

# EMPOWERING HEALTHCARE LEADERS:



## A DATA-DRIVEN GUIDE TO PATIENT ACCESS SUCCESS

Unlock the Power of Data to Transform Patient Care,  
Boost Efficiency, and Drive Growth

**RELATIENT**

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# A Message from Our CEO



*"The data you choose to focus on can illuminate paths to better care, showing you what's working and what needs to change."*

**Jeff Gartland** | Chief Executive Officer, Relatient

Your decisions in healthcare impact more than managing operations – they touch lives. Every choice you make, from improving scheduling to enhancing patient engagement, creates a ripple effect that impacts patient care and well-being. At the core of effective healthcare is a simple truth: patients deserve seamless access to the care they need. But achieving this isn't always simple. It requires clarity, focus, and the right insights to guide your way.

This guide is here to help you see that path more clearly. It's about identifying the data that matters most, so you can make informed decisions that lead to real improvements – whether it's reducing wait times, increasing appointment volumes, or elevating the patient experience.

You are at the forefront of creating a healthcare experience that truly serves patients. By leveraging the right insights, you can ensure that every decision you make contributes to a more accessible, efficient, and compassionate healthcare system.

*Thank you for your dedication to making healthcare better, not just for today, but for the future.*

# Chapter 1: Navigating Data Complexity

Managing large volumes of data, often across various systems, is a significant challenge for growing healthcare organizations.

As your practice expands – whether by onboarding additional providers, opening new locations, or acquiring other practices – the data you need to track can quickly become overwhelming. This includes key metrics like no-show rates, appointment confirmations, payment collections, and scheduling efficiency, all of which directly impact your overall operations.

Acquisitions add another layer of complexity, as they often involve integrating disparate data systems. Consolidating data from various sources can lead to inconsistencies and gaps, making it harder to maintain accurate scheduling and ensure that resources are optimally allocated.

When faced with too much information, it becomes challenging to identify actionable insights. This data overload can hinder your ability to make informed decisions, leading to inefficiencies in scheduling and missed opportunities to improve patient care.



*Healthcare M&A surged in Q1 2024 with 20 deals, the most since 2020.*

*Source: [Medical Economics](#)*

To navigate these challenges, focus on two key principles: data accuracy and relevance. Accurate data ensures that your scheduling decisions are based on reliable information, while relevant data highlights what truly matters, guiding improvements in patient access and operational efficiency.

In the following chapters, we will explore how these principles can enhance specific areas of your practice, such as provider and scheduling performance, contact center efficiency, and patient engagement.

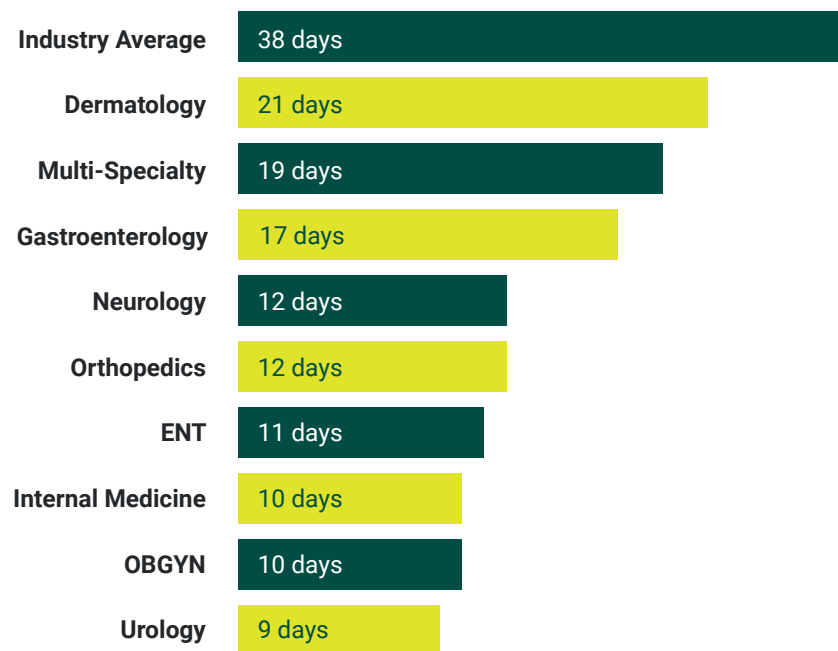
# Chapter 2: Measure What Matters: Enhancing Provider and Scheduling Performance

In healthcare, operational efficiency depends on understanding the right data.

