

Physician Referral and Health Information Services Mature, Change With the Times

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BY RICHARD L. COHEN

ATLANTA, GA—Formalized physician referral and health information services have been with us for more than 15 years. When they began in the mid 1980s, they were often viewed by hospitals as marketing tools to enhance physician and hospital revenues. Some physician referral services expanded their mission to include nurse advice and triage. Others remained non-clinical.

But one truth that has become apparent since these early years are that physician referral and health information services are now a standard feature of most hospitals and health systems in this country. More and more the general public understands what these services offer and takes advantage of them. Indeed, the 1999 Sachs/Scarborough HealthPlus Survey of 85,000 respondents in 25 major markets throughout the country indicated that 6.3 percent of respondents had called a physician referral service during the prior 12 months. That's a fairly high number considering the vast majority of people keep the same medical relationships in any given year.

Today's referral service, though, is often much more than physician referral. Many call centers also incorporate class registration, service referral, in some cases, nurse advice and triage, a response center for call in the call center with hospital operations managers.

Nurse Advice and Triage

One area that's undergoing some changes, Divis says, is the nurse advice and triage component of the call center. There has been a reduction, over time, in the number of organizations that offer this feature to the general public. Nurse advice and triage, though, has not gone away, it's simply morphed into another more restrictive setting. "More and more, nurse advice and triage is being directed at patient populations and specific targets," she says.

Kriss Barlow, the Hudson, Wisconsin-based Senior Consultant for The Corporate Health Group, argues that nurse advice and triage to the general public can fit in well with a hospital/health system's marketing strategy if the call center nurses extend their role beyond straight advice. "Nurses can advocate for the patient population your services and knowledge," she says.

Instead of simply handling the medical situation in front of them (except of course for an emergency), they can expand the conversation. "For example, the nurse could ask a parent who wants more information about measles if they have a regular doctor for their child," she says.

Additionally, this "to the public" program can be used to meet another hospital objective—reducing the crowding in the emergency room that is afflicting many organizations today. According to the CDC, there were 103 million visits to emergency rooms in 1999, an increase of 14 percent since 1992. Undoubtedly, that trend has continued the last two years.

Coincidentally, on the supply side, there has been a reduction. According to American Hospital Association data, between 1994 and 1999, the numbers of emergency rooms decreased by eight percent. Additionally, the number of inpatient beds has declined, resulting in jams in the system.

Increasing the visibility of telephone nurse advice and triage may have some effect in alleviating this shortage by directing individuals who don't need to be seen in an emergency environment to a more appropriate level of care, says Ann Greiner, Director of Public Affairs for the Washington, DC-based Center for Studying Health System Change.

Call Centers and The Marketer

In reference to the role of call centers in the marketing continuum, Barlow says there could be more work done to solidify the benefits. "Most marketers haven't been sold on the marketing deliverables call centers can provide," she says. "There is call to action and physician referral. The question is what else could be done with the call center opportunity."

For that, it's a two way street. Barlow challenges call center managers to approach marketing managers with, "here's what we can do for you." And, conversely, marketers should be more challenged to fully utilize the wealth of data that the call center has in its repository.

This brings up HIPAA issues as far as what data can be used and what can't. A draft provision of HIPAA called for permission marketing. However, argues a White Paper from CPM Corp ("Patient Privacy in an Information Age: Implementing HIPAA in Customer Relationship Management Programs") it will be enough in most circumstances to send a targeted communication unsolicited one time as long as there is an opt-out provision.

Barlow maintains that permission marketing still makes the best sense from a strategic point of view. "By asking permission, you are getting the dialogue started," she says. That's an excellent beginning to answering the question: how do we connect these people on a relationship long-term, she adds.

Community Service in Dayton

While there are some call centers that have changed dramatically over the years, there are others that have found a winning formula right off the bat and are sticking with it. Miami Valley Hospital in Dayton, Ohio, was one of the earliest players in physician referral, having served as a beta site for an early software vendor back in the mid 1980s. "From the beginning, our goal was to try and connect people in our community with physicians and services," says Deborah Ross, Director of Marketing. "We viewed this as a community service to help people who need care access that care."

That doesn't mean the hospital wouldn't be upset if its expenses were higher than revenues the call center brought in. For the first three to five years of its existence, the call center did a revenue reconciliation on a quarterly basis to see how much business was coming to the hospital as a result of the physician referral service.

"We don't do that anymore," she says. "We found a lot of consistencies so we stopped except for perhaps one quarter every few years."

