



Mythbusting Patient No-Shows

Uncovering the Secrets of Modern Patient Engagement to Drive Efficiency, ROI, and Patient Satisfaction

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No Shows are a real problem for healthcare organizations and represent a tremendous opportunity to save money through better planning and efficiency. The scope of the problem is striking: No shows cost the industry [\\$150B annually](#). On average, they cost [a single practice \\$150,000](#). The [average no show rate is 27%](#), and it's even as high as [50%](#) in some places.

In addition to higher costs to the care provider, patients who fail to show up for their appointments often require more expensive emergency care later on. These higher costs get factored into healthcare costs for everyone else. Understanding who is most likely to no-show for an appointment and why a patient may intentionally or unintentionally no-show is important to determining how to best tackle the issue, and in understanding what works and what doesn't.

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What Not to Do

There are a number of strategies for reducing no-shows that simply don't work. Unfortunately, some of these are still in practice at many health organizations, so it's vital to understand if you are using these outdated and ineffective strategies:

Charging Patients for Missed Appointments. Charging a fee creates additional work for staff and fails to address many of the underlying reasons that patients miss appointments. Only a small amount of the appointment fee will likely be recoverable, in any case: Medicaid doesn't allow medical practices to charge patients for missed appointments in some states, and Medicaid patients are one of the patient groups more likely to no-show, which renders this strategy ineffective for a large percentage of a practice's patients.

Voice-only Reminder Messages. In today's world, this strategy rarely works simply because patients rarely answer their phones or respond to voicemail. Robocalls and phone scams have dissolved consumer trust in phone calls from numbers that they don't recognize and most prefer to communicate via text. The success of voice-only reminders hinges on patients answering their phones because if the call is missed, the patient has no opportunity to confirm, cancel or reschedule the appointment—something that is pivotal to a successful no-show reduction strategy.

Double Booking Appointments. Double booking appointments is actually betting on the probability that a patient won't show up for their appointment, and it's a recipe for unhappy patients. When they do show up as scheduled, the results are long wait times, frustrated patients and minimal time with a provider—all of which put the reputation of the organization in jeopardy and require double the work for staff. Double booking generally ends up requiring more work for the same amount of revenue, and in the process you'll likely lose patients.

5 Common Misconceptions:

Before settling on an effective solution for overcoming the problem of no-shows, it's important to rule out not only strategies that don't work, but also to eliminate widespread misconceptions about patient behavior and motivations. Here are some of the most common ones:

- 1. Every appointment has equal likelihood for a “no-show.”** This is simply not true. For instance, patients are more likely to no-show for ongoing/preventative care appointments vs. a chemotherapy appointment (patients generally show up for something crucial, but are less concerned about missing follow up or preventative care appointments). Depending on your organization type, and varying appointment types with different sorts of patients, your strategy/approach to no-shows must vary to address this disparity.
- 2. Patients no-show because they can't get in touch with their doctor last-minute.** It's true that if a patient has something pop up, it can be difficult for them to get in touch with their providers quickly. But if a practice is using modern tools like chat, or has an easily accessible portal that empowers patients to contact physician offices and reschedule, send updates, and so on, this difficulty can be significantly offset and often resolved.
- 3. Reducing no-shows will create more administrative burden.** This might have been true decades ago before the widespread availability of automated technology, but today it's simply false. Automated appointment reminders, chat, patient-accessible portals and other technology enhancements can help reduce both no-shows and internal office administrative burden—simultaneously.
- 4. There's no way to have much insight into whether a patient will no-show or not.** There are in fact many ways to have better insight into the likelihood of no-shows—and in many cases take preventative action to lessen their likelihood. Understanding demographic information and factors that make someone likely to no-show (i.e., how accessible their transportation is, what their work schedule allows, how crucial they perceive the appointment to be) is important. Automatically identifying these factors and flagging for a possible no-show can help you plan around them and help them get to their appointment.
- 5. There's no way to engage a patient who no-shows, since they didn't come into the office.** Even patients who don't regularly show up in the office can be reached through regular automated outreach. Many healthcare organizations effectively use targeted health campaigns to patients, via email and text, by reaching out regularly to touch base on birthdays, yearly visit anniversaries, quarterly check-in dates and more - keeping lines of communication open, and establish confidence in messages from a known sender. Targeted outreach campaigns can also be initiated to share current information on a locally spreading disease or even simple updates on office-specific things like “new late hours available on Tuesdays ‘til 9 pm” or “Meet our new physician!” This sort of outreach often sparks patient interest and engagement.

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Beyond using outreach campaigns to touch base with patients on specific dates related to the patients' own health, many organizations conduct outreach to share interesting and helpful educational material about health and wellness with patients. These sorts of campaigns can be an ongoing way of both providing information, building trust, and driving appointment patient scheduling. A physician might send out a short article or link to a blog with information about topics such as: short mini-blog type articles on: "Here's why potassium can have a big effect on blood pressure" or "Here are six signs of fatigue and what might be causing them." This sort of educational information both provides helpful information and also reinforces your physicians as subject matter experts and trusted confidantes.

Other sorts of educational tools used to engage patients include links to slides, webinars and podcasts, or animated walk-throughs of typical patient treatment processes. This sort of helpful information material sent as outreach at a regular cadence tends to build trust and engage patients. The more patients get crucial information from your organization the more likely they are to think "my physician office is my most-trusted source for wellness information"—and the more likely they are to show up for appointments.

What Works: Effective Ways to Reduce No-Shows

So far, we've talked a bit about both what doesn't work and about misconceptions many healthcare organizations have about patient behavior. But what does work? Here are the initiatives many care settings are using today to radically reduce the number of no-shows at their offices:

- **Automate reminders.** Providers who send automated email and text reminders tend to find greater success in getting patients to show up for scheduled appointments—that is, they reduce the incidence of no-shows. Different provider organizations prefer different styles of reminders. Some issue a single day-before reminder. Others send out reminders a full week before an appointment as well as a day-before reminder. Still others do both these sort of reminders and require patients to visit the portal and confirm an appointment visit they've scheduled. All of these strategies are effective.

- **Expand access with secure 2-way chat.** Recent research found that most providers (96%) [are not yet utilizing](#) online chat. Those who have complemented their engagement technologies with chat capabilities in order to interact with patients have found them effective.

For maximum effectiveness, a chat system requires careful planning and needs to be implemented well. Many patients have been [frustrated with crude chatbot](#) systems for a variety of reasons: The chat system is unable to identify the patient's use case, it's unable to address personalized patient issues, it's missing data collection and analysis functions that would allow it to understand patient history, and it doesn't make it easy to find and switch to a human agent when a patient really wants to speak to an actual person.

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The best chat systems are hybrids: They have carefully