

Optimizing Patient Portals for Revenue Growth

As the industry continues its transformation to shared risk and diminished reimbursement, healthcare organizations have a significant opportunity to manage these issues by growing portal generated revenue. By increasing portal-generated revenue, organizations can deliver care more efficiently and redirect staff and resources to higher-margin services. There are four primary ways to accomplish this:

1. Deliver a greater variety of services.
2. Enroll more members and improve patient experience.
3. Capture patient responsibility.
4. Align to current Promoting Interoperability (PI) measures.

Exploring opportunities to better leverage the patient portal to increase the efficiency of its business should be part of every organization's performance improvement journey.

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Grow Portal-Generated Revenue

Though [patient portals](#) are almost universally adopted, organizations still struggle to realize their business value. Organizations should focus on the following objectives to realize the financial opportunity of an optimized patient portal.

1. Deliver a greater variety of services.

Consider the following examples of diversifying services:

Virtual healthcare. Healthcare organizations are making big investments in telehealth and virtual care to address common ailments such as back pain, coughing and flu. In many cases, patient portals can be leveraged to further virtual healthcare services.

Benefit analysis shows virtual visits improve the patient care experience and the health of populations, along with reducing per capita healthcare costs. HealthPartners in Minnesota launched an online clinic called [Virtuwell](#) in late 2010, and, after more than 40,000 cases, they reported:

- An average lower cost of \$88 per episode compared with care received in traditional settings.
- Strong indicators of clinical effectiveness.
- 98% of customers rated "would recommend."
- Nearly 56,000 other cases with symptoms

beyond the scope of the virtual service were referred to appropriate in-person providers.

Virtual video visits bring together patients and providers in face-to-face communications through the portal. A [new Epic MyChart partnership](#) with the American Well Telehealth Patient app is making virtual care a standard part of clinical care, providing video visits directly from the patient portal.

Opportunities exist in increased follow-up visits and improved patient compliance. Capturing revenue for visits that may not have otherwise taken place, as well as capturing specialty cases that may have been referred out of network, presents a compelling case for generating growth through virtual healthcare.

Health and dietary coaching. This is a significant opportunity to connect with patients in their everyday lives and to promote healthier lifestyles using the portal. Mobile technology has opened the door for people to improve their health and fitness in an accessible, convenient way. There are numerous apps that offer subscription-based coaching that pairs users with registered dietitians or other healthcare professionals to achieve goals for weight loss, nutrition and management of chronic conditions such as diabetes. Through portals, healthcare organizations have the ability to leverage their expertise to offer similar coaching at comparable or higher subscription rates. As organizations embrace value-based care models, using portals to provide health coaching services is one more way to manage the overall health of their patient populations.

2. Enroll more members and improve patient experience.

As the [ambulatory market grows](#), pressure is mounting to enhance the effectiveness and accessibility of ambulatory systems, including both primary care and specialty care. Patients today are savvy consumers with an increasingly wide choice of ambulatory providers.

Most organizations are [using patient portals](#) to provide patients with access to medical records, online bill pay and requests related to medical records,

according to the Office of the National Coordinator for Health IT (ONC). Organizations can also leverage the portal for [medical supplies and prescription ordering](#). While some revenue potential exists from direct-to-consumer distribution, the real value is in improved clinical outcomes and continual touch points with patients across the continuum of care.

Patient portals are an extension of the hospital stay or office visit. To address these trends, organizations must create a seamless patient access experience. A patient's experience does not start when they arrive on their date of service. Every encounter counts — from scheduling a patient for treatment to the ease with which they enroll in the portal.

There are three questions to ask when evaluating member enrollment:

How do prospective patients find the organization's portal? Organizations must first think about how they market their portals. Patients cannot sign up for a portal when they do not know it exists, or if information about the portal is difficult to find. Second, ease of enrollment is important to ensure that once patients learn about the portal they can sign up through a mobile device or streamlined enrollment on the homepage of your portal.

How well does the portal manage referrals? Referrals can come through providers or other patients. For example, when a doctor submits a referral and directs the patient to the portal, the patient can enroll and use the portal to schedule an appointment with a specialty provider and complete a questionnaire ahead of the visit.

How can the organization deliver low-cost, high-value care more effectively? By offering services like virtual visits, video visits and health coaching through the portal, organizations can deliver care more effectively in the population health and at-risk reimbursement environment.

3. Capture patient responsibility.

An optimized patient portal will reduce both the cost per collection and the number of billing statements

while increasing total collections. As the percentage of enrollees in health plans with large deductibles continues to grow, healthcare systems will face more challenges in collecting patient financial responsibility. More than 30% of workers are enrolled in [high-deductible health plans](#), a number that has steadily increased over the past five years, according to the Kaiser Family Foundation 2019 Employer Health Benefits Survey.

Additionally, out-of-pocket self-pay items like deductibles can take more than four times as long to collect when compared with copayments. Often, deductibles and other self-pay collections ultimately get written off as bad debt.

