Improving the patient experience
Disclaimer

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- This presentation is for informational purposes only and is meant to educate providers on potential improvements based on CAHPS® survey responses.
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Consumer experience for exchange plans is assessed via a qualified health plan (QHP) survey that is similar to the CAHPS survey.
Part one

Quality

CAHPS

Value-Based Care
Improving our member experience

We strive to make our members’ experiences positive.

Each year, between [March and May], a random sample of your patients may receive a survey called Consumer Assessment of Healthcare Providers and Systems (CAHPS). The survey asks your patients to rate and evaluate their experiences with:

- Their personal doctor or PCP
- Their healthcare
- The health plan
- The specialist they see most often

Consumer experience for exchange plans is assessed via a qualified health plan (QHP) survey that is similar to the CAHPS survey.
How providers and health plans impact the member experience…

- Timeliness
- Communication
- Accessibility
Improving the member experience

**Member experience:**
- Is a defined impression of the healthcare system.
- Extends to the safety and quality of the care received.
- Differs from patient satisfaction.

**Positive patient interactions can lead to:**
- Better clinical outcomes.
- Adherence and commitment.
- Improved patient safety.
- Lower utilization of unnecessary healthcare services.

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**Continuum of member experience**

- Doctors
- Nurses
- Clinical staff
- Other healthcare facilities
Improving the member experience (cont.)

Provider benefits include:
- Personal/professional satisfaction
- Financial benefits
- High-quality performance
Improving the member experience (cont.)

- Standardized patient surveys
- Develop strategies and tools
- Better understand the patient experience
- Healthcare services and settings
- Improve quality of care
Knowledge check

True or false?

Evidence suggests a strong correlation between patient satisfaction and healthcare outcomes.
CAHPS survey questions

In the last [12 (six)]* months, how often did your personal doctor:

- Explain things in a way that was easy to understand?
- Listen carefully to you?
- Show respect for what you had to say?
- Spend enough time with you?
- Have your medical records or other information about your care?

In the last [12 (six)]* months, how often did:

- You get the help that you needed from our doctor’s office to manage care among different providers and services?
- You get an appointment for a checkup or routine care at a doctor’s office or clinic as soon as you needed?
- You and your provider talk about all the prescription medicines you were taking?

* Consumer experience for exchange plans is assessed via a qualified health plan (QHP) survey that is similar to the CAHPS survey and asks questions about the last [six] months.
Do you know what your patients really think?

I often have a long wait in the lobby to see my doctor, and then I feel rushed during the appointment. It’s like they do not have time for me.

No one ever calls me back when I leave messages for my doctor.

I like Dr. ____ but sometimes I feel like he doesn’t really listen to me.

Dr. _____ is nice, but she uses a lot of medical terms that I do not always understand.

The front-desk receptionist is not very friendly.
Improving the member experience

What do our members want?
• Listened to and not feel rushed
• Language easy to understand
• Treated with respect
• Compassion and empathy
• To be involved in the treatment plan
• Get an appointment when needed

Why resolve patient issues?
• Patient experience positively correlates to better patient outcomes for both prevention and disease management
• Good patient experience is associated with lower medical malpractice risk
• Patient loyalty — Patients keep or change providers based on experience
Improving the member experience (cont.)

Communication:

• Is a fundamental component of each healthcare interaction
• Impacts patients’ health outcomes, safety, and healthcare experience

Barriers that may impede communication:

• External barriers (for example, distractions, interruptions, scheduling, inadequate training, flawed processes) can be fixed
• Internal barriers (for example, perceived lack of time, internal thoughts, cultural differences, fatigue, emotions, stress) may be more difficult to address

Other barriers include:

• Language
• Hearing
• Vision
Knowledge check

True or false?

If the office and medical staff’s customer service, interpersonal skills, and communication skills are weak, it reflects poorly on the physicians and the practice.
Part two

C.A.R.E. Communication

Care Coordination

Customer Service
C.A.R.E communication model

Meeting patient needs through C.A.R.E models:

• Demonstrate active listening by asking questions and making affirmative statements.
• Ensure office staff is courteous and empathetic.
• Offer *Americans with Disabilities Act* solutions for patients requiring assistance related to ambulatory needs or other disabilities.
• Ensure patients do not feel rushed when discussing their health and avoid interruptions during the visit.
• Schedule enough time with the patient to address all their concerns.
• Provide a clear explanation of treatment and procedures.
• Respect cultural differences and beliefs.
• Obtain and review records from hospitals and other providers.

https://www.mydiversepatients.com/mhpdocs/CAHPS_Resources.pdf
The C.A.R.E model can enhance communication skills and improve the patient experience.

- **C – Connect**
  - Personal connection
  - Build rapport

- **A – Ask**
  - Prioritize concerns
  - Actively listen

- **R – Respond**
  - Empathize
  - Inviting them to share information

- **E – Explain**
  - Use easy terms
  - Assess how much info is wanted
C.A.R.E communication model (cont.)

