



Bringing Patients Back to Preventive Care

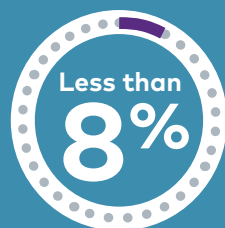
Restore healthy habits by encouraging rescheduling of preventive care exams, screenings, and vaccinations.

The importance of recall and reminder strategies in promoting patient wellness and bringing people back into the healthcare system.

Like many healthcare delivery organizations, your organization (or you) may be striving to regain solid footing as you look to recover from the financial and clinical uncertainty that marked 2020. For much of the industry, this time was spent modifying check in-procedures and reopening facilities due to the widespread impact of COVID-19. But as you move beyond these reactive efforts, there is an opportunity to be more strategic and proactive by renewing a focus on patient health outcomes, as well as your organization's own financial health and sustainability.

Meeting these objectives starts by ensuring your patients are returning to the healthcare system for all types of services, including preventive care visits. Even prior to the pandemic, less than eight percent of Americans were getting all of the preventive services with the greatest potential for improving health, according to Health Affairs.¹ These high-priority services include vaccinations and screenings for breast, colon, cervical, and lung cancers, as well as conditions like osteoporosis and depression.

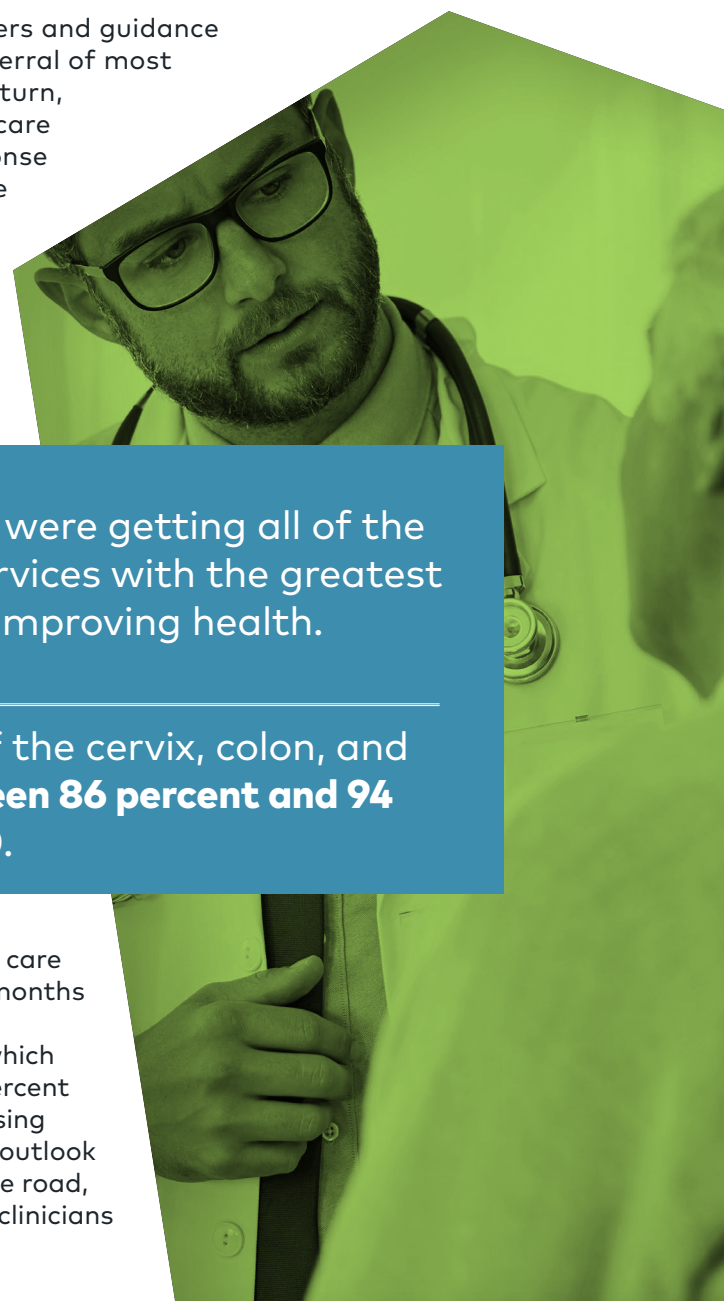
During the pandemic, stay-at-home orders and guidance from medical associations led to the deferral of most routine, in-person medical visits. This, in turn, led to a dramatic drop off in preventive care appointments and vaccinations. In response to these limitations, most providers have promoted alternative care settings like telehealth. Yet telehealth can't be used effectively for services which require in-person interaction or diagnostic equipment, like vaccinations or mammograms.



