PRIVATE PRACTICE

# Patient Engagement Solution

Improve patient retention and satisfaction while reducing no-shows with quality home exercise programs, patient education, and virtual visits.

www.medbridgeed.com/private-practice-engagement





# Patient Engagement in 2023: Trends in Leveraging Technology to Drive Outcomes and Retention

Craig Phifer, PT, MHA



#### **Trends**

#### The future of healthcare requires adoption of digital care

#### **Demand**

**Increased expectation of patients** 

#### **Staffing**

Reducing burden of clinicians

#### Revenue

Remote therapy opportunities

## Craig Phifer, PT, MHA

- Owner/CEO of Rehabilitation & Performance Institute
- 12 offices across KY, IN, IL
- Company NPS of 97
- Assistant managing editor for Impact magazine
- Lecturer in the University of Evansville DPT program



## **Chapter 1**

The Evolution of Patient Expectations Regarding Digital Engagement

## **Evolving Expectations**

- Customer demands are constantly evolving
  - Service improvement progression
- Above and beyond  $\rightarrow$  appreciated  $\rightarrow$  expected  $\rightarrow$  demanded

## The Evolution of Consumer Expectations

Above and Beyond  $\rightarrow$  Appreciated  $\rightarrow$  Expected  $\rightarrow$  Demanded



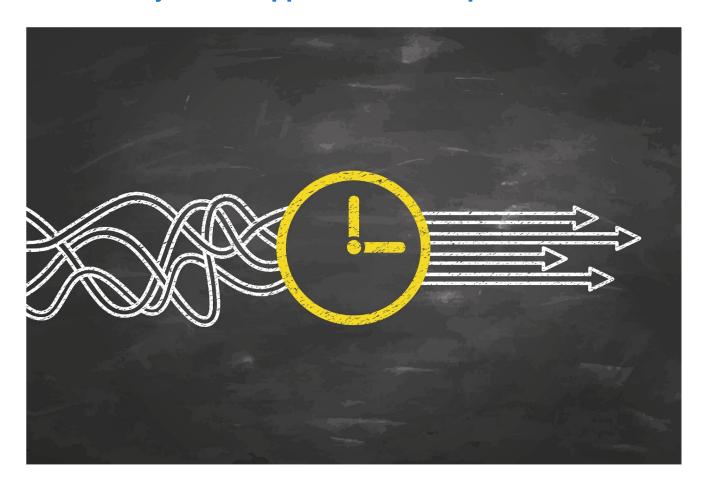
## The Evolution of Consumer Expectations (cont.)

Above and Beyond  $\rightarrow$  Appreciated  $\rightarrow$  Expected  $\rightarrow$  Demanded



## The Evolution of Consumer Expectations (cont.)

**Above and Beyond** → **Appreciated** → **Expected** → **Demanded** 



## **Recent Evolution in Consumer Expectations**

**Above and Beyond** → **Appreciated** → **Expected** → **Demanded** 

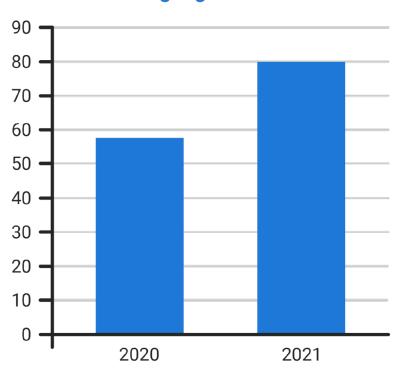


## **Evolving Expectations** (cont.)

Above and Beyond  $\rightarrow$  Appreciated  $\rightarrow$  Expected  $\rightarrow$  Demanded

## **Evolving Expectations for Healthcare**

## Percentage of Healthcare Consumers Preferring Digital Interactions



Of the patients who would prefer to continue with telehealth physical therapy, 77% cited saving time as a key reason for their preference

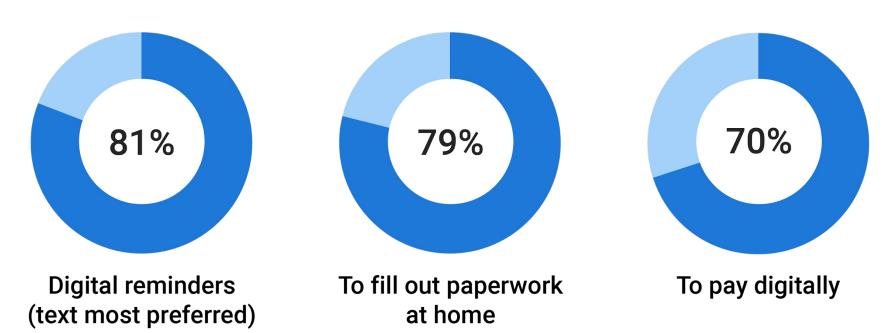
- 1. Redpoint Global, 2020
- 2. Redpoint Global, 2021



