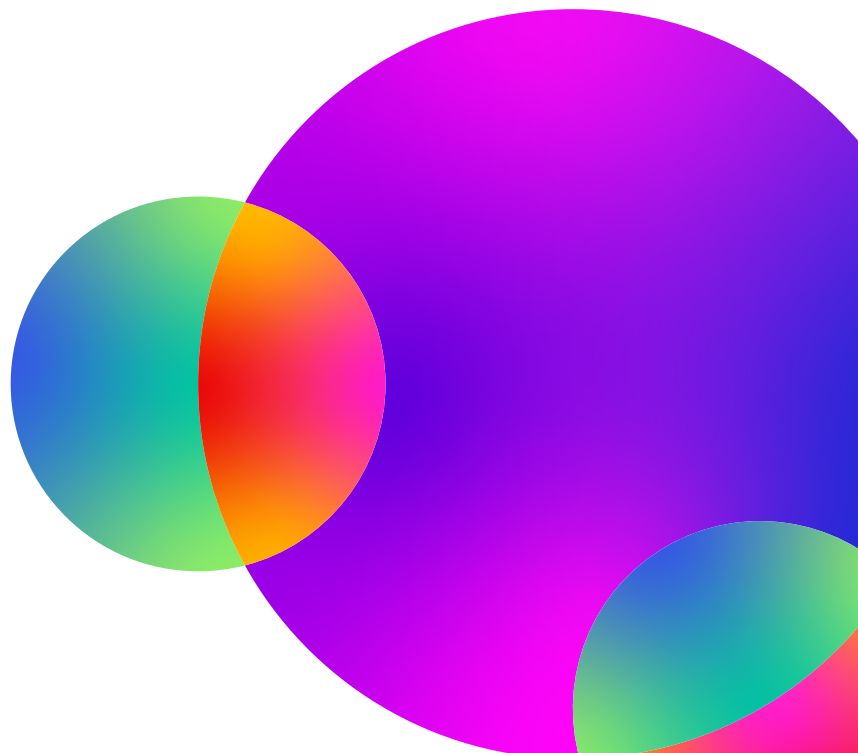# Beyond the Digital Front Door:

The Digital House

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Health Systems Should Operate a Digital House...
Not Just a Digital Front Door

This paper asserts that a digital front door is only as good as the framework to which it's attached: the digital house. We describe how to present health system products, services and inventory utilizing a digital house's architecture. We explain the key infrastructure needed to offer your patients a best-in-class consumer experience, and the steps to build and manage a digital house.

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Introduction

There has been much interest and discussion related to health systems' building a 'digital front door.' Digital marketing leaders, spurred to action, have in many cases dutifully set out to build one. The results have been mixed, at best.

What's a digital front door? The term[1] refers to digital interactions that facilitate a patient's finding and booking an appointment with a provider. The reason to have an effective digital front door is to embrace consumerism through offering self-services capabilities, while lowering call center cost burdens and better matching supply with demand.

Healthcare consumers are increasingly demanding product search and ordering experiences similar to how Domino's offers fast, convenient ordering of a pizza. The promise, stakes, and rewards of a better digital experience are high. Provider organizations are playing catch-up. The vision is to capture patients and keep them in-network by simple but sophisticated electronic intimacy. As a result, a healthcare digital gold rush is well underway.

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Digital Front Door: A Weak Foundation on Which to Build

However well intentioned, the term 'digital front door' is a great misnomer. It implies that improving the patient journey requires but a simple website refresh...with lightweight search and a phone number thrown in. Just replace the door, paint the porch ...and voila! A new patient experience! Problem solved!

Why is it a misnomer? Because the heart of a consumer's digital experience should be to offer easy access to a health systems' products, services, and inventory. And a data platform is needed to enable these offerings — to support effective provider search and scheduling means far more than a prettier website. Thought leaders – and early-adopter health systems, some regrouping after initial attempts – have recognized this.

