

The Effects of Patient Appointment “No-Shows” on Health Care Facilities



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Learning Objective



- Define what is a patient no-show
- Reasons for patient no-shows
- Describe the impact of patient no-shows
- Discuss healthcare administrative no-show interventions



Background



- According to a study by Wallace et al. (2005) about 3.6 million people in the U.S. miss or delay medical care each year.
- No-shows cost practices nearly \$385,000 in lost revenue each year (Huang et al., 2017)
- The average patient no-show rates in the United States varies between 18%-25% (Kheirkhan et al., 2016).
- Two South Africa patient no-show study found even higher rates – 35-40% (Frost et al., 2017; Ngwenya et al., 2014)
- According to Berg et al. (2013), if a clinic had 18% no-show rate, the corresponding loss of annual revenue can be 16.4%
- Double/triple booking – schedule backups
- Providers & Staff - overtime
- Patient Satisfaction – poor due to waiting times
- No-show rates above 25% - destabilizing to patient care

(Berg et al., 2013); (Davies et al., 2016); (Frost, Jenkins, & Emmink, 2017); (Huang, Ashraf, Gordish-Dressman, & Mudd, 2017); (Kheirkhan et al., 2016); (Ngwenya, Van Zyl, & Web, 2014); (Wallance, Hughes, Mull, & Khasnabis, 2005)

Question?



How would you define “Patient No-show” in the health care industry?



No-Show Patients



“Patient No-show” is a patient who did not arrive for their appointment and did not cancel or reschedule their appointment within 24 hours of the original appointment date and time.



(Kheirkhan et al., 2016)

Interesting Fact



According to Popple (2013), only 63% of healthcare administrators' track missed appointments, while just 46% implemented appointment cancellation and no-show policies.



(Popple, 2013)

Appointment Cancellation Policy



- Designing an acceptable clinic cancellation policy and mastering appointment scheduling is essential to reduce the risk from the healthcare administrator's perspective (Popple, 2013).
- A patient no-show policy is the first step in developing an intervention strategy to combat patient no-shows (Norris et al., 2014).

Appointment Cancellation Policy



- Clinical effectiveness, revenue stream, and operational efficiency are areas that are distressed by last minute cancellations and no-shows.
- Last minute cancellations prevent the facilities from scheduling other patients into those available appointment slots, thus decreasing the facility's effectiveness and overall revenue (Mendel & Chow, 2017).

Appointment Cancellation Policy



- An effective cancellation policy can reduce the negative impact of patient no-show.
- There are few studies exploring the effectiveness of negative reinforcement such as no-show fees to counter no-show behavior.

Appointment Cancellation Policy



- Merkel-Walsh (2013) suggested that organizations should set patient attendance and adherence standards, which should be introduced to the patients when scheduling the initial appointments in order to change future patient behavior.
- As a final recourse for repeatedly violating appointment attendance expectations, Merkel-Walsh recommended that the patients should be terminated, or fired, from the practice for not complying with the appointment cancellation policy.
- However, practices must follow the law and seek guidance from the state's medical board when terminating the physician-patient relationship to avoid patient abandonment claims.

(Merkel-Walsh, 2013)

Appendix A: Clinic Cancellation Policy

No-shows and cancellations with less than two weekdays' notice are a significant problem for our small practice. Many practices overbook on purpose so that no-shows and cancellations would not limit access for other patients as well as cause a financial hardship for the practice.

When it comes to no-shows and cancellations, we have three choices:

1. A strict policy; or
2. Overbooking (leading to long wait times at our office); or
3. Charging for no-shows

We feel the strict policy is the best fit for our practice and we are proud of our ability to run on time.

Administrative Office

Schedule an appointment by calling XXX-XXX-XXXX. Administrative staff may only schedule routine well and follow-up exams; all acute needs must be evaluated by licensed medical personnel.

No Walk In's. [YOUR PRACTICE] is open by appointment only and cannot accommodate walk-in patients.

