2022 Fall member retreat

Treating referral as the first impression

Angela Pettigrew
Director, Provider Connect

Texas Children’s Hospital
About the speaker

Angie Pettigrew
Director, Provider Connect
Texas Children’s Hospital

• Angie Pettigrew currently serves as Director of the Provider Connect team at Texas Children’s Hospital. The Provider Connect team is focused on enhancing the referring provider experience for the 8,000+ external providers whose patients receive care at Texas Children’s each year.

• Her team supports centralized referral intake, a provider priority phone line, interoperability tools, process improvement related to referring providers, and provider outreach.

• She has been with Texas Children’s Hospital for 15 years, with the majority of her time at Texas Children’s dedicated to leading projects and process improvement initiatives.

• She is passionate about improving quality, access and customer service in pediatric healthcare, has a Masters in Healthcare Administration, and is a Certified Public Accountant who worked for PricewaterhouseCoopers before joining Texas Children’s.

Angie loves traveling and spending time with her husband, two teenage daughters, family and friends.
Learning objectives

1. Understand the role a referral plays in making the first patient impression

2. Identify process improvement tools that can be utilized to enhance the referral experience

3. Uncover strategies for optimizing the effectiveness of various referral process improvements
1. Intro to Texas Children’s Hospital and Provider Connect
2. Why focus on referrals and referring providers
3. Referral process redesign
4. Launch of the Provider Connect Team
5. Additional benefits and lessons learned
6. What’s next
Intro to Texas Children’s Hospital and Provider Connect
Texas Children’s Hospital

- Located in:
  - Houston, TX  
    (4th largest city in the country)
  - Texas Medical Center  
    (the largest “medical city” in the world)
- Ranked in top 10 for all US News and World Report specialties
- #1 for Cardiology and Heart Surgery
- #1 for Pulmonology
Texas Children’s FY21 overview

- 897 Beds
- 13,691 Employees
- 3,691 Nurses
- 4.1M Encounters
- 242,854 Patient days
- 34,777 Admissions
- 40,753 Surgeries
- 725,617 Clinic visits
FY21 incoming referrals from external providers

+102,000* Referrals

+30% of referred patients are new to TCH

The first impression has begun (for referring provider and patient/family)

*Specialties utilizing Central Transcription for referral intake
Provider Connect team

Launched in January 2019, the primary focus of the department is to: optimize the external and referring provider experience

Ensure:

- Outstanding service standards
- Up-to-date digital connection, including EpicCare Link
- Accurate external provider information (directory, patterns)
- Organizational focus and accountability
- Accurate, reliable processes

Integrate with and influence customer-focused business development activities (liaisons, business development specialists)

Provide:

- One contact number!
- First-time issue resolution, with connection to appropriate resource when needed
- Digital connection questions and training
- Support for referral liaisons
- Demographic updates for external providers
Why focus on referrals and referring providers
The Customer Experience . . . is the sum of all interactions a customer has with a company . . . .
everything from a customer’s initial awareness or discovery of a company, product or service, through
the purchase and use of that company's products or services. Together, these all add up to the critical
moments – or touchpoints - that create an . . . overall customer experience.
Why focus on referring providers?

- Major referral source
- Part of patient’s care team
- Must provide an excellent patient and referring provider experience to retain business

In FY19, external referring providers submitted 35% of pediatric subspecialty referrals

- External Providers: 35%
- Other TCH/TCHP Specialists*: 27%
- Texas Children's Pediatrics: 38%
Baseline referring provider feedback (pre-2019)

External Referring Providers

My referrals are always getting lost!

I do not trust that TCH is actually responding to the referral when I fax it as requested. I am always asked to submit it again.

I’ve submitted the referral multiple times, but every time my patient calls to schedule, they are told that no referral has been received.

This feedback was consistently voiced as the #1 complaint from referring provider partners.

Action was needed to:

- Implement accurate, reliable processes
- Retain referring provider business
- Regain referring provider trust
- Retain patient confidence
Factors influencing patient choice *(pre-2019)*