## **Evolving Expectations for Healthcare** (cont.)

Most patients prefer digital interaction when not in the office

#### **Patient Digital Interaction Preference**



WebPT, 2022

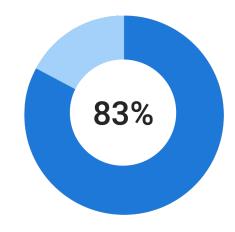
## **Evolving Expectations for PT**

Half of patients 45 and up **prefer** a digital HEP, but only 22% of them received it

## **Evolving Expectations for PT** (cont.)

#### **Communication Between Visits**

The success rate of HEP is 94%, compared with only 67% of patients not receiving regular communication



83% of patients who received digital HEPs reported HEP success

WebPT, 2022



## **Evolving Expectations for PT** (cont.)

- Digital expectations
  - Provider access/interactions between sessions
  - Access to Information
    - Intake
    - Reminders
    - HEP
    - Payment
- Above and beyond  $\rightarrow$  appreciated  $\rightarrow$  expected  $\rightarrow$  demanded

## **Evolving Expectations for PT** (cont.)

- Digital expectations
  - Provider access/interactions between sessions
  - Access to Information
    - Intake
    - Reminders
    - HEP
    - Payment
- Above and beyond → appreciated → expected → demanded

## **Chapter 2**

Leveraging Technology to Meet Expectations
While Reducing Administrative Burden

## **Doing More With Less**

#### Expectations are higher

- More communication and access
- More information that they can access at their convenience

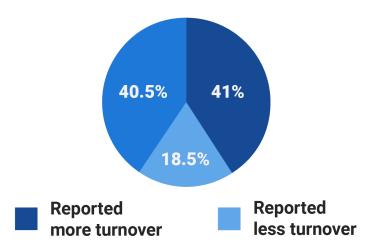


## **Staffing Challenges**

- Organizations need to look at technology as both
  - Reducing

     administrative burden
     for clinicians
  - Helping them build better relationship with patients





The total vacancy rate reported by practices averaged 16%. Vacancy rates were highest for PTs. Nearly 80% of respondents reported at least a 5% vacancy rate across all positions.

https://www.apta.org/news/2022/09/21/workforce-benchmark-report-2022



## **Value Equation**

## Improving the Experience and Results

#### Provider access between sessions

- Patients are frequently unclear on home instructions
- They won't always use it, but they like to have access to you if needed
- We have known of this expectation since 2003; it has simply evolved

## Improving the Experience and Results (cont.)

I'm checking in to see how the exercises were going and if you had any questions from our session yesterday. Please let me know if you need anything. Looking forward to continuing to make progress when I see you on Thursday!

## Improving the Experience and Results (cont.)

- Adjusting the HEP when needed increases effectiveness
- Effective HEPs help drive retention, repeat patients, and word-ofmouth referrals

Some 87% of patients who report that their HEP was effective recommend PT to others versus only 50% of those who say their HEP wasn't effective

## **Reducing Effort and Risk**

- Effort: how hard the patient must work to have a good experience and achieve desired results
  - Coming to see you
  - Scheduling
  - Mental effort
- Risk: the "unknown unknowns"
  - What hurts
  - Why

#### **How to Reduce Effort and Risk**

#### Effort

- Offer telehealth
- Provide digital HEP
- Keep HEP to three exercises or fewer

#### Risk

- Give them access to the info they want
- Make sure they know they can contact you

## **Utilization of Tech: Best Practices for Patients and Staff**

#### Telehealth

- Effective
  - Who
  - When

#### Between-visit check-ins

- Especially after the first visit or any challenging ones
- More about knowing they can access you if they need to

#### Digital Information

- HEP
- Access to helpful info

## **Takeaways**

Do you see low adherence to home exercise programs?

Text patients their home exercise programs, and talk about importance and expectations of adherence in clinic. Patients are nine times more likely to activate and record adherence if HEP is texted rather than printed.

Do you find yourself repeating the same instructions a lot?

Create your own message/patient education in MedBridge, or use the existing ones.

Did you forget to cover a patient expectation during the eval?

Send the information they need in MedBridge, and save your PTs the phone call (because most patients would prefer the info digitally anyway).

