Healthcare Industry Analysis



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PREFACE:

SAS Knows that **Growth** Depends on Availability.

Healthcare providers know that using voicemail to field missed calls is as impersonal as a lacking bedside manner. And when it comes down to it, the more calls you miss, the less you grow. That's why many healthcare providers look to Specialty Answering Service to provide exceptional 24/7 live-operator customer support.

If you've never used a call center, or if you are using a service and want to do a side-by-side comparison, then this Medical industry analysis of a few of our valued clients will point you in the right direction.







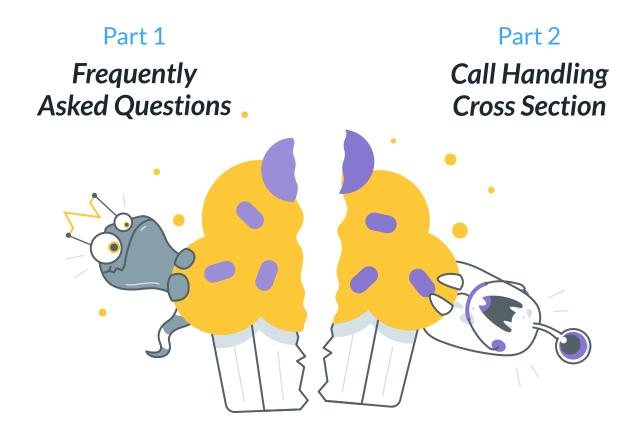


CHAPTER 1:

Start with **Programming Basics.**

Succinct, straitghtforward scripts are the key ingredient to a successful phone call. Whether you're using SAS as an answering service or virtual receptionist, guiding the operators by way of frequently asked questions or specific language to employ will ensure that calls flow smoothly for the customer and operator alike.

We've broken programming down into two parts.



Part 1: Frequently Asked Questions

FAQs allow our receptionists to provide general knowledge via phone rather than take a message. The majority of accounts contain details such as location, business hours, phone number, and website. Additional guestions are formatted with concise, uncomplicated language.

Here's how four of our Medical clients personalized their FAQs.



- What types of issues do you specialize in?
- Are all staff members registered nurses?



- What hospitals is the doctor affiliated with?
- What forms of payment do you accept?



- What are the names of the physicians in your practice?
- What types of insurance do vou take?



- What conditions do you treat?
- Can any procedures be done as outpatient?

Insurance Basics: When people are in need of medical care, they have an abundance of questions, the first of which is usually, "Do you accept my insurance?" It is beneficial to include information in your FAQs about the types of plans that you work with in addition to general out-of-pocket costs for self-pay patients.



Part 2: Call Handling Cross Section

Call handling, or scripting, is what the operators use to interact with your customers. You might have different instructions based on the caller's question or issue, or maybe you want a basic message for all calls.

As you can see below, scripts run from simple lead capture to more involved scenarios.