of Americans were getting all of the preventive services with the greatest potential for improving health.

Screenings for cancers of the cervix, colon, and breast, were **down between 86 percent and 94 percent** in March of 2020.

As a result, utilization of many preventive care services was markedly lower in the early months of COVID-19. This includes screenings for cancers of the cervix, colon, and breast, which were down between 86 percent and 94 percent in March of 2020.² The deferral of diagnosing these conditions could impact treatment outlook and outcomes for many patients down the road, meaning that quick action on the part of clinicians is needed to help prevent further delays.



Why patients skip out on prevention

To jump start these efforts, it's critical to understand why patients put off preventive care visits. While concern about COVID-19 infection was initially a barrier to compliance with these visits in 2020, many Americans are now ready to re-enter the healthcare system. However, they need more than just encouragement and reassurance. They must also be reminded about the optimal timing and importance of preventive care, especially if these visits are long overdue, while being educated about their value. Among the [top reasons](#) for non-compliance with these visits are:



Cost: Nearly 1 in 3 patients think they can't afford preventive care, even though many health plans cover these services with little or no patient cost.



Lack of awareness: 28% of patients don't know which services are recommended for them.



Forgetfulness: Nearly 1 in 4 don't know when they are due for a visit.



Scheduling uncertainty: 20% don't know where to access preventive care.



Reactiveness: 27% only schedule appointments when they are sick.

Assessing the value of timely preventive visits, procedures, and immunizations on patient health

There are many great reasons to bring your patients back for preventive care visits, which include the potential for a measurable improvement in health outcomes. This impact can be seen across a wide variety of patients with different risk factors, demographics, and needs.



Improving vaccination coverage

Increasing access to COVID-19 vaccinations has, of course, been a primary focus for many healthcare organizations in 2021. What began with more limited availability for healthcare and frontline personnel has now largely expanded out into other patient populations, with older and high-risk individuals being priority groups early in the year.³ Yet with this expanded access has also come barriers to utilization, including myths and misperceptions about safety and efficacy, as well as patient complacency and lack of trust.⁴ All of these concerns present new opportunities for both patient engagement and education.

However, the value of promoting immunizations is not just limited to COVID-19 efforts and will be essential long after the pandemic. Vaccinations are also an ideal place to revive patient engagement efforts for wellness given their ability to prevent many serious childhood diseases. In fact, immunization rates for some of these conditions, like measles, had room for improvement even prior to the pandemic.⁵ Then, during early 2020, coverage rates across all childhood immunizations declined even more dramatically.⁶ **In response, most pediatric and family medicine groups have strongly recommended that parents make every attempt to return for normal preventive care, wellness visits and vaccinations for their children despite COVID-19.**⁷

Even for adults, immunizations can be key to health maintenance. This should include annual flu shots, given the risk of coinfection with other viruses, including COVID-19, during the influenza season. Preventing the flu may also help reduce the number of related hospital visits each year, which will allow healthcare organizations to optimize their staffing and stretch precious resources.