The decisions you make – whether in scheduling appointments or managing provider and staff workloads – are informed by the metrics you track. Without the right data, inefficiencies can go unnoticed, leading to provider burnout, staff overload, patient dissatisfaction, and missed opportunities for growth. Tracking the right data also helps ensure staff workloads are more manageable by improving processes like appointment scheduling and patient communication, reducing unnecessary manual tasks and allowing staff to focus on more important responsibilities. By focusing on the most relevant metrics, you can identify areas for improvement, optimize operations, and enhance the quality of care you provide.

As you refine your scheduling processes and enhance provider performance, the efficiency of your contact center also plays a crucial role in ensuring these improvements translate into a seamless patient experience. In the next chapter, we'll explore how to optimize your contact center operations, focusing on the metrics that can help you manage patient interactions more effectively and reduce operational bottlenecks.

The Third Next Available Appointment Average for Relatient clients is **14 days**.



*Relatient client data (2023-2024) highlighting average appointment wait times across specialties.*

# Key Metrics to Measure and Enhance Provider and Scheduling Performance



## Appointment Wait Times

**What It Tracks:** The time patients wait between scheduling an appointment and seeing a provider.

**Why It Matters:** Reducing wait times improves patient satisfaction and ensures quicker access to care, which is important for overall outcomes, especially for managing chronic conditions.



## Utilization Rates

**What It Tracks:** The percentage of a provider's schedule spent on patient care.

**Why It Matters:** High utilization rates indicate efficient use of provider time, but it's important to avoid overbooking. Balancing utilization ensures that providers are working at an optimal level without being overwhelmed.



## Rule Optimization

**What It Tracks:** How well scheduling rules – such as provider preferences – align with patient needs.

**Why It Matters:** Optimizing scheduling rules help ensure that patients are seen at the right times, providers' schedules are manageable, and the practice operates smoothly.



## Third Next Available Appointment

**What It Tracks:** The time in days between a patient's request for an appointment and the third available slot.

**Why It Matters:** It highlights the balance between access and appointment availability. Short waits indicate that patients can get in quickly, while long waits suggest a need for more appointment options.



## Scheduling Accuracy

**What It Tracks:** How accurately appointments are booked according to the correct time, location, and visit reason based on provider preferences and rules, ensuring appointments align with the assigned provider's availability and requirements.

**Why It Matters:** High accuracy minimizes errors, reduces disruptions, and ensures a smoother workflow for both patients and providers.



## Waitlist Conversion

**What It Tracks:** The rate at which waitlisted patients are successfully scheduled into newly available appointment slots.

**Why It Matters:** Efficient waitlist conversion helps backfill cancellations quickly, ensuring that provider time isn't wasted and that patients receive timely care.

# Chapter 3: Enhancing Contact Center Efficiency

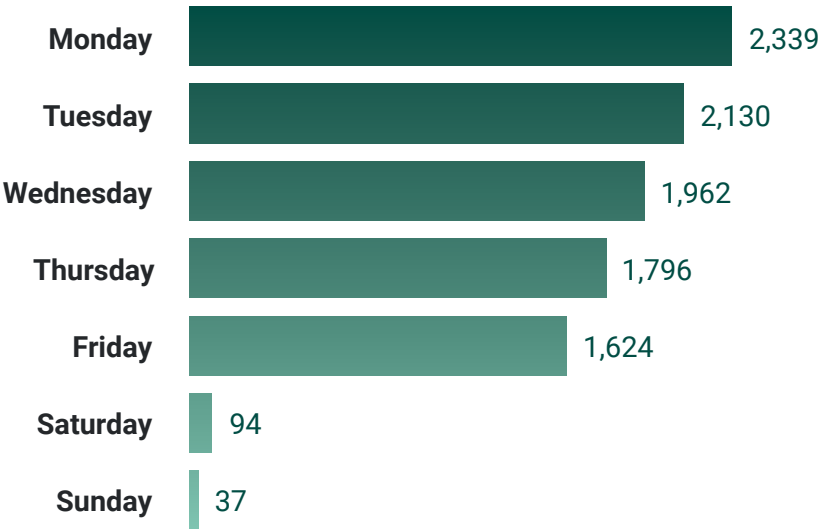
Your organizations’ contact center is often the first point of contact for patients, playing a critical role in shaping their experience.