Calling in Sick

Gather Employee's Name, Number, Shift Start Time, Client's Name

Reach on-call and email message

Emergency Testing

Gather First Name, Company, Number, Location of Mobile

Reach on-call and email message

Client Concern

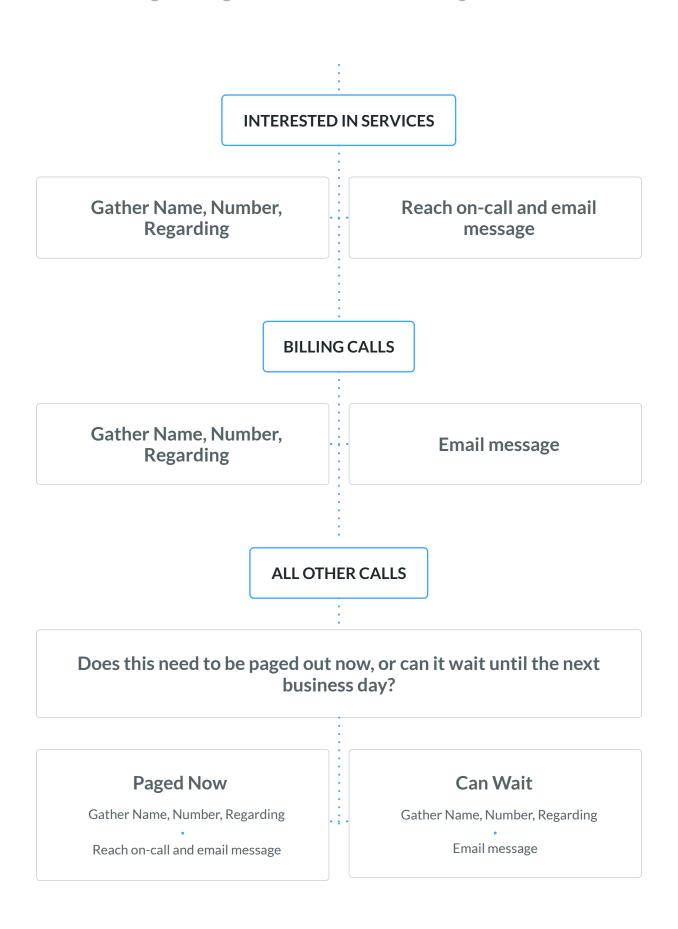
Gather Name, Number

Reach on-call and email message

Unable to Log In

Gather Employee's Name, Number, Shift Start Time, Client's Name

Email message





PATIENT CALLING

Business Hours: Go to a Closing and let caller know to dial the main number.

After-Hours: Which doctor are you seeing?

Is this an urgent matter?

If YES, gather Name, Number, Email Address, Regarding

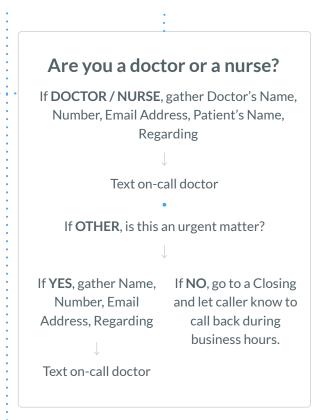
Text on-call doctor

If **NO**, go to a Closing and let caller know to call back during business hours.

CALLING FROM A HOSPITAL OR DOCTOR'S OFFICE

Business Hours: Go to a Closing and let caller know to dial the main number.

After-Hours: Which doctor are you calling for?



CALLING ABOUT A PRESCRIPTION

Business Hours: Go to a Closing and let caller know to dial the main number.

And is this prescription for insulin, a blood thinner, or a steroid?

If YES / NO, are you completely out of your prescription?

If YES / NO, which doctor are you seeing?

Gather Name, Number, Email Address, Regarding

Text on-call doctor

CALLING ABOUT AN APPOINTMENT

Business Hours: Go to a Closing and let caller know to dial the main number.

After-Hours: Go to a Closing and let caller know to call back during business hours.

ALL OTHER CALLS

Business Hours: Go to a Closing and let caller know to dial the main number.

After-Hours: Go to a Closing and let caller know to call back during business hours.



CALLING FOR AN APPOINTMENT

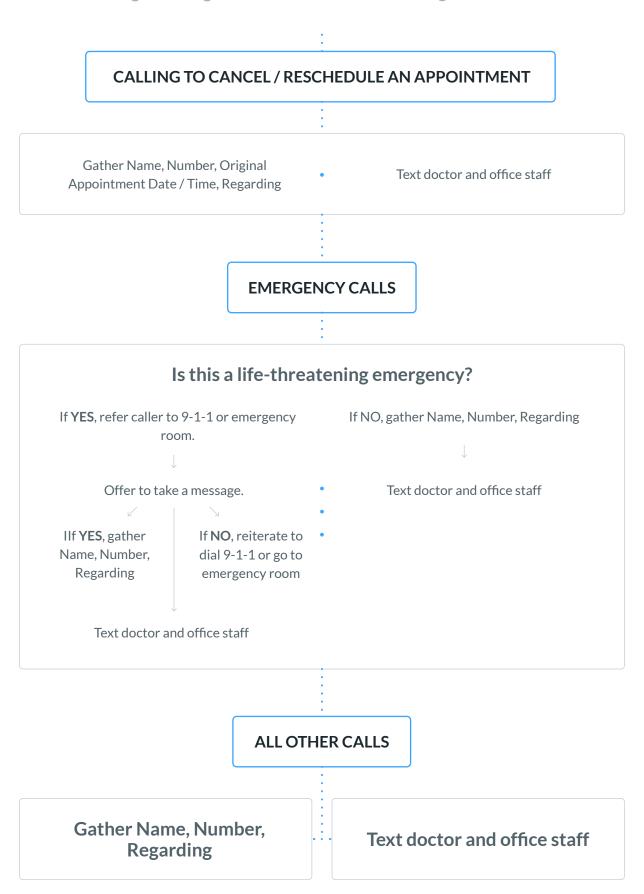
Are you a new or existing patient?