Reason for selecting a provider other than Texas Children’s

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was referred elsewhere by pediatrician/PCP</td>
<td>38%</td>
</tr>
<tr>
<td>Texas Children’s is far from home</td>
<td>25%</td>
</tr>
<tr>
<td>I received a recommendation elsewhere</td>
<td>25%</td>
</tr>
<tr>
<td>Texas Children’s has a long wait time to the first available appt</td>
<td>20%</td>
</tr>
<tr>
<td>My provider offers comprehensive care and resources</td>
<td>14%</td>
</tr>
<tr>
<td>My provider has record-sharing among multiple doctors</td>
<td>12%</td>
</tr>
<tr>
<td>Texas Children’s has longer in-office wait times</td>
<td>11%</td>
</tr>
<tr>
<td>Texas Children’s has high cost/lack of insurance coverage</td>
<td>9%</td>
</tr>
<tr>
<td>I received a recommendation elsewhere from an online source</td>
<td>9%</td>
</tr>
<tr>
<td>My provider offers specialization for rare or complex needs</td>
<td>7%</td>
</tr>
<tr>
<td>Texas Children’s has less personalized care</td>
<td>4%</td>
</tr>
<tr>
<td>Other</td>
<td>12%</td>
</tr>
</tbody>
</table>

Provider referrals continue to play a **powerful role** in patient choice.

In a 2018/2019 customer survey conducted by TCH Marketing, **being referred elsewhere** by their pediatrician/PCP was the **#1 reason for choosing a provider other than TCH**.
Referral process redesign
Referral process redesign

To enable and sustain reliable referral processes, we initiated projects to **standardize** and **streamline** the following referral components ...

1. Referral order
2. Referral webpages
3. Referral intake to EMR
4. Patient scheduling instructions
5. Automatic communications
1. Referral order redesign

<table>
<thead>
<tr>
<th>Baseline</th>
<th>Improvements</th>
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</table>
| ✗ Lengthy and cumbersome referral order criteria | Streamlined order questions  
- Moved to brief, focused, clinical reasons for consultation  
- Removed questions unrelated to patient care  
- Optimized use of cascading, radio button selections vs. free text fields |
| ✗ Many specialties lacked identifiable pathway for external providers to refer | ✓ Ensured each specialty had an internal Epic referral order and external-facing PDF or online form |
| ✗ Incongruent questions asked to internal vs. external referring providers | ✓ Modified so that internal and external referral order questions matched |

Providers should be able to complete and submit the referral in less than 1 minute

All providers (internal or external) should have a way to refer to the specialty

Same questions allow all referral orders to be entered into and worked from the EMR
Example: Online referral forms
Allow for standardized referral submittal process across specialties

Forms contain the questions needed to:

- Ensure correct **patient** is identified
- Ensure correct **referring provider** is identified
- Ensure **reason for consultation** and other order-specific questions **mimic** the selections within the **Epic** referral order
- Contain information needed for timely, accurate **triage and scheduling**
2. Referral webpage redesign

Baseline

- Difficult to locate each specialty’s referral pathway on TCH website
- Missing, inconsistent, or confusing referral instructions across specialties
- No referral form published

Improvements

- **Refer a patient** option located directly on homepage and linked on every specialty’s Services webpage
- Streamlined referring provider instructions across most specialties
- Online forms or PDFs published for most specialties
- **Need Help?** section published on each referral webpage
## 3. Referral intake to EMR

<table>
<thead>
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<th>Baseline</th>
<th>Improvements</th>
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</thead>
<tbody>
<tr>
<td>Inconsistent, delayed, or no transcription into EMR</td>
<td>✓ Implemented a centralized referral intake team</td>
</tr>
<tr>
<td></td>
<td>✓ Established service-level standards for referral entry</td>
</tr>
<tr>
<td>De-centralized teams frequently skipping creation/update of referring provider records</td>
<td>✓ Established processes to ensure accurate creation/update of referring provider records</td>
</tr>
<tr>
<td>Only the person that received the referral was aware of its existence</td>
<td>✓ Transcription into EMR allows visibility across the system</td>
</tr>
<tr>
<td></td>
<td>✓ Implemented routing rules &amp; referral workqueues; trained users to best practices</td>
</tr>
</tbody>
</table>

Centralized transcription creates **consistency and reliability** in intake and **eliminates “lost” referrals**

Ensures accurate referring provider is **listed** as the ordering provider in EMR

Aligned with Epic’s **best practice** recommendations
4. Creation of patient scheduling instructions

<table>
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<tr>
<td>× Patients were uncertain of the number to call to schedule an appointment and were also unaware of the locations at which they could schedule an appointment with their referred-to specialty</td>
<td>✓ <strong>Patient instruction</strong> documents created to include scheduling phone numbers and locations of care</td>
</tr>
</tbody>
</table>
| ✓ Patient Instructions made available to patients referred by both internal and external providers  
  – Automatically printed on AVS at time of referral (internal)  
  – Published in referring provider instructions on referral webpages (external) |

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**Baseline**

Patients were uncertain of the number to call to schedule an appointment and were also unaware of the locations at which they could schedule an appointment with their referred-to specialty.