One of the biggest pain points for contact centers is managing high call volumes, which can quickly overwhelm staff and lead to long wait times, frustrated patients, and inefficiencies. To ensure your contact center operates efficiently, it’s essential to measure and analyze key performance indicators (KPIs) that directly impact both efficiency and patient satisfaction. Effective measurement goes beyond collecting data; it’s about using that data to make informed decisions that lead to continuous improvement.

Contact centers rely heavily on data to optimize operations. By understanding when call volumes peak, which days are busiest, and how many resources are needed, you can significantly enhance your ability to manage patient interactions effectively. Focusing on the right metrics helps reduce bottlenecks, improve scheduling efficiency, and lower costs.

*“Those (provider and scheduler) relationships are so much better now, and it’s because of this (scheduling) platform. It really has helped our morale overall. There’s less staff turnover, that’s a cost we’re saving because we’re not training new hires every few months.”*

**Jill Brothers** | Clinical Director, South Bend Orthopaedics



Annual average peak call volume days identified across Relatient clients, offering insights into optimal resource planning.

# Key Metrics to Enhance Contact Center Efficiency



## Minutes Per Call

**What It Tracks:** The average duration of patient calls.

**Why It Matters:** Shortening call durations without sacrificing quality can improve efficiency and allow your staff to handle more calls. This, in turn, reduces wait times for patients and boosts their overall experience.



## Appointment Booking Efficiency

**What It Tracks:** The speed and accuracy with which appointments are booked during patient calls.

**Why It Matters:** Streamlining the booking process increases scheduler productivity and ensures that appointments are booked correctly the first time, reducing the need for follow-up calls, and minimizing errors.



## Overall Call Volume

**What It Tracks:** The total number of calls received by the contact center.

**Why It Matters:** Managing call volume effectively helps reduce bottlenecks. Understanding call volume patterns allows you to allocate resources more effectively, particularly during peak times.



## Staff Training Times

**What It Tracks:** The time it takes to train new contact center staff.

**Why It Matters:** Shortening training times lowers operational costs and ensures that new staff members become productive more quickly. Effective training programs also lead to better consistency in patient interactions.



## Days with the Highest Call Volume

**What It Tracks:** Identifies which days see the most incoming patient calls.

**Why It Matters:** Knowing when call volumes peak allows you to adjust staffing levels, accordingly, ensuring that you have enough resources to handle the increased demand without compromising on service quality.

As you enhance your contact center's efficiency, the next step is to ensure that these improvements translate into a better overall patient experience. In the next chapter, we'll explore strategies for empowering patients through self-scheduling, focusing on how to create a seamless and satisfying journey from the moment a patient first engages with your practice.

## Chapter 4: Improving the Patient Experience

Patient expectations have evolved significantly in recent years, due to the rise of consumerism – the trend where patients now act as consumers, expecting the same level of convenience from healthcare as they do from other industries.

In fact, a recent study revealed that 95% of respondents would rather book a medical appointment online if it were available. To meet these growing demands, it's critical to measure and analyze the right patient experience metrics that not only improve access to care but also deliver a connected care experience.

By focusing on key metrics and optimizing scheduling processes, practices can enable better outcomes and build a seamless experience that drives both acquisition and retention.