If **NEW / EXISTING**, gather Name, Number

Would you like your appointment on a Tuesday or Thursday?

Access Google Calendar and schedule appointment

Text doctor and office staff





ARE YOU A NEW PATIENT OR AN EXISTING PATIENT?

New Patient

Is this an urgent matter?

If YES, have you ever had an appointment with the doctor before?

If YES, gather Name, If NO, tell caller to dial Number, Regarding 911 or visit the nearest

Attempt 2 warm Gather Name, transfers Number, Regarding

Text doctor and email office staff Text doctor and email office staff

If NO, gather Name, Number, Regarding

Text office manager and email office staff

Existing Patient

Is this an urgent matter?

If YES, gather Name, Number, Email Address, Regarding

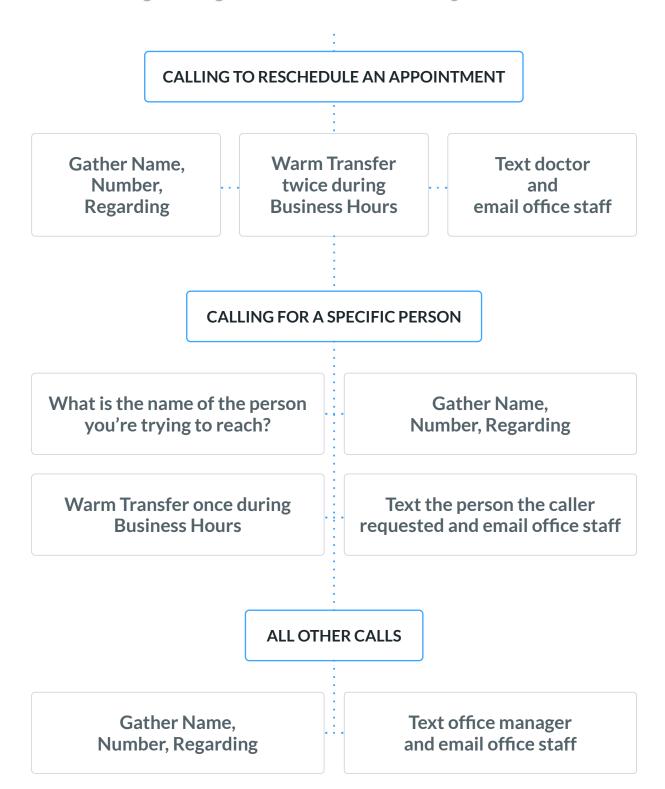
If No Answer, If No Answer, Reach On-Call Reach On-Call

Text office staff and email office manager

If NO, would you like to schedule an appointment or request medication?

If APPOINTMENT or MEDICATION. Warm Transfer twice during Business Hours

Text doctor and email office staff



The details above are just the tip of the iceberg. There are all kinds of things that you can add to your script, such as Appointment Confirmation Emails, Custom Integrations for Online EMR software, Continuous Reach On-Call for emergencies, and more!

CHAPTER 2:

Evaluating Statistics by Call Type.