Schedule same-day appointments for ill visits. When one of our providers speaks with patients, it is determined through triage how soon a patient needs to be seen. Our policy is to see patients with urgent-care needs the same day they call, provided they call at least 2 hours before we close.

Patients who arrive on time are seen at their appointment time. Patients who have

arrived on time will be seen ahead of those who arrive late. If you arrive late, we may need to abbreviate or reschedule your appointment.

Call ahead if you are late or unable to make your appointment time. We will do all that we can to accommodate your late arrival and try to minimize the need to reschedule your appointment.

Appointments for additional children should be made by phone prior to coming to the office. If you would like another child to be seen, please schedule appointments for both children by phone at least 2 hours prior to coming to the office.

Turn off cell phones in the office and examination rooms.

[YOUR PRACTICE] will dismiss patients for violating this policy. Violations include:

1. Not showing for scheduled appointments (more than three annual no-shows)
2. Cancelling appointments with less than two weekdays' notice (excluding holidays) count as a no-show
3. Walking in without an appointment

What is the affects of patient no-shows?



- Reduce health care access to all patients
- Decrease quality of health care
- Add stress and workload to medical staff and providers
- Reduce healthcare facility productivity and efficiency
- Reduce healthcare facility revenue and profitability
- Increase health care cost

THE COST OF PATIENT NO-SHOWS

- No-shows and same day cancellations have a big bottom line impact:
 - Both leave you no time to fill a last-minute open appointment slot.
 - Most of your expenses are fixed and do not vary whether you see one patient or 30 patients in a day.
 - A missed appointment means your fixed costs (staffing, rent, etc.) are spread across fewer visits, thereby increasing your average cost per service.
 - If you get \$100/visit on average and have two no-shows/day, your bottom line could decrease by \$50,000 every year.

Reasons for No-Shows



- Forget appointment
- Miscommunication
- Transportation
- Financial issues
- Illness or change in health status
- Difficulty contacting the call center or clinic
- Do not want to miss work
- Childcare issues
- Insurance
- Invasive treatment
- Admitted to the hospital (*I found this one in our own facility*)

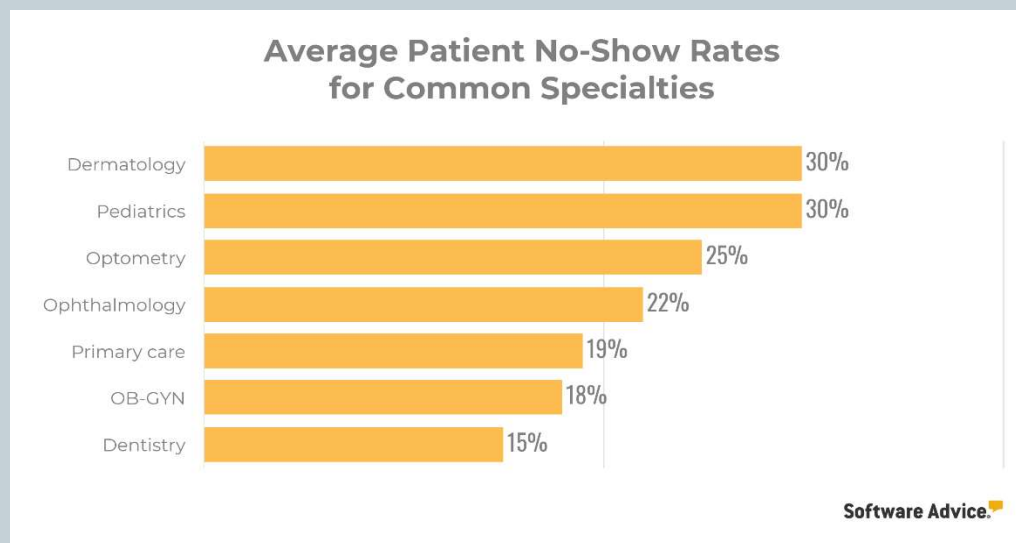


(Bhise et al, 2016; Kaplan-Lewis & Percac-Lima, 2013)