In 1999, Miami Valley took over the referral service for Good Samaritan Hospital, an institution that was part of a joint operating company with Miami Valley. Today, there are seven staffers in the center, which receives 10,000 calls a year for physician referral and countless others for service referral.

Ross says the hospital's call center competes with other call centers in the community and it also works with them on a collegial basis. For example, if her call center gets a call from someone wanting a specialist not available at their two hospitals, the referral will be made to a specialist at a competing hospital.

Marketing for the call center is done fairly frequently. CareFinders is advertised on television three to four times a year and there is also radio, print, direct mail and various sponsorships. “It used to be there was a direct relationship between call volume and when advertising was hitting,” Ross says. “That’s not so much the case anymore.” That’s because the concept is now ingrained in the consumer so it’s not an “Ah, ha” when they see an ad.

Physician Satisfaction and Call to Action in Gainesville

For more than a decade Shands HealthCare in Gainesville, Florida, has had an active call center. Today, that call center provides physician referrals for three of the six hospitals in the system as well as providing physician to physician referral and consult services for Shands at the University of Florida.

In this model, referring physicians can call into a central number and get instant access to a specialist for a consultation or referral purposes. Nicole Pope, Associate Director of Marketing and Public Relations, says this is a hugely popular feature of the call center for referring physicians as it gives them an easy entree into the academic medical center.

Physician referral to the general public has a marketing goal within Shands, Pope says, but is not dollars related. “We used to provide administration with admissions reconciliations, but they didn’t believe the results,” she says. “Administration at that time believed people would come here whether the call center was here or not.”

However, the referral service was continued because it was an inexpensive service to maintain. Shands has six FTE’s in the call center, with 70 percent of their work taken up by physician referral and other activities for the general public versus the physician to physician line.

“We have the call center handle all the call to actions for the hospitals,” she says. “We have their number on all of our ads.”

Indeed, an important role for the call center today is as an integral part of an access strategy; the call center’s phone number becomes that all encompassing initial contact point for consumers accessing hospital services.

As part of this strategy all ads also list its web address, where consumers can choose a physician from the online physician directory as well as many other features. The call center functions as the response center for all queries from the web site.

The health system recently looked seriously at adding a nurse triage component to the call center and decided against it, ‘because we’re not as capitated,’ she says. ‘We want people to come in rather than being told by a nurse on the phone to take two Tylenol. From the academic perspective, the administration felt that the residents should see these patients.’”

Call Center at BJC the Glue for Marketing

“Our call center is absolutely critical to all facets of our marketing function systemwide,” says Tess Niehaus, Corporate Director of Marketing for the 13 hospital strong, St. Louis-based BJC HealthCare. “It’s a one stop shop for anything we do at the hospitals. It’s one less burden for the marketing department to know where the phone is going to ring.”

BJC moves a lot of call to action advertising through the call center for very sound reasons, Niehaus says. She points out that a critical component of successful call to action marketing campaigns is “consistently professional service on the back end.”

The BJC call center also does physician referral, class registration and nurse advice and triage— pediatric triage to the general public and adult and pediatric triage to contracted

populations. “Our pediatric triage is sponsored by St. Louis Children’s Hospital and positions us strongly in the community,” she says. “From a business standpoint we’ve tracked the hospital utilization of callers. St. Louis Children’s gets a tremendous amount of business from this triage program.” The business strategy behind the call center’s contracted triage is to solidify physician relationships and that has worked as well, Niehaus says.

Interestingly, BJC does little corporate advertising for the physician referral part of its call center. Rather, most referral advertising is sponsored by the individual hospitals in the system touting their respective medical staffs.

Quality Service Improvement at Einstein

The call center at Albert Einstein Healthcare Network in Philadelphia has recently expanded its reach through a pilot project that is part of a new Quality Service Improvement Initiative. “We use Press Ganey,” says Marketing Manager Jackie Kozlowski. “The surveys indicate we’re really good on some things and others need improvement. What we’ve done is create some questions based around areas in which we could use improvement.” These include queries on staff responsiveness, privacy, meeting the emotional/spiritual needs of the patient and other areas connected with treatment.

“We have RN’s on staff in the call center who are calling recently discharged patients,” she says. “They’re asking these questions and then also telling callers they may get a patient satisfaction survey in the mail and asking them to fill it out.” This “reminder” helps because it can sometimes be difficult to get patients to fill out these surveys.

Kozlowski says the call center was chosen for this function because of its RN staff, which can be most helpful for medical follow-up discussions that may happen as part of the survey process.

To draw inbound callers to its call center for physician referral and health information, Einstein’s principal outreach has been to spread its 1-800-EINSTEIN number on all of its promotional material and advertising. ■