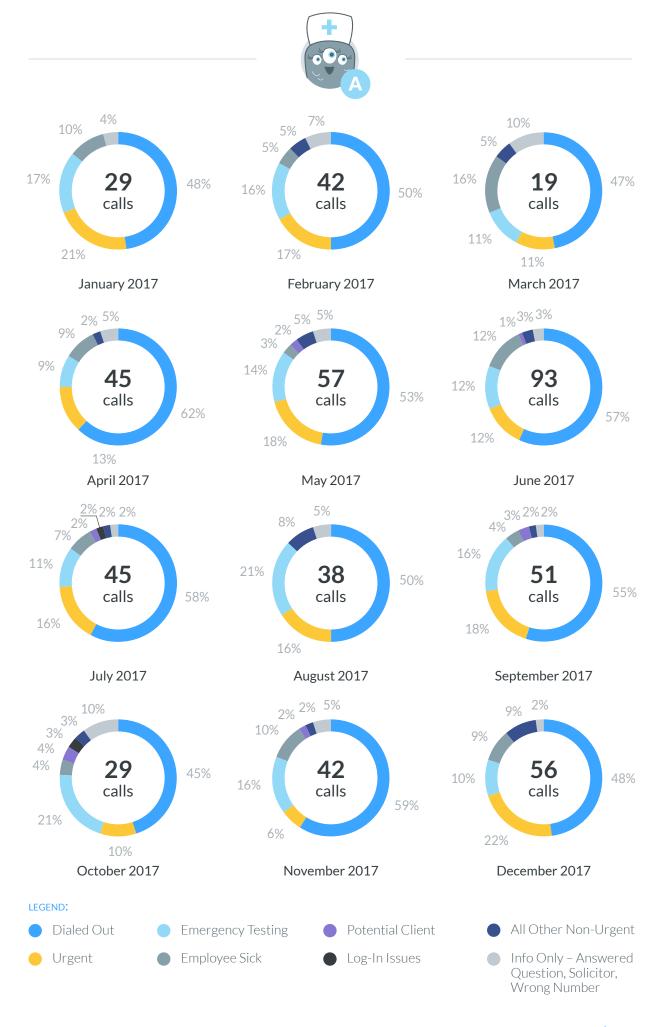
Depending on the nature of your medical practice, inbound call statistics can vary. For example, primary care physicians often see a major uptick during flu season while allergists will be in full swing when spring and fall pollen is at its worst.

Understanding your call traffic helps SAS staff accordingly, and the data trend will give you an indication of which months might cost you a bit more or a bit less so that you can plan ahead from a financial standpoint.

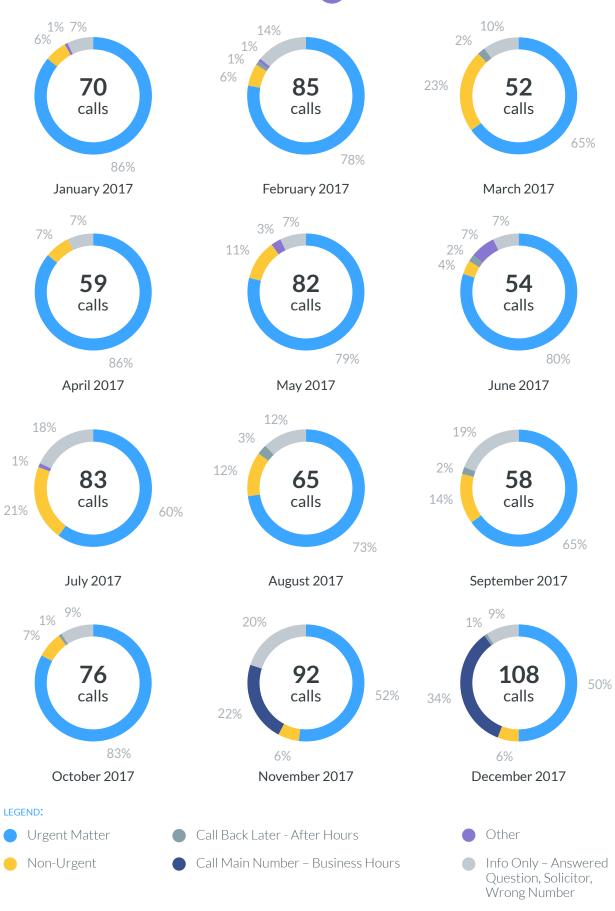
Check out the 2017 call volume breakdown for these four clients.