Demographics and Patient No-shows



- Elders
- Minority
- Medicaid Patients (*Government Insurance*)
 - Income & Insurance
 - Distance to travel



(Percac-Lima et al., 2015)

Financial Impact of Patient No-Shows

Southern Louisiana Cardiology Practice

Physicians 35 – Staff 450 – 20,000 patients/month - Location 13

Patient No-Show Rate 12%

- Losing \$500,000/month
- Implementation & integration - advance patient communication
- Reduce the Patient No-show Rate by 25% (from 12 % to 9%)
- Increased the monthly revenue by \$147,688
- Provide access to 300 additional patients/month
- Return on Investment (ROI) 4.00%



(Stericycle Communication Solution, 2015)

Intervention Strategies



As healthcare administrator name three strategies you might employ to reduce your patient no-show rates?



Reduce No-shows and Cancellations



- Appointment Reminders – phone, text, e-mail (*could cut no-show 50%*)
- Charge an admin fee for no-shows & late cancellations (*less than 24-hours*)
- Waiting List



Administrative Intervention Strategies

- Implementing and posting a cancellation policy
<http://www.alabasterpediatrics.com/docs/Policies.pdf>
- Educating patients on the effects of no-shows
- Use codes to identify high risk patients
- Appointment scheduling
 - Overbooking
 - Open-ended Access
 - Patient preferences
 - Day and time of the Week
 - Bailey-Welch Scheduling Method
 - Walk-in Patients
- Appointment Reminders
 - Live Clinic Staff Appointment Reminder Calls
 - Automated Appointment Reminder Call Systems
 - Text messaging
 - Email reminders
- Providers' Contribution to patient no-shows
- Patient no-show administrative charges



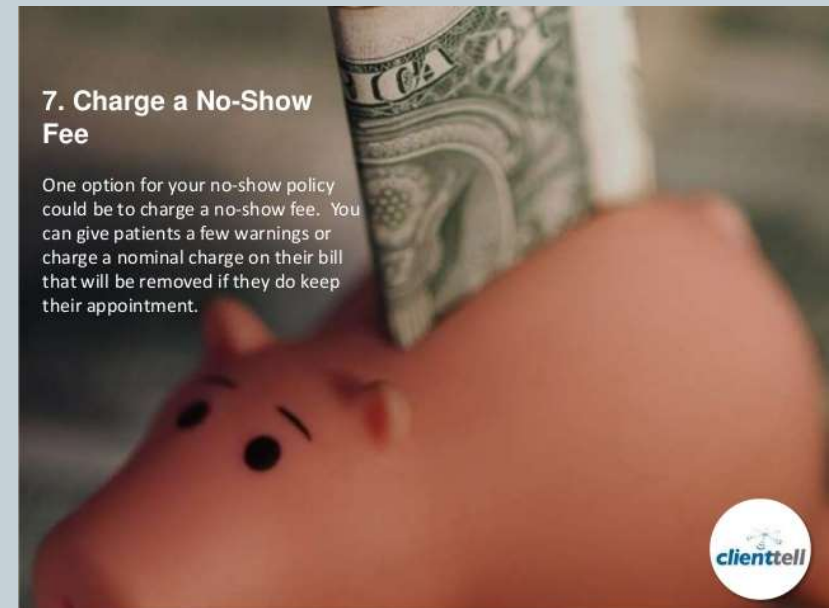
(Welch & Bailey, 1952)

Patient No-Show Fee



Should we charge for patient no-shows?

- Yes or No
- Sign Financial Agreement
 - Stipulate the charge
 - Time to cancel
 - Make sure they sign the agreement
 - Warning call for first offence



Unfortunately, a Medical Facility is also a business

Not within Healthcare Administrative Control



- Insurance
- Transport
- Work
- Childcare
- Invasive treatment

Use: Health Belief Model



Premise of the Health Belief Model

- Individuals will take action to ward off, to screen for, or to control an ill health condition if:
 - 1) they regard themselves as susceptible to the condition
 - 2) they believe it to have potentially serious consequences
 - 3) they believe a course of action can reduce the susceptibility and seriousness
 - 4) they believe the costs of the action are outweighed by its benefits

Can Uber help with patient no-shows?