A recent SHSMD-sponsored presentation[2] highlighted these six essential elements[3] of a digital front door strategy: 1) Provider profiles, 2) Location directories, 3) Patient portals, 4) Social media, 5) Third party listings, and 6) Online appointment scheduling.

6 Essentials to the Digital Front Door Strategy

From a Study sponsored by SHSMD

1. Provider profiles
2. Location directories
3. Patient portals
4. Social media
5. Third party listings
6. Online appointment scheduling

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One Health System's Experience

A Top 25 health system learned first-hand the fundamental difference between a website-focused ("digital front door") and a provider data platform-focused ("digital house") strategy. This health system had begun work with a vendor that advertised a patient access and website tools- focused approach. After a year, leadership realized the project had no chance of success and abandoned this approach (and the vendor).

The health system identified several core shortfalls in its initial approach:
- Provider profiles didn't represent the health system's products, services, and inventory
- Provider search was missing places and services (such as telemedicine)
- The provider profiles were limited in scope. There was no health plan / location / clinical network / ACO roster management capability
- Schedule inventory was days old. No real-time scheduling in the EHR was available
- Limited data management tools
  - No client data curation – the vendor had to make changes or adds to profile
  - No customization to taxonomy was available
  - Taxonomy was not organized by subspecialty
  - There were no tools to map clinical and patient-friendly terms to providers
- Vendor, not health system-hosted, solution
  - The website was white-labeled and hosted by the vendor, not the health system, which reduced domain authority,[4] a key digital measure

Senior leadership subsequently switched strategies – realizing that a provider data platform-based approach was foundational to project success. They selected a new partner with expertise in creating a data hub supported by client curation methods. The platform's provider and location profile capability, taxonomy, health plan and ACO/CIN participation management, and 'schedule-aware' capability, supported leadership's vision. By expanding their objective from building a new digital front door to constructing a digital house, they now set off confidently in the right direction, built on the right data foundation.

The project began in Q4 2018 and went live 5 months later. Now, providers displayed via searches offer real-time appointments booking in the EHR. The health system's website is now considered best-in-class, in part because of the flexibility and depth of the underlying provider data platform.

The results post launch? Online scheduling now represents 6% of all appointments made…and growing. Over 150,000 phone calls are diverted quarterly via self-scheduling, generating $6 million annually in recurring savings. The health system's website's domain authority score has soared from under 50 to well over 60…and continues to climb.

> "Any effort that doesn't include a provider data management platform as the foundation of a digital front door strategy will fail. The patient journey will suffer…"

The Floor Plan for a Digital House

Keeping the SHSMD requirements in mind, let's describe the layout of systems in a health system's digital house. The website of course would be the front door, patient portals would be a convenient second side entrance, the patient access / call center system would be a front porch, the registration/scheduling system the front hall. The electronic health record (EHR) system, underpinning all clinical care, is the basement. The revenue cycle system would be the living room. Upstairs, the bedrooms contain reputation management software, and tools to improve SEO and listings management – both critical items for influencing patients' provider selection decisions.

Other systems are also critical for the patient search and scheduling experience. The credentialing system – an inbound feed to provider directories – would be housed in a home office. Managed care teams, which today rely on spreadsheets to maintain clinical network and ACO rosters, would be in a study off the living room.

Where should provider profiles and location directories, the final two requirements highlighted above, be placed in the digital house?

Because these requirements are intertwined – providers work at locations, and locations contain multiple providers (and their clinical terms, and health plans and networks) – and this data supports all the rooms in the house, the case can be made that provider data management is an essential part of the house's framework.
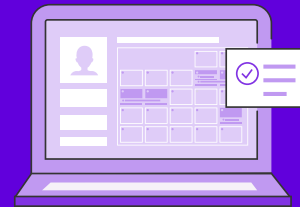
Results of Building a Digital House
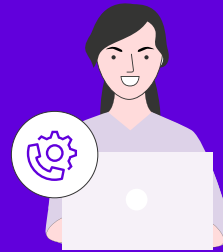
Top 25 Health System in the US