Whether you're looking for the total number of calls or calls segmented by type, we have you covered. Knowing peak hours will help you determine whether to use SAS 24 hours a day or just for after-hours or overflow support.

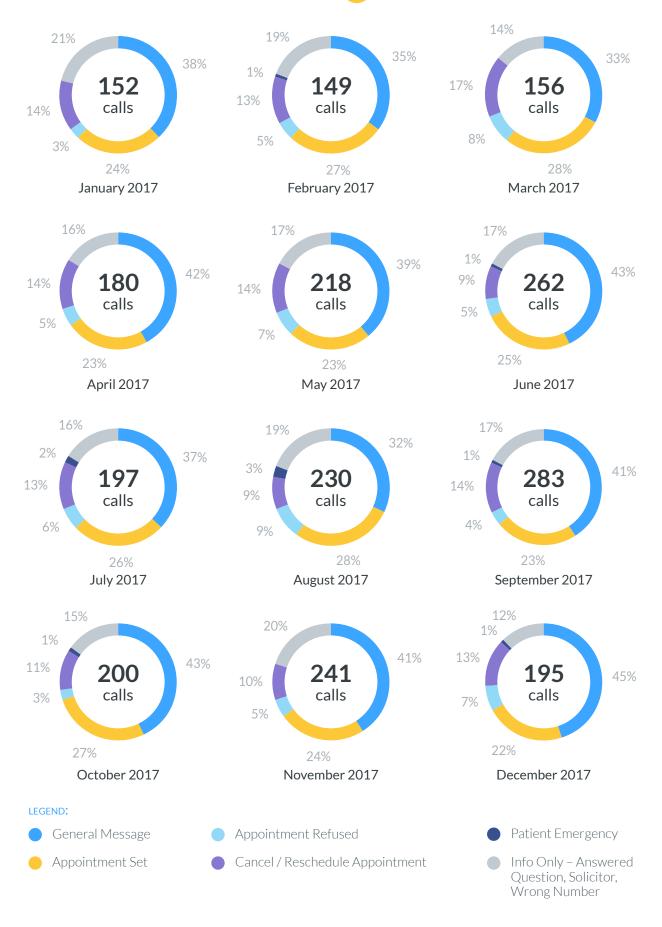


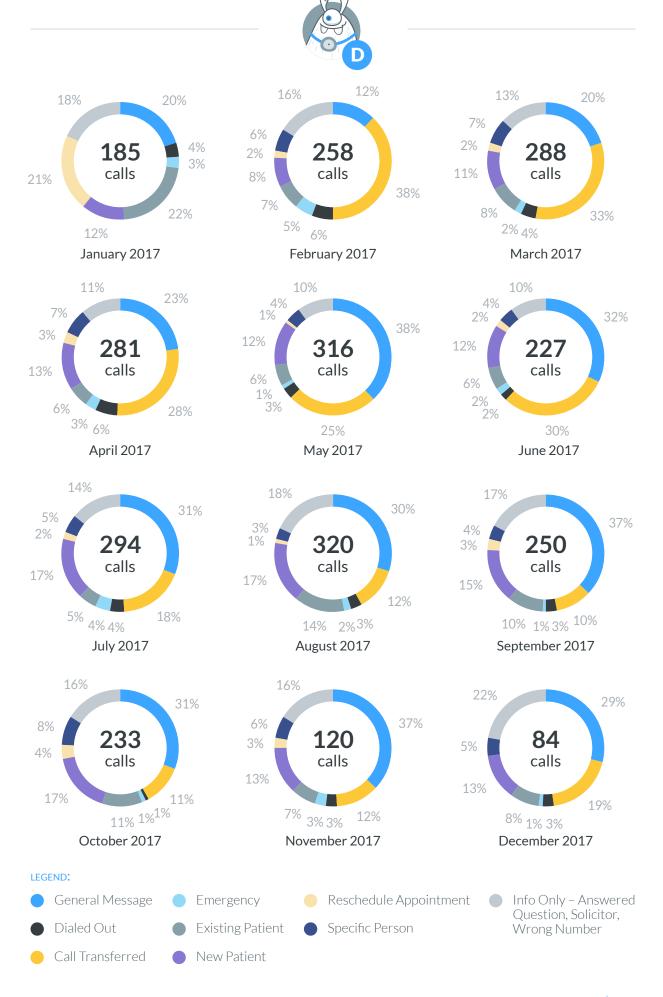












CHAPTER 3:

Putting it All Together Call Volume Statistics.