- Among the top reasons for skipping appointment are ride did not show up, missed the bus or taxi service
- Fixing the ride problem can reduce the no-show rates by 20–25% (and more for the target demographic). Insurance companies are starting to work with hospitals to fund these rides for patients for this very reason but there are no viable alternatives available (other than hospital shuttles which are inefficiently operated). Uber can offer a solution which is seamless in customer service, costs much less and works for both patients and insurance companies.



Goal



- Reduce Patient No-show rates
- Lowering Patient No-show rates will:
 - Smoother health care access to all patients
 - Improve quality of health care with better health outcome
 - Reduce stress and workload for medical staff and providers
 - Improve healthcare facility productivity and efficiency
 - Improve healthcare facility revenue and profitability
 - Reduce health care cost
- Improve Patient Satisfaction and Quality of Care!

Questions?



Thank you



References



- Berg, B., Murr, M., Chermak, D., Woodall, J., Pignone, M., Sandler, R. S., & Denton, B. (2013). Estimating the cost of no-shows and evaluating the effects of mitigation strategies. *Medical Decisions Making*, 33, 976-985. doi:10.1177/0272989X13478194
- Davies, M. L., Goffman, R. M., May, J. H., Monte, R. J., Rodriguez, K. L., Tjader, Y. C., & Vargas, D. L. (2016). Large-scale no-show patterns and distributions for clinic operational research. *Healthcare*, 4(1), 15. doi:10.3390/healthcare4010015
- Huang, Y., & Hanauer, D. A. (2014). Patient no-show predictive model development Using multiple data sources for an effective overbooking approach. *Applied Clinical Informatics*, 5, 836-860. doi:10.4338/ACI-2014-04-RA-0026
- Frost, L., Jenkins, L. S., & Emmink, B. (2017). Improving access to health care in a rural regional hospital in South Africa: Why do patients miss their appointments?. *African Journal of Primary Health Care & Family Medicine*, 9(1), e1–e5. doi:10.4102/phcfm.v9i1.1255

References



- Memento Medical. (2013). Go to clinic. Retrieved from <http://gotoclinic.com/casestudies>
- Merkel-Walsh, R. (2013). No more no-shows. *ASHA Leader*, 18(9), 32-33. Retrieved from <http://www.asha.org/publications/leader/>
- Ngwenya, B. T., van Zyl, D. G., & Webb, E. M, (2009). Factors influencing non-attendance of clinic appointments in diabetic patients at a Gauteng hospital in 2007/2008. *Journal of Endocrinology, Metabolism and Diabetes of South Africa*, 14(2), 106-110. doi:10.1080/22201009.2009.10872
- Percac-Lima, S., Cronin, P. R., Ryan, D. P., Chabner, B. A., Daly, E. A., & Kimball, A. B. (2015). Patient navigation based on predictive modeling decreases no-show rates in cancer care. *Cancer*, 121, 1662-1670. doi:10.1002/cncr.29236

References



- Popple, A. (2013). Opening Pandora's box: Are no-show fees the solution to missed appointments? *MGMA Connexion*, Medical Group Management Association, 13(1), 48-50. Retrieve from <http://mgma.com/store/magazines>
- Stericycle Communication Solution. (2015). PatientPrompt reduces no-shows and improves revenue recovery the cardiovascular institute of the South. Retrieved from <http://patientprompt.com>
- Wallace, R., Hughes-Cromwick, P., Mull, H., & Khasnabis, S. (2005). Access to health care and nonemergency medical transportation: two missing links. *Transportation Research Record: Journal of the Transportation Research Board*, (1924), 76-84.