6%
↑
0%

6% of all appointments now booked by patients online (from 0% last year) ...and trending towards 20%

150k
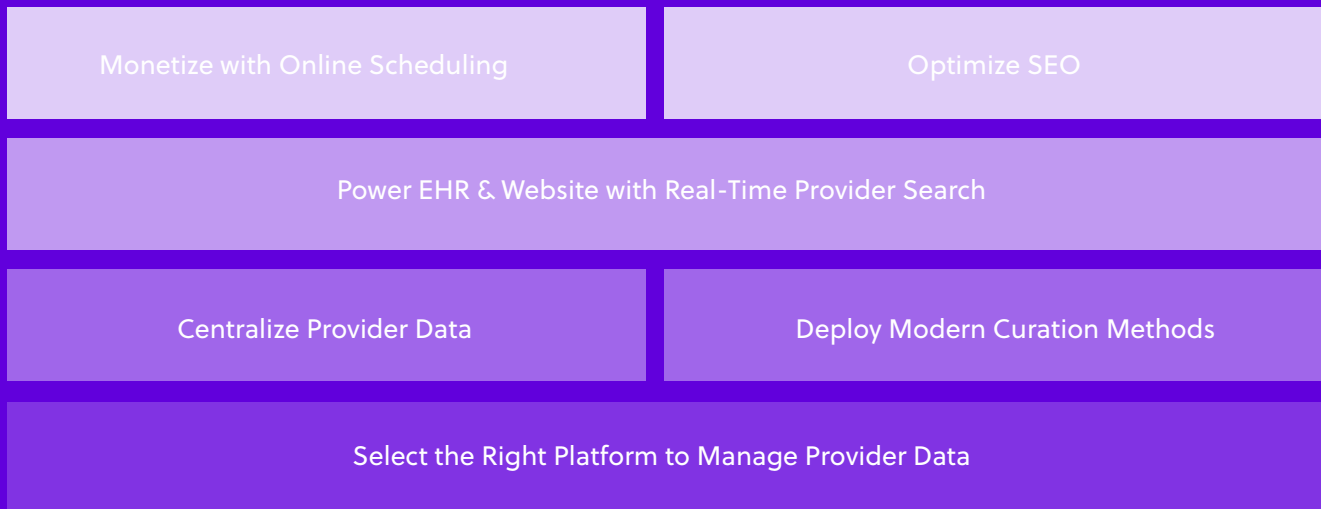150,000 calls diverted from call center each quarter

$6M
$6,000,000 in annual call center savings

$25M
$25,000,000 a year in new ACO business

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Foundations of the Digital House

Monetize with Online Scheduling	Optimize SEO

Power EHR & Website with Real-Time Provider Search

Centralize Provider Data	Deploy Modern Curation Methods

Select the Right Platform to Manage Provider Data

Provider data is the studs, walls, insulation, heating, water, electricity, plumbing. Without a sturdy framework, the house can't stand...it will fall over time. The provider data platform should be the house's central hub supporting location directory and location data management. The location data can be readily reported out and fed regularly into Google or Binary Fountain or Yext to improve local SEO score.

This realization — that detailed management of provider assets is foundational to the consumer experience — is exactly the a-ha moment that the health system leaders described above experienced. Fortunately, they were able to buttress the house with a provider data platform that turned their provider search into an asset, which in turn made consumers more satisfied, drove up on-line appointments, and reduced call volumes.

Unless a provider data platform is included as the foundational element of the digital house, mismatches will occur when consumers' search for the right provider based on medical condition, health plan, proximity, scheduling availability, and ratings. Patients with a sore shoulder will unwittingly book a knee specialist. Parents will book their 5-year-old with an internist, not a pediatrician. Consumers will find out that Dr. Smith no longer takes their health plan or is out of network – only after they've arrived for an appointment.

The key takeaway? The quality of the consumer experience is only as good as the quality of provider data.

All else is secondary.