Taking an average of the data for all four medical clients, in 2017, we answered approximately:

1,901

totaling

5,524

MINUTES

with a typical length of

3.12

MINUTES PER CALL

Client









Answered calls	402	932	2,546	3,722
A total minutes	1,267.53	3,334.36	8,321.65	9,172.94
Average call length minutes	3.15	3.58	3.27	2.46

CHAPTER 4:

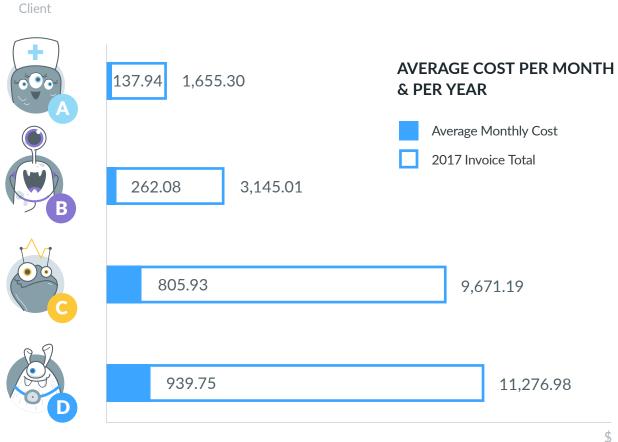
The Cost for Amazing Service.

At SAS, we strive to provide cost-effective service that is designed to improve your day-to-day operations and make your life easier.

Based on our data, the average healthcare provider can expect to pay around:



Consider this. According to Glassdoor.com, the average salary for a full-time receptionist is around \$29,000. That's more than twice the annual invoice total for our busiest medical office clients, and it doesn't take into account overhead costs such as insurance and equipment!



CHAPTER 5:

Gaining **Perspective**.

Ultimately, what are the benefits of using Specialty Answering Service over having an answering machine manage your missed calls? Reviewing the call and cost data as a whole, the answer is clear.

If you're looking for ways to justify cost, this generalization will do the trick:

- You receive 1,901 calls per year.
- As a result of your busy practice, you miss 323 of these calls, or about 17%.
- Instead of leaving you a voicemail, callers just dial the next provider in the phone book.
- We'll guesstimate that 200 calls would have resulted in new patient appointments.



- According to a BlueCross
 BlueShield of California cost list
 from 2015, found on
 TrueCostOfHealthCare.org, the
 average insurance payout for a
 moderately complex new patient
 exam is between \$84 and \$122.
 So, we'll go with \$100.
- Then, factoring in those patients who are uninsured, Johns Hopkins Bloomberg School of Public Health tells us that the average new patient appointment is \$160.
- The average cost of having SAS capture the missed calls might be somewhere between Client B and C's invoice total. We'll round it up to \$6,500.

Gaining Perspective

Now, let's imagine two scenarios:





Insured Patient

Uninsured Patient

- 200 appointments x\$100 = \$20,000
- \$20,000 \$6,500 = \$13,500
- 200 appointments x\$160 = \$32,000
- \$32,000 \$6,500 = \$25,500

Without SAS:

You lose \$20,000 per year in new patient fees.

You lose \$32,000 per year.

With SAS:

You gain back \$13,500 of the revenue that blew out the window when your answering machine picked up.

You'll have \$25,500 net revenue.



Taking You Farther, Faster.

With Specialty Answering Service on your side, you will have the freedom to worry less about what you're missing and the time to focus on the reason that you became a healthcare provider: improving people's wellbeing, one visit at a time.

Contact SAS today, and get ready to open the door to continued growth, happier patients, and a healthier bottom line!