

Need to Fire Up Your APM's Consumer Strategies? Start Here

written by Theresa Hush | October 27, 2022



You've read it and you've experienced it: consumer frustration with an impersonal health care bureaucracy offering few conveniences, difficult navigation, high cost, and lack of transparency. Even as some organizations try to move forward with consumer-focused strategies, these are often still fledgling efforts with little overarching structure that fail to attract consumer attention.

Beyond implementing an EMR patient portal, traditional providers have been slow to develop the consumer focus necessary to generate trust and loyalty. Meanwhile, consumers are welcoming an abundance of health apps and other resources that enable them to manage their health and, if sickness strikes, get quick access to minute clinics or other urgent care providers.

For an APM, that means your patients are leaning toward out-of-network services as well as potential referral to specialists, or attachment to networks other than yours. It guarantees frustration for your providers and playing catchup with patients—if they decide to stick with you.

Knocking at your gate are equity-backed competitors that embrace consumers. Blending a concierge front door with coverage under APM agreements, some corporate medicine competitors appeal to consumers with [conveniences](#) like home visits, texting with providers, and after-hours care. They broadcast accountability and reliability, multiple contact paths, and convenience.

Mini-Strategies Won't Fix Fragmented Health Care—or Your APM

The problem with most consumer-directed strategies is that they are piecemeal and isolated. A single organization may have a wealth of separate tactics, such as the patient EHR portal, but the patient can't use it much for self-management. Perhaps your EHR allows patients to schedule appointments, but only with providers they have seen before.

We've focused on many essential consumer-focused strategies previously, such as:

- Improve patient access to records and patient ownership of data;
- Broaden communications and target marketing by consumer segment;
- Ensure bi-directional communication;
- Improve health literacy and access to research information;
- Incorporate patient device info and other patient-reported data;
- Implement cost transparency;
- Help clinicians understand consumer and patient needs.

These are all important separate initiatives, but here's the issue. Unless they are pulled together via an overarching strategic plan that is built on the value of consumers and patients, they will not be enough. You may talk patient-centric, but are your patients and consumers really at the center of your APM entity? Even if you can respond *Yes!* for the APM, is the same true throughout your clinical structure and administrative machinery?

The need to address patient centrality in our health care system also means we need our provider engagement strategies to make similar adjustments. In particular, that requires APM supportive training of patient care teams to build connections with patients:

- Motivational interviewing for physicians and other clinicians;
- Recognition and correction of bias in gathering patient information;
- Health literacy initiatives;
- Improved shared decision-making processes;
- Focus on patient self-management rather than directed orders /management;

Value and assistance in patient-conducted research.

Fix the Front Door for Your Patients and Consumers

The best starting place to boost your overarching consumer strategy is your front door. Improving access to care leads logically to the broader context of redirecting attitudes, clinical care, and coordination activities with consumers.

So, what *is* your front door? It's how *both* consumers *and* existing patients get to you when they need health care. Many organizations may consider the front door as their website plus a call-center or call desk. But that's far from the full picture. Your front door sets consumer expectations from the get-go, from how easy it is to find parking and to access the building, to whether your receptionist or intake person is helpful and welcoming; from comfort of the waiting area to length of time spent there, and so on.

In a telemedicine environment, the front door incorporates convenience of appointment time and ease of online access (does the patient get the link in advance or have to scramble at the last minute?). Whether the provider is on-time (and if they're running late, whether the patient is notified) as well as how much time is budgeted for the appointment—all are part of how patients perceive a welcoming attitude at your virtual front door.

When the need for care is urgent, sending established patients through a call-center to try to reach their doctor is a huge front door gaffe. Patients, understandably, resent [slogging through a call center](#) and waiting for a call-back that may not happen. Some physicians, aware of that logjam, privately hand out cell numbers so their patients can actually reach them in an emergency. But it shouldn't be necessary for a physician to fix the front door.

How to get value right? Show first and foremost that you respect consumers and your patients by making sure they can reach you when they need to. That tells them everything they want to know about whether they must navigate their own care or that you are there to help them navigate your environment. It tells them that you will take their concerns seriously, that you value them as customers, and that you have also trained employees to respect them. In a truly patient-centric environment, they can articulate concerns and be heard. If you want growth and consumer loyalty, demonstrate value by working from the front door inward through the technology, clinician, and service area. Start by opening the door.

Founded in 2002, Roji Health Intelligence guides health care systems, providers and patients on the path to better health through [Solutions](#) that help providers improve their value and succeed in Risk.

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