**Improvements**

- **Patient instruction** documents created to include scheduling phone numbers and locations of care.
- Patient Instructions made available to patients referred by both internal and external providers:
  - Automatically printed on AVS at time of referral (internal).
  - Published in referring provider instructions on referral webpages (external).

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*Information is reviewed by operational leadership on a quarterly basis to maintain accuracy of scheduling phone numbers and locations.*
### 5. Implementation of automatic communications

<table>
<thead>
<tr>
<th>Baseline</th>
<th>Improvements</th>
</tr>
</thead>
<tbody>
<tr>
<td>❌ Referring providers never notified if referral was rejected or not scheduled</td>
<td>✓ Implemented automatic communication to be sent to referring provider when:</td>
</tr>
<tr>
<td></td>
<td>– Referral is rejected</td>
</tr>
<tr>
<td></td>
<td>– Scheduling status is changed to Unable to Contact, Patient Refusal, or Scheduled Outside of TCH</td>
</tr>
<tr>
<td>❌ Referring providers did not receive consistent communication regarding findings/results of their patient’s specialty visit</td>
<td>✓ At the close of the specialty visit, summaries are automatically sent to the PCP and referring provider associated with the patient’s visit (for most specialties)</td>
</tr>
</tbody>
</table>

The message **proactively communicates** the reason the referral is not being scheduled as requested.

“Close the loop”
Example: Impact of referral redesign

Recent implementation of Referral Process Redesign led to immediate increase in referral volumes from all referral sources.

**Background:**

- **Clinic:** Medicine specialty
- **Go-live:** March 15, 2022

Prior to referral redesign, specialty believed they were appropriately tracking incoming referral volumes from external providers and told us to expect “a handful per week” (less than 20 per month)
Launch of the Provider Connect team
Launched in January 2019, Provider Connect is dedicated to optimizing the referring provider experience.

**LEADERSHIP TEAM**
Drive strategic and operational enhancements focused on the referring provider experience and business development

**PHONE LINE**
Centralized number gives referring providers easy access to our resource team for first-time issue resolution

**CENTRAL TRANSCRIPTION**
Standardized referral process allows for consistent and trusted referral intake

**BUSINESS DEVELOPMENT**
Physician liaisons build relationships, promote services and provide valuable education and information to referring providers
Central Transcription: Reliable referral intake process

Central Transcription allows for:

- **1 intake team** regardless of referred-to specialty or location
- **Consistent, reliable, timely** referral entry into TCH EMR
- **Cross coverage** so that referrals are not missed/backlogged
- **Clinical teams to focus on direct patient care** instead of referral entry

**Patient Benefit:**
Regardless of which location or specialty the patient calls to schedule, the referral will be visible in the EMR
Referral intake synergy: Referral interface

Implementation of Central Transcription plus the creation of online referral forms allowed us to build a referral interface for automatic referral entry into Epic.

- Interface runs every 10 minutes
- Automatically looks for matching patient name, DOB, phone #
- Errors worked from error WQs
- Increased operational efficiency by >30%
Central Transcription: Referral volumes

Incoming referrals from external providers to TCH specialties continue to grow

- Support intake for 40+ subspecialty areas
- Comprehensive data to support business development focus
- March 2022: Exceeded 10,000 referrals transcribed
FY21 vs FY19 pediatric referrals by source

Referral source and patterns

<table>
<thead>
<tr>
<th>Source</th>
<th>FY19</th>
<th>FY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>External</td>
<td>70,603</td>
<td>86,865</td>
</tr>
<tr>
<td>TCP</td>
<td>77,558</td>
<td>84,922</td>
</tr>
<tr>
<td>Other TCH/TCHP</td>
<td>55,737</td>
<td>61,826</td>
</tr>
</tbody>
</table>

Total Referrals*  

FY19: 203,898  
FY21: 233,613  

15% Increase

*Population includes FY19 specialties utilizing Central Transcription for intake of referrals from external providers. If specialty/ref was added to Central Transcription portfolio in FY20 or FY21, it is not included in this analysis (with the exception of ACHD which was carved out from Cardiology.)
Provider Connect phone line: FY21 summary

Supports referring providers and their office staff

Quick Stats

<table>
<thead>
<tr>
<th>Inquiry volume</th>
<th>4,301</th>
<th>5,233</th>
<th>6,408</th>
<th>4,459 through 8PFY22</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19*</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>FY20</td>
<td></td>
<td></td>
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<tr>
<td>FY21</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>FY22**</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

88% of FY21 provider-driven inquiries were for . . .