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Building the Digital House

Now that we've identified the house's blueprint, how does a health system go about building a digital house? We suggest a six-step process:

1. Select the right platform to manage provider data. A provider-centric platform should have deep and well-defined provider and location profiles, each cross-indexed with health plans and networks in which they participate and provider-specific clinical taxonomy. Building a provider data model from scratch is not something we recommend. The platform should offer an intuitive Google-like provider search, once loaded, that can be embedded in your consumer-facing website ('digital front door'), EHRs, patient access systems, and reg/schedworkflow. That's a good start.

Experience has shown that master data management (MDM) systems are not effective at managing and serving up provider data for provider search. They lack a provider data model, have no curation tools (see below), and don't offer a real-time search API. They also lack – and their design actively discourages – the crowd-sourcing of data curation across a health system.. an essential capability to ensure high provider data integrity.

> "The quality of the consumer experience is only as good as the quality of provider data. All else is secondary."

2. Centralize Provider Data in One Platform. Load the platform with provider data sources to create your data instance. This one-time data consolidation may require 20 to 40 sources, from EHR extracts to spreadsheets to credentialed provider files to content management files. Don't be discouraged – once done and centralized, life will be better. Your provider data platform partner should have the skills to be your guide during this consolidation. This hub must be integrated directly with credentialing and the EHR to centralize your provider information into one platform.

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3. Deploy Modern Curation Methods.
The platform must offer modern crowd-sourcing of profile curation, so profiles can be continuously curated by hundreds of users across your health system. Well-defined data governance tools determine which classes of user have read or read/write access to specific data fields. Changes made in a profile – or inbound data feeds from another system – should be configured so they can be sent, if desired, to a worklist for further review before being accepted by the data platform.

4. Power Your EHR and Website with Real-Time Search. Have your digital team or a digital agency integrate the platform's provider search capability on your Find a Doctor page. It should support free-text, Google-like provider search, so consumers can type in complaint, health plan, location, and/or availability. The website should be hosted directly by the organization, not via a 3rd party, to ensure higher domain authority.[5] The search tool should allow digital marketers to weigh key factors - health plan, proximity, primary care versus specialty - as they require.

5. Monetize Your Inventory by Adding On-line Scheduling. The platform should have "schedule aware" tools which facilitate the display of next-available appointments in the EHR. Offering provider search and self-scheduling will drive up the percentage of appointments booked online, increase provider utilization and reduce call center workload.

6. Optimize SEO Performance. Over 80 percent of patients[6] conduct a health-related search before booking an appointment with a new provider. The better your local SEO ranking, the more likely you'll capture those searches. Share your location and provider data regularly with Google, Yext, Moz, and others. Drive up SEO performance and domain authority, which is positively correlated with utilization and revenue.

With this digital house blueprint, and following these 6 steps, all care delivery assets in the house, including providers, are now readily searchable. And provider search – and provider directories – are now ubiquitously available in the house, optimizing all systems, fed with continuously-curated provider data.

Key Points

- A digital front door alone does not meet the demands of today's consumer.

- A simple website refresh and lightweight search do not move the needle in providing value.

- The quality of the consumer experience is only as good as the quality of provider data. A robust provider data platform has both strong top-line and cost-saving impact.

- Select. Centralize. Curate. Power. Monetize. Optimize. It all begins with the right provider platform.

- A robust provider data platform will help you market your health system's products and services in an optimal way.

Conclusion

Take these strong steps above – starting with a provider platform as the foundation – to market your health system's products and services in an optimal way. Your organization will be well on its way to establishing a strong digital presence in your marketplace.

Sources and Resources
1 https://www.cio.com/article/3411919/digital-front-doors-the-new-battleground-for-the-healthcare-consumers-attention.html
2 https://www.shsmd.org/
3 https://www.shsmd.org/sites/default/files/shsmd/defining-the-new-digital-front-door.pdf
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5 https://moz.com/learn/seo/domain-authority
6 https://www.doctor.com/cxtrends2018

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About symplr

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