Early detection for earlier intervention

Other preventive care services have an impact on quality of care and outcomes thanks to their ability to enable early detection and treatment of serious illnesses. These include regular mammograms for women as well as colonoscopies. These two screenings alone impact a large portion of middle-age adults. CDC data shows that about one-quarter of Americans aged 50-75 are not up-to-date with colorectal screenings and 27 percent of women aged 50-74 have not had a mammogram in the past two years.^{8,9}

Of course, physical health isn't the only issue during these uncertain times. Mental health screenings may also be more critical now than ever.¹⁰ These screenings can be valuable in both adults and adolescents as research shows that 46 percent of mental health conditions begin by age 14.¹¹ Yet the average delay between when symptoms first appear and intervention is approximately 11 years.¹² Screenings for mental health issues like depression and other conditions can narrow this gap and help ensure patients are seeking the support and treatment they need.



Employing preventive care as a strategy to optimize your organization's financial health

While immunizations, annual exams, and screenings are not necessarily high-dollar services, they can encourage patients to return to the healthcare system, improving recall in the months and years to come.

For example, one study showed that providers offering the no-cost Medicare annual wellness visit to patients generated greater primary care visit revenue and saw more stability of patient assignment.¹³ At the same time, prevention is a large part of accountable care, quality, and value-based care initiatives, which deliver bonus payments that can help bolster your organization's bottom line.¹⁴

Creating a preventive care campaign that makes prevention a priority

Given all of these distinct advantages, your organization will want to act quickly to encourage patients to return to the healthcare system for vaccinations, annual exams, and routine visits. Following are several key recommendations compiled from evidence-based research, public health resources, and industry best practices that can assist you. Together, these strategies can be deployed to create a targeted, timely, and effective preventive care campaign.

1 Use the latest evidence-based research and resources

The Community Preventive Services Task Force (CPSTF), a task force of the Department of Health and Human Services, has developed a variety of recommendations for patient outreach that promote prevention, from immunizations to cancer screenings.¹⁵ The CPSTF specifically recommends client reminder and recall interventions to increase vaccination rates in children, adolescents, and adults as well as for other patient services like colonoscopies.^{16,17}

2 Take advantage of today's technology to automate engagement

In line with the recommendations above, your organization should be looking to today's technology, including automated patient engagement systems, to optimize reminder and recall efforts. For example, there is an opportunity to dramatically streamline and manage appointment reminders (employing SMS, phone and email-based notices), especially for those due or overdue for these visits. Two-way, technology-enabled communications embedded in an EHR can even allow patients to directly schedule or reschedule an appointment from an SMS message. The benefits of this automation include:

- **Saving time for busy team members, allowing healthcare entities to preserve precious resources.**
- **Employing a multi-touch approach, which is valuable given that many patients need several touchpoints to motivate them into action.**
- **Saving money typically allocated to mail or telephonic outreach, including printing, postage, and staff time while actually generating income.**

Using these systems, personalized messaging can be easily deployed at scale to help patients understand the facts about the safety of these measures, as well as their efficacy in preventing serious illnesses, including COVID-19.

This same approach has demonstrated meaningful return-on-investment for healthcare organizations of all sizes. In one example, a Northeastern OB-GYN practice leveraged a powerful engagement system to outreach to patients due or overdue for mammograms. Based on \$150 in revenue per mammogram, the practice was able to gain approximately \$45 for every \$1 spent. In another real-world instance, a large Louisiana-based health system used technology-enabled messaging to remind groups of patients with recent orders for colonoscopies that were not yet scheduled. Of the 3,137 patients contacted, 578 scheduled their test by the conclusion of the campaign, achieving an incredible 18.4 percent conversion rate and generating nearly \$700,000 based on an average revenue of \$1,185 per procedure.

There are also several innovative capabilities offered by the most advanced automated engagement platforms that can enhance their potential impact on preventive care utilization. For example, your organization may want to look for systems that can:

- **Embed directly into leading EHRs**, giving staff members the ease and convenience of accessing a single system for patient outreach and task management—all while documenting interactions and health information in one place.
- **Allow patients to schedule their visit or vaccine** via an SMS message, instead of having to make a phone call. This saves the healthcare organization time and resources and is a great experience for patients as well.
- **Encourage two-way communication with patients**, via messaging, live chat, and chatbots.
- **More easily offer** up customized educational messaging and resources.