Access to care

Questions and support regarding care needs such as the referral process or expedited appointments

Clinical advice

Seeking to speak to a specialist for clinical guidance

Technical support

Questions and support for EpicCare Link and Care Everywhere

FY21 inquiries breakdown

- Access to Care: 2,111
- Technical Support: 1,045
- Clinical Advice: 1,005
- General Information: 279
- Continuity of Care: 226
- Demographic Update: 36
- Feedback: 4
- Non-Provider Assistance: 1,702

Provider-driven inquiry

Inquiry initiated by non-provider/someone outside of provider office

*FY19 data begins January 2019 (Provider Connect Go-Live)
**FY22 inquiry volume through first 8 periods (Oct 21 – May 22)
Optimizing interoperability tools: EpicCare Link

**Snapshot**

EpicCare Link is a **web-based portal** that allows external providers and their staff the ability to **view** TCH medical records for shared patients.

**Utilization**

- **550+** active practices
- **900+** active providers
- **3,000+** patients accessed each month
- **5,000+** log-ins per month

**Tapestry**

- Preparing for the TCHP **Tapestry** go-live
- The **Tapestry Link** provider portal will merge with **EpicCare Link**, providing an **integrated experience** for providers
- Users will grow by ~**5,000**
Care Everywhere is an Epic functionality that allows EMR to EMR exchange of patient information with other Epic organizations and non-Epic organizations that participate in integrated networks, enhancing continuity of care.

- Utilization of Care Everywhere has grown significantly due to implementation of enhanced settings and enhanced information shared as required by the 21st Century Cures Act.
- Texas Children’s uses Care Everywhere to exchange referrals and medical records with Baylor College of Medicine’s adult services and Houston Methodist Primary Care Group.
- Actively working to expand CE functionality with Kelsey Seybold Clinics.
Business Development at a glance

Structure and focus:

• **Liaisons** covering pediatric services and the Heart Center transitioned to Provider Connect team in October 2020

• In FY2021, **assessed roles** and began **building data infrastructure** to support efficient, effective, data-driven business development activities

• In FY2022, launched improvements to align work with **best practices**
Business Development accomplishments and best practices

Data and infrastructure:

- New data-based territories & tiers
- Mapping providers to practices and systems to enable meaningful analysis
- Increase in assigned providers per liaison
- Monthly dashboards
- New market analysis tools
- Extensive Salesforce (CRM) cleanup
- More robust and meaningful CRM utilization
- Working on interactive business development analytical suite

Provider engagement:

- Monthly Virtual Education Series
- Launching regular e-newsletter
- Strategic conference presence*

*partnering with Marketing
Additional benefits and lessons learned
Additional benefits of referral redesign

- Implementation of referral work queues laid the technical foundation for clinics to begin using Epic’s referral triage functionality
- **Timely routing** of referral to appropriate scheduling team
- **MyChart Ticket** scheduling
- Referral **text** reminders
- **EpicCare Link alignment** – documentation of referral in Epic creates an automatic trigger for the patient to upload to the referring provider’s EpicCare Link patient list
- Consistent referral capture provides **meaningful data** for understanding provider referral patterns, market demand, and business development opportunities
Lessons learned

• When not tracked in EMR, operational areas *always underestimate* the number of referrals received.

• Operationally, frontline staff equate scanning a referral into media or immediately scheduling an appointment to be the same as transcribing the referral ... *Misunderstanding the value of fully transcribing the referral* degrades the effectiveness of the overall referral process.

• It is highly important to ensure the operational teams have full understanding of referral entry processes and the importance of *capturing/entering the referral in Epic* ... *even if referral does not result in scheduled appointment.*
Strategies for success

- Identify operational leadership that will strongly advocate for the proposed changes in their areas

- Hardwire referral process training into ongoing new-hire training materials

- Establish early organizational goals regarding:
  - Turnaround times for triage and scheduling
  - Conversion rate (% of referrals scheduled)
  - % increase in incoming referrals from external providers
What’s next
What’s next

Around here, however, we don’t look backwards for very long. We keep moving forward, opening up new doors and doing new things, because we’re curious…and curiosity keeps leading us down new paths.

- Walt Disney

• Keeping up with emerging technologies for referral exchange
• Partnering with referring providers to align with their preferences for referral submittal
• Integrating data into CRM for business development
• Continued and expanded operational focus on improving referral conversion rates
Thank you

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