Because of this, it is essential for an organization's self-pay strategy to enable patient payments online. From the patient portal, patients should be able to view outstanding balances, pay bills and send customer service representatives any questions that may arise.

4. Align to current Promoting Interoperability (PI) measures.

In 2018, the Centers for Medicare & Medicaid Services (CMS) made [sweeping changes to the Meaningful Use \(MU\) program measures](#), the program's scoring method and the requirements to avoid future penalties to Medicare claims. The program is now called Promoting Interoperability (PI), and the announced changes cover participation in 2019 and 2020. PI contains four objectives composed of six or more measures that impact the final PI category score. Today, hospitals and ambulatory clinics face the challenge of enabling the newest functionalities of their certified electronic health record technology (CEHRT), such as application program interfaces (API) and bidirectional immunization interfaces.

The single measure worth the most points in the PI program is called "Provider to Patient Exchange," which requires participants to enable specified APIs within their CEHRT. Once active, these APIs allow third-party software developers to create applications that can be used by authorized patients to access their information within hospital and ambulatory CEHRTs.

To meet these PI program measures, organizations will need to implement robust features within the portal and also market their patient portals aggressively. Features like streamlined enrollment will give patients the ability to enroll in the portal at their convenience and reduce enrollment lag time. Offering a complete feature set, including messaging, questionnaires and billing, encourages patients to make frequent use of the patient portal. Allowing patients to take an active role within their portal, such as by entering biometric readings tracked at home, contributes to the collection of data from nonclinical settings.

Increased Required Security Measures

As organizations grow their portal functionality, they should be aware of increased security requirements. In addition to changes to the scoring and weighting of measures under PI, CMS made a significant change to the Security Risk Analysis (SRA). Under the changes, the SRA is no longer a "measure" that impacts providers' and hospitals' PI score. However, the SRA is still a requirement. Eligible providers and hospitals are required to conduct or review a security risk analysis per the HIPAA regulations, including ensuring that the appropriate use of encryption is implemented within the CEHRT. The guidance attached to the new PI requirements states that an SRA must be conducted or reviewed annually. The guidance also suggests that a full risk analysis must be conducted upon installation or upgrade to a new system. Lastly, the [scope of the SRA](#) must include all electronic protected health information (ePHI) that an organization creates, receives, maintains or transmits, which means organizations will have to think about security beyond the ePHI contained within the CEHRT.

Next steps to success

Huron has established a framework for making business- and patient-driven decisions when optimizing the patient portal to grow revenue. After considering the suggestions above, the next step is to quantify opportunities by asking additional questions.

What metrics matter?

When developing reporting and analytics tools to drive optimization, start with commonly reported metrics and explore them a level further to uncover your best opportunities. Consider the example of virtual visits. Organizations may already run reports showing how much revenue is earned from telehealth or virtual visits, but are those virtual encounters replacing in-person visits, or are they ones that may not have otherwise occurred? Are the virtual visits with established patients, or are they with new patients?

In competitive markets, bringing more patients into the organization is paramount to a healthy bottom line. If patient acquisition is important, consider exploring how e-visit services can help. By reporting on virtual visits completed by patients with no prior encounters at an organization, leaders can discover how e-visits may help drive patient acquisition.

What smaller subset of the challenges can be solved through the portal to build momentum?

Look for a particular area or challenge that can be addressed quickly and easily. For example, is your staff spending a significant amount of time communicating via phone? Examining the reason for visits specified in each telephone encounter can help determine which common symptoms could be offered via virtual care. Leveraging the patient portal for virtual visits to address these prevalent symptoms is an effective way to familiarize patients with new functionality and is an opportunity to simplify time-consuming tasks.

In the past six months, what is the smallest change that has had the biggest positive result?

What was it about that small change that produced the largest return? Consider surveying patients to uncover what they like and dislike about the organization's online offering. Ask the following question: "Based on your online experience, how likely are you to recommend our organization to a friend or

family member?" Then, "What are some of the reasons for that score?" Compare recent changes with the corresponding effect these changes had on feedback.

Notice that the last two questions focus on small, incremental changes to create significant results. This principle, known as the Pareto principle, or the 80/20 rule, is the best technique for ensuring you are maximizing return on investment from your patient portal while limiting time and resources invested.

Key Takeaways

As organizations seek to modernize their business operations for the future of healthcare, maximizing the potential of patient portals can yield benefits for both providers and patients. To increase portal-generated revenue, organizations should:

Think differently.

Consider how the portal can be leveraged to deliver services more efficiently and support the delivery of higher-margin services.

Plan differently.

Invest in technology that enables virtual visits, video visits and health coaching through the portal as a means of delivering more efficient and effective care. Keep current PI measures at the forefront of portal functionality.

Act differently.

Use data and patient surveys to determine opportunities for improvement in the patient portal; often small changes can have a big impact.



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