*“Patients expect more control and convenience throughout their healthcare experiences. Empowering them with easy-to-use self-scheduling demonstrates a deep understanding of patient perspective early in the care journey, laying the groundwork for high patient satisfaction and optimal practice efficiency by reducing back-and-forth of appointment management for which healthcare is sadly famous for.”*

**David Dyke** | Chief Product Officer, Relatient

# Key Self-Scheduling Metrics to Measure and Improve the Patient Experience



## Self-Scheduling Rates

**What It Tracks:** The percentage of appointments booked directly by patients online vs other channels.

**Why It Matters:** Optimizes appointment volume while reducing strain on staff.



## After-Hours Scheduling

**What It Tracks:** The appointments booked outside of regular office hours.

**Why It Matters:** Expands patient access and attracts new patients with no staff intervention.



## Patient Acquisition

**What It Tracks:** The portion of self-scheduled appointments made by new patients.

**Why It Matters:** Reflects the practice's ability to attract new patients through online scheduling.



## Referral Scheduling

**What It Tracks:** The number of referral appointments booked digitally through targeted text or email messages sent directly to individual patients.

**Why It Matters:** Simplifies the referral process and avoids patient leakage.



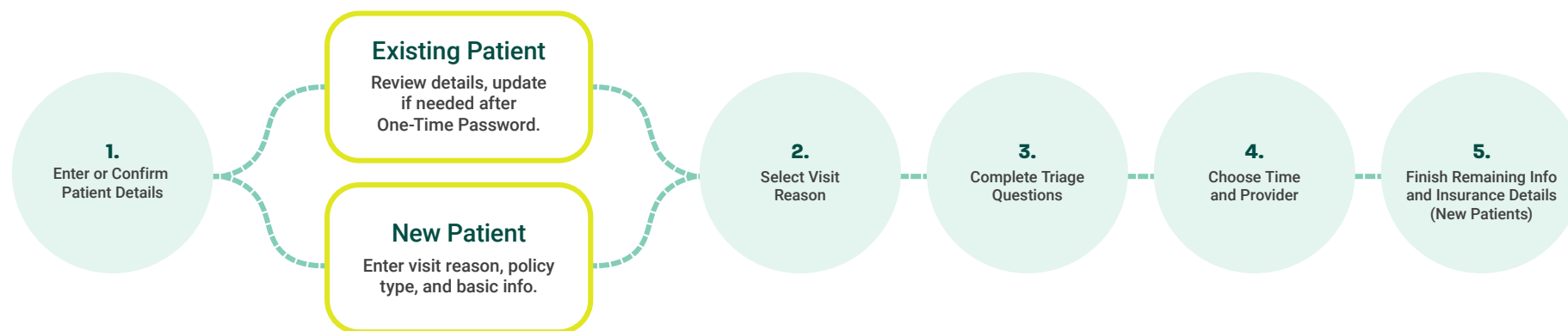
## Abandonment Rate

**What It Tracks:** The percentage of patients who start but do not complete the self-scheduling process.

**Why It Matters:** Helps identify friction points in the booking process to improve conversion.

# Simplified Patient Journey with Self-Scheduling

Here's how an intelligent self-scheduling system lets patients book easily while still adhering to complex provider rules, ensuring a smooth and accurate experience.



As you work to improve the patient experience by focusing on self-scheduling and other key metrics, the next step is ensuring that these improvements also positively impact your financial outcomes. In the following chapter, we will explore how effective scheduling practices can drive financial performance and enhance the bottom line for your practice.

## Chapter 5: Managing Financial Impacts



Financial stability is a key driver for healthcare practices, and effective scheduling and data management can play a pivotal role in improving financial outcomes.

By tracking and analyzing key financial metrics, practices can identify opportunities to streamline operations, reduce costs, and boost revenue. The more efficient your scheduling and payment processes, the quicker you can collect payments and improve cash flow. Let's explore the critical financial metrics that every healthcare practice should measure to achieve better financial results.

# Key Metrics to Track and Improve Financial Outcomes



## Payment Collection Percentage

**What It Tracks:** The percentage of payments successfully collected each month.

**Why It Matters:** Higher payment collection rates indicate efficient payment processes and timely payments, improving overall cash flow.