3 Look to proven best practices

An effective patient preventive care campaign should also incorporate proven best practices that help account for the most common reasons for missed appointments cited on page 3. These include the following:



Cost: Disseminate messaging that educates patients about the low or no cost share associated with prevention via most health insurance plans, or cash discounts for uninsured patients, when available.

Sample message:

Annual exams are covered in full by most health insurance plans. You are due for your visit. Please reply: "1" to schedule your appointment or "2" to decline.



Forgetfulness: Employ a cadenced approach and target your communications to patients due or overdue for a specific service.

Sample message:

It's time for your annual wellness exam. Please reply: "1" to schedule your appointment or "2" to decline.



Lack of awareness/education: Deploy messaging that communicates the importance of specific preventive services.

Sample message:

Mammograms are recommended for women over 40. Schedule your exam now!



Uncertainty about scheduling: Be sure that patients know exactly how and where to access these services.

Sample message:

You are due for a routine cholesterol screening. Please reply: "1" to schedule your appointment with Dr. Parker or "2" to decline.



Reactivity: Encourage patients to be proactive before illness strikes.

Sample message:

Stay healthy this winter. Stop by Central Healthcare this Friday between the hours of 9am–4pm for your annual flu shot.

Other best practices include leveraging multi-modal communications like phone, SMS text, and email, which studies show can make a real impact on recall and reminder effectiveness.¹⁸ The most impactful campaigns will also state the benefits of a particular action, personalize messaging as much as possible, and provide opportunities to take this action and ask questions—for example via links, live transfers and even self-scheduling.

Finally, timeliness is a key consideration to ensure that you're reaching patients when prevention is top of mind. For instance, your organization may want to play for timely outreach during the summer months to remind parents about back-to-school immunizations and sports exams. To assist you in these efforts, Intrado HouseCalls has developed a **2021 patient preventive care and wellness outreach calendar**. The entire 12-month calendar can be downloaded free [from our resources page](#).

Getting back to the business of prevention

As the entire healthcare industry strives to recover from the challenges of a tumultuous pandemic, there are many opportunities to re-engage patients to ensure that they stay on track with preventive care visits, screenings, and vaccinations. Yet allowing staff members to focus their efforts on managing patient care and new protocols requires a thoughtful approach to ensure that patient outreach and reminders are not taxing these precious resources. Today's technology, paired with a strategic, evidence-based approach, can ensure that your patients understand the value of prevention and see your organization as a long-term partner invested in their health.

To learn more about how Intrado can help you optimize your patient outreach for preventive care or any other routine care services while delivering meaningful ROI, [contact us](#) today.

Sources:

1. Borsky A, Zhan C, Miller T, et al. (June 2018). Few Americans Receive All High-Priority, Appropriate Clinical Preventive Services. HealthAffairs. Retrieved March 2021, from <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2017.1248>
2. Epic Health Research Network. (May 2020). Delayed Cancer Screenings. Retrieved March 2021, from <https://www.ehrn.org/articles/delays-in-preventive-cancer-screenings-during-covid-19-pandemic>
3. Centers for Disease Control and Prevention. (December 2020). Vaccines & Immunizations: Implementation Strategies. Retrieved March 2021, from <https://www.cdc.gov/vaccines/covid-19/implementation-strategies.html>
4. Fisk, R. (2021). Barriers to vaccination for coronavirus disease 2019 (COVID-19) control: experience from the United States. Global Health Journal. Retrieved March 2021, from <https://www.sciencedirect.com/science/article/pii/S2414644721000051>
5. National Institutes of Health. (April 2019). Decline in measles vaccination is causing a preventable global resurgence of the disease. Retrieved March 2021, from <https://www.nih.gov/news-events/news-releases/decline-measles-vaccination-causing-preventable-global-resurgence-disease>
6. Bramer C, Kimmins L, Swanson R, et al. (May 2020). Decline in Child Vaccination Coverage During the COVID-19 Pandemic—Michigan Care Improvement Registry, May 2016 – May 2020. Centers for Disease Control and Prevention. Retrieved March 2021, from <https://www.cdc.gov/mmwr/volumes/69/wr/mm6920e1.htm>
7. American Academy of Pediatrics. (January 2021). Guidance on Providing Pediatric Well-Care During COVID-19. Retrieved March 2021, from <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/guidance-on-providing-pediatric-well-care-during-covid-19/>
8. Centers for Disease Control and Prevention. (June 2020). Colorectal Cancer Statistics. Retrieved March 2021, from [https://www.cdc.gov/cancer/colorectal/statistics/index.htm#:~:text=The percentage of U.S. adults, adults screened for colorectal cancer.](https://www.cdc.gov/cancer/colorectal/statistics/index.htm#:~:text=The%20percentage%20of%20adults,adults%20screened%20for%20colorectal%20cancer.)
9. National Cancer Institute. (March 2020.) Breast Cancer Screening. Retrieved March 2021, from https://progressreport.cancer.gov/detection/breast_cancer#:~:text=In%202018%2C%2072.8%25%20of%20women,within%20the%20past%202%20years.
10. Panchal N, Kamal R, Cox C, Garfield R. (February 2021.) The Implications of COVID-19 for Mental Health and Substance Use. Kaiser Family Foundation. Retrieved March 2021, from <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
11. Kessler R, Berglund P, Demler O, et al. (June 2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. Arch Gen Psychiatry. Retrieved March 2021, from <https://pubmed.ncbi.nlm.nih.gov/15939837/>
12. Wang P, Berglund P, Olfson M, Kessler R. (April 2004). Delays in Initial Treatment Contact after First Onset of a Mental Disorder. Health Serv Res. Retrieved March 2021, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1361014/>
13. Lagasse, J. (February 2018). Why medical practices that offer free wellness visits see increased revenue. Healthcare Finance. Retrieved March 2021, from <https://www.healthcarefinancenews.com/news/why-medical-practices-offer-free-wellness-visits-see-increased-revenue>
14. Albright B, Lewis V, Ross J, Colla C. (March 2016). Preventive care quality of Medicare Accountable Care Organizations: Associations of organizational characteristics with performance. Med Care. Retrieved March 2021, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4752877/>
15. Community Preventive Service Task Force Findings. Retrieved March 2021, from <https://www.thecommunityguide.org/task-force-findings>
16. Increasing Appropriate Vaccination: Client Reminder and Recall Systems. (July 2015). The Community Guide. Retrieved March 2021, from <https://www.thecommunityguide.org/sites/default/files/assets/Vaccination-Client-Reminders.pdf>
17. Summary of CPSTF Finding. (February 2006). The Community Guide. Retrieved March 2021, from <https://www.thecommunityguide.org/findings/cancer-screening-provider-reminder-and-recall-systems-colorectal-cancer#:~:text=The%20Community%20Preventive%20Services%20Task, colorectal%20cancer%20screening%20by%20flexible>
18. Jacobson Vann J, Jacobson R, Coyne-Beasley T, Asafu-Adjiei J, Szilagyi P. (January 2018). Patient reminder and recall interventions to improve immunization rates. Cochrane Database Syst Rev. Retrieved March 2021, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6491344/>

About Intrado

Intrado is an innovative, cloud-based, global technology partner to clients around the world. Our automated solutions help healthcare organizations effectively activate and engage patients and members beyond the clinical setting and at key points across the care continuum. By providing innovative technology-enabled communications, Intrado helps you connect with healthcare consumers in meaningful and relevant ways, increasing engagement, building relationships, improving care quality, and driving revenue by optimizing the patient experience.

For more information, please call **1-800-644-4266** or visit **www.intrado.com**.

