie charts, almost half of the health systems surveyed do not provide asynchronous virtual visit capabilities for consumers to access outside of the authenticated patient portal experience.

This trend is further reinforced by the most recent digital benchmarking performed across AVIA's 56-member network. Out of all ambulatory visits (in-person and virtual), the network average for synchronous virtual visits is 8%, with top quartile performers at 12% of visit volume. Additionally, asynchronous visit volumes are similar, with asynchronous visits making up 7% of total visit volume, and top quartile performers at 17% of total visits.

COVID influenced a rapid deployment of virtual health offerings, and now consumers have become accustomed to engaging with their healthcare providers via that channel. 65% of consumers have reported using telehealth in the last 18 months, and 34% say they want to continue with regularity.⁵

As health systems continue to navigate their virtual health strategy, we are seeing more and more disruptors carve out these volumes via easy to use, 24/7 accessibility and convenient virtual-first offerings, ranging from segment-specific entrants like him&hers and ro, to large insurers facilitating virtual-first primary care like CareFirst's CloseKnit product or UnitedHealthcare's NavigateNow plan. Depending on the health system's environment and strategy, it may be necessary to evaluate the optimal configuration of both internal and external/partnered resources to meet both consumer expectations and deliver the desired business outcomes.

Insight # 3 - Facilitating a shoppable consumer experience through easy to use pricing tools continues to be a challenge for health systems.



At its most basic, health systems may have deployed the ability to submit an online request for a price estimate, as well as the requisite charge master data being accessible. However, these basic abilities fail to meet consumers expectations regarding price transparency. We know that 71% of consumers consider price

⁵ Redpoint Global (December, 2021)
<https://www.redpointglobal.com/press-releases/80-of-patients-prefer-to-use-digital-communication-to-interact-with-healthcare-providers-and-brands/>

transparency and costs when choosing where they go for medical care.⁶

Moving the needle on price transparency requires simplifying some of the most complex attributes of health systems - navigating the insurance landscape across contract rates, individual consumer coverage, variation across locations within a health system, and pulling it all together in an accurate, easy to understand format for your consumers.

As such, many health systems continue to make incremental enhancements with price transparency, such as the ability to accept online guest payments and create payment plans; however, still challenged with creating the seamless, easy to use pricing experience that we see disruptors like Turquoise Health creating. Turquoise Health's price transparency platform averages 14,000 website visitors per month, where consumers are able to compare and shop for healthcare services based on price and quality.⁷ Health systems will need to determine their strategy on transparency, identifying where on the spectrum they align between basic, minimum compliance on increasing regulatory requirements all the way to a true, consumer-friendly differentiated capability.

Takeaways

Health systems today are faced with multi-faceted challenges across rising delivery costs, economic pressures, evolving consumer expectations, and the proliferation of technology in the day-to-day. As health systems continue to advance their digital front door capabilities, they should consider a few strategic questions:

1. Does the organization have the governance and operating model to support rapid adoption, scale and sustainability?
2. Does the organization have the agility to mobilize and shift quickly to leverage new technology or compete against disruptors?
3. Will digital solutions create an integrated experience for consumers that looks and feels like a one-brand environment?

⁶ Price Transparency Not Only Falls Short with Hospitals, But Patients Too (August, 2022)
<https://www.healthleadersmedia.com/revenue-cycle/price-transparency-not-only-falls-short-hospitals-patients-too#:~:text=71%25%20of%20consumers%20consider%20price,exclusively%20to%20HealthLeaders%20on%20this.>

⁷ Turquoise Health Price Transparency Impact Report (2022)
https://assets.turquoise.health/impact_reports/TQ_Price-Transparency-Impact-Report_2022_Q3.pdf

Do not let the buzzy headlines of today distract from the foundational work of fully enabling a seamless digital front door experience. Losing consumers before they have the opportunity to engage with your health system can have tremendous downstream financial impact. For a \$2B health system, investing in these critical capabilities could result in an annual financial opportunity of \$40 - 60MM.⁸

⁸ Estimates developed using AVIA's proprietary Digital Impact Estimator. Additional details can be provided upon request.