Connect — Connecting with patients:

- Greet patients with a smile.
- Ask the patient how to correctly pronounce their name and ask what they prefer to be called.
- Shake hands and call them by name.
- Discuss something personal (unrelated to health matters).
C.A.R.E communication model (cont.)

Ask — Asking patients is effective:
- Elicit and prioritize patient’s concerns.
- Actively listen to the patient.
- Make eye contact.
- Avoid staring at a computer.
- Do not enter information while the patient speaks.
- Assess patient understanding of his/her own condition.

Key tips:
Avoid interruptions during patient interaction, such as:
- Taking phone calls or texts.
- Interrupting the patients while they are speaking.
- Allowing staff interruptions.
- Multitasking.
C.A.R.E communication model (cont.)

Respond:
- Respond with empathy.
- Invite patients to share more.
- Clarify your understanding.
- Don’t limit patients’ responses.
- Ask open-ended questions.
C.A.R.E communication model (cont.)

**Explain:**
- Use terms that the patient can understand.
- You may use medical terminology but then explain in plain language.
- Assess what the patient wants to know.
- Reach agreement on goals, treatment, and next steps.
- Confirm patient understanding.
- Explain medication and side effects.
- Provide information in writing.
- Invite a support partner to a future appointment.
Tools and techniques

- Don’t downplay the seriousness of a patient’s complaint. Let the patient tell you their side of the story without interruption.
- Acknowledge and apologize after you have heard the complaint. Whether you are right or wrong, the patient is seeking an apology. Offer it so the patient can move forward.
- Express empathy. Let patients know that you understand the problem and are concerned about their feelings.
- Establish a rapport with the patient. Patients need to hear that you are on their side and are willing to do whatever it takes to solve their problem.
- Do not go on the defensive. They are certain to lose the patient if you become confrontational.

Questions to ask yourself

- How can I best deal with patients who are upset?
- What can I say to upset patients to help them resolve their issues?
- What are the must-know customer service skills that I should work on building every day?
- How can I project a positive attitude so I can practice changing negative experiences into positive ones?
- How can I better understand the patient’s frustration and why they are lashing out?

Tools and techniques

- Take control of the situation. Once you have heard the patient’s side of the story, take the appropriate action to resolve the problem.
- Ask the patient what he or she wants and practice active listening. You may be surprised to find out that the patient’s solution to the problem is both fair and simple.
- Once the plan of action has been established, sell it. Explain to the patient how you plan to solve the problem.
- Follow through and follow up. Ensure that the plan has been carried out and the results are acceptable to the participant.
- Document the situation. It is always a good idea to write down the patient’s concerns and what the outcome was. These notes will be helpful if a similar problem arises.
Knowledge check

True or false?

Patients view customer service, access, timeliness, and coordination of care as highly important aspects of healthcare.
Care coordination

Healthcare customer service
Access to care
Timeliness of care
Coordination of care
Care coordination (cont.)

Access and timeliness

- Plan for urgent visits.
- Coordinate coverage with other healthcare providers.
- Set up an after-hours protocol.
- Educate the patient about the options, for example, 24-hour Nurse HelpLine.
- Ensure that patient messages/concerns are addressed promptly.

Electronic health record (EHR) systems can:

- Alert providers when a patient has a hospital visit
- Reduce medical errors and unnecessary tests.
- Reduce the chance of missing an unrelated (but relevant) condition.
- Lead to a better quality of care and improved patient outcomes.
Care coordination (cont.)

Establish high standards:
• Encourage customer service.
• Reward good performance.
• Listen to feedback.
• Know your patient population.
• Remove barriers.
Care coordination (cont.)

Before the patient leaves the office, discuss:

- Tests required
- Treatment
- Specialists
- Follow-up
- Test results
- Next steps
Care coordination (cont.)

- Patient participation in coordination of care is especially important in managing and treating chronic conditions such as asthma.

Some patients may not be comfortable using portals.
- Discuss past medical history.
- Ask about care received from other physicians/specialists.
- Request copies of any notes or reports
Knowledge check

True or false?

Better care coordination can lead to a better quality of care and improved patient outcomes.
Part three

Discussion

Resources
Discussion time

Q&A

How do you suggest handling patients who do not keep appointments?

How can you learn about other physicians that your patient is seeing?

What tips do you have for patients that are non-compliant with care?

What resources are available for providers to assist with patient experience?
What matters most

Improving the patient experience

https://www.mydiversepatients.com
- Understanding the patient experience
  - Additional opportunities
Resources

- National Committee for Quality Assurance (NCQA) — https://www.ncqa.org
- Agency for Healthcare Research and Quality (AHRQ) — https://www.ahrq.gov