## Balances Collected by Payment Plans

**What It Tracks:** The percentage of balances collected through payment plans.

**Why It Matters:** Financial planning allows more patients to be set up on payment plans, ensuring consistent revenue flow, reducing the risk of unpaid balances, and easing the financial burden for patients, which improves their overall experience.



## Reduction in Accounts Receivable

**What It Tracks:** The decrease in outstanding balances over time.

**Why It Matters:** Streamlining follow-up processes helps reduce the number of unpaid invoices, leading to improved cash flow.



## Quickness to Pay

**What It Tracks:** The speed at which co-pays or outstanding balances are collected from patients.

**Why It Matters:** Faster payment collections lead to improved financial health, reducing the time and resources spent on chasing unpaid balances.

Illustrative example of projected outstanding balance reduction through payment plans over a 9-month period.

October	\$822,388	
November	\$568,774	
December	\$408,058	
January	\$323,028	
February	\$261,742	
March	\$195,901	
April	\$157,011	
May	\$135,337	
June	\$115,655	

# Key Metrics to Track and Improve Financial Outcomes

As we explore the financial impacts of effective scheduling and data management, the next step is to ensure these improvements extend to patient engagement. In the following chapter, we will discuss how to measure patient engagement and why it's critical to reducing no-shows, improving satisfaction, and fostering better relationships between patients and practices.



## Payments Made After Business Hours

**What It Tracks:** The number of payments made outside of normal office hours, typically through digital payment systems.

**Why It Matters:** Offering flexible payment options, including after-hours payments, increases the likelihood of timely payments and patient convenience.



## Patient-Initiated Enrollment in Payment Plans

**What It Tracks:** The payment plans set up by patients without intervention from the practice.

**Why It Matters:** Frictionless payment plans allow patients to manage their payments independently, reducing administrative burden while improving payment compliance.



## Appointments Booked by Insurance Type

**What It Tracks:** The appointments by insurance type, including self- and staff-scheduled.

**Why It Matters:** Highlights potential financial impact due to higher reimbursement rates.

## Chapter 6: Measuring Patient Engagement



The Warren Clinic reduced their no-show rate to 4.7% with automated appointment reminders and waitlist conversions.

Patient communication is central to delivering high-quality care and ensuring patient satisfaction. To understand and enhance patient interactions, it's essential to track key metrics that give insights into how effectively your practice engages with its patients. By measuring patient engagement, you can identify areas for improvement, implement strategies to reduce no-shows, streamline appointment booking, and ensure patients remain connected throughout their care journey.

*"It doesn't matter if you remind a patient of an appointment 100 times—if the patient cancels and the office doesn't have the ability to manage appointments and backfill, you haven't solved anything."*

**Steve Davis** | VP of Operations, The Warren Clinic



# Key Metrics to Measure and Improve Patient Engagement



## No-Show Rates

**What It Tracks:** The percentage of patients who miss appointments without prior notice.

**Why It Matters:** Reducing no-shows can significantly improve scheduling efficiency, increase revenue, and ensure that providers' time is used effectively.



## Response Rates

**What It Tracks:** How often patients confirm, cancel, or reschedule appointments.

**Why It Matters:** High response rates help manage appointments effectively.



## Preferred Channels of Communication

**What It Tracks:** Patients' preferred methods of receiving communication.

**Why It Matters:** Using preferred channels increases engagement and response.



## Appointments Booked Via Text or Email

**What It Tracks:** The percentage of appointments booked through digital links.

**Why It Matters:** Timely communications such as health campaigns or reminders for patients help drive appointment volume and booking efficiency.