## **Chapter 3**

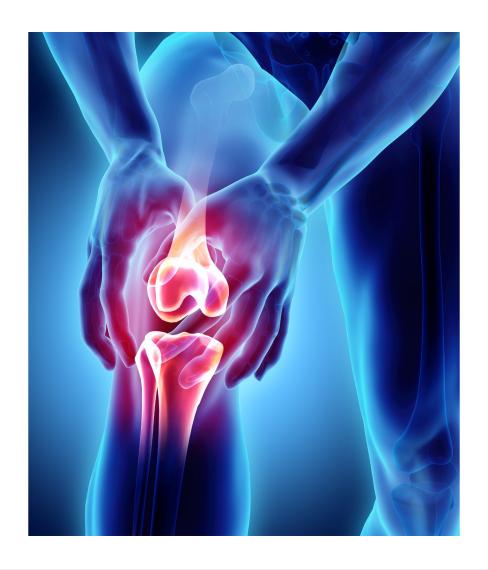
**Patient Case Study** 



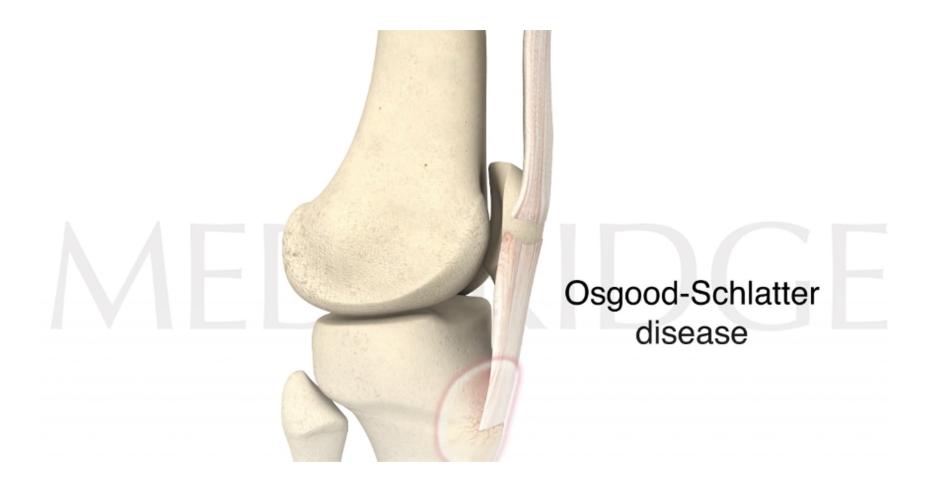
## **Patient Scenario: High School Athlete**



## **Knee Pain**



## **Patient Education**



#### **Patient Communication**

One of the exercises I've been doing has been causing some knee pain.

## **Patient Communication** (cont.)

We haven't even started there yet, and I feel like his care has been incredible. Thank you!

#### **Patient Scenario: After the Evaluation**

#### Forgot to address any sport limitations

- Patient's mother sent me a quick message in MedBridge
- I read it and responded in about 1 minute

#### A week later

- Patient messaged to tell me his exercises had gotten much easier and to ask if I could give him some tougher ones
- Absolutely—took less than 5 minutes

#### **Patient Scenario: The Result**

- Pain-free in two weeks
- Fan for life
- Patient evangelist: patient and his mother sent four people to see us over the next month

## **Patient Scenario: The Reality**

- It did take time to update his HEP
- It did take time to respond to messages
- But it took less time to do those things than it would have taken for him to call or to miss an appointment because he didn't feel like his care was valuable
- It took me 10 extra minutes outside of his normal care to deliver a service that he and his family raved about and still has them sending patients our way

## **Chapter 4**

Remote Therapeutic New Opportunities Impact and Opportunities

## Remote Therapeutic Monitoring

#### **How it works**

Step 1: Enroll patients in RTM and digitally assign home programs.

CPT Code 98975

**Step 2: Monitor patient progress.**CPT Code 98976 and 98977

Step 3: Remotely communicate and update patient programs.
CPT Codes 98980 and 98981

Step 4: Report, document, and bill for RTM.



\$19.58	Initial set-up
\$57.11	Patient monitoring
\$49.66	First 20 minutes of treatment & updates
\$39.90	Additional 20 minutes of treatment & updates
\$166.25	Per patient episode

Reimbursement codes equate to \$166.25 per patient episode.

## Remote Therapeutic Monitoring (cont.)

- Helps build a stronger therapeutic alliance
- Provides more holistic data and view of patient progress
- Improves patient engagement and adherence at home
- Increases revenue

#### **Process**

- Therapeutic alliance
- Patient engagement
- Patient adherence

#### **Results**

- Reduce no-shows and cancellations
- Increased revenue

#### **Hurdles**

#### **Clinical Integration:**

Lack of easy-to-use technology solutions that are integrated with providers' clinical workflows (21% of PTs cite this as the primary hurdle to offering virtual care)

MedBridge has added RTM to existing patient engagement platform. Leverage existing workflow to achieve these results.

#### **Clinician Time:**

Clinicians have limited ability to monitor at-home adherence after in-person treatment given their existing workload.

Incorporate case management workflow within your practice

#### **Reimbursement:**

Affordability challenges of current solutions make it difficult for providers to deploy at scale/slow evolution of FFS payment models

RTM has introduced new payment models to reimburse for this best practice

## **Question and Answer Session**



# Remote Therapeutic Monitoring Solution

MedBridge can help you realize an estimated \$25k in new revenue per provider by leveraging our RTM solution.

www.medbridgeed.com/rtm-solution