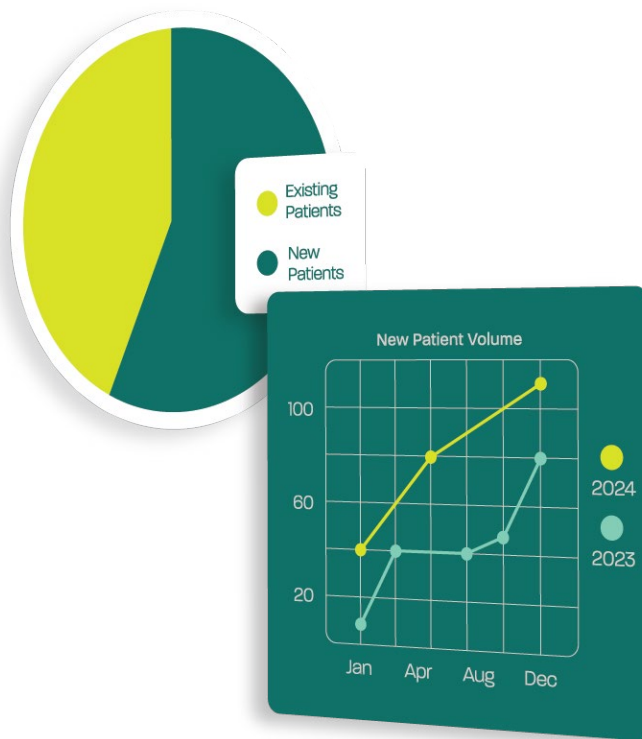
## Digital Form Completion

**What It Tracks:** The rate at which patients complete forms online before their appointments.

**Why It Matters:** Streamlines check-ins and reduces office wait times.

As you work to enhance patient engagement, the next step is leveraging data analytics to ensure sustained improvements in both patient outcomes and operational efficiency. In the next chapter, we'll explore how data analytics can help you continuously track progress, make informed decisions, and achieve long-term success for both your practice and your patients.

## Chapter 7: Achieving Patient Success Through Data Analytics



Data analytics is the key to driving both operational efficiency and enhanced patient outcomes in modern healthcare.

By recognizing the value of key metrics and implementing data-driven strategies, healthcare leaders can make informed decisions that optimize everything from provider performance to patient engagement. Throughout this guide, we've explored how targeted metrics and improvements in scheduling, patient engagement, and financial processes can lead to measurable success.



*“Success comes from starting the journey and using data to guide changes. Optimizing providers’ time and resource allocation takes time, and you won’t always see the impact of scheduling right away. Rather than striving for perfection on day one, trust the data to help you make informed decisions as you evolve.”*

**Emily Tyson** | Chief Operating Officer, Relatient

# As you consider your path forward, it's important to set clear expectations. Here's what to look for:



## Clear Analytics

Ensure transparent reporting and access to customizable dashboards that provide insights tailored to your practice's unique needs. Your vendor partner should offer clear and actionable data to help you track progress and make informed decisions.



## Practical Support for Success

Self-service tools, implementation guidance, and comprehensive training resources are essential. Change management support should be included to help your team navigate any transitions smoothly and maximize the value of your technology investments.



## Improvement Recommendations

Look for vendor partners who provide expert recommendations and ongoing consultant support. Continuous improvement requires input from those who understand your needs and can help guide you through the process, ensuring your organization can adapt and evolve.

As you look to the future, the power of data analytics will be key in driving ongoing success for your practice.

# Need more data insights?



Dash® by Relatient, is an end-to-end intelligent scheduling and patient engagement solution that helps healthcare practices optimize patient access and streamline operations.

Our platform delivers actionable data insights that enhance both patient care and practice performance.

Whether it's improving scheduling efficiency or reducing no-shows, our solution gives you the tools and insights to create a seamless experience. Ready to take the next step? **Schedule a personalized demo** with us or reach out to [sales@relatient.com](mailto:sales@relatient.com).



## Key Metrics Checklist ✓

- ☐ Appointment Wait Times
- ☐ Waitlist Conversion
- ☐ Staff Training Time
- ☐ Patient Acquisition
- ☐ Quickness To Pay
- ☐ No-Show Rates



*“The system has really given us the ability to take that patient from the first time they touch our practice and help them get to the right place, the first time.”*

**Andrew Wade** | Chief Executive Officer, OrthoSC

**Hear more about OrthoSC' experience →**

# RELATIENT



See Dash in Action

[relatient.com](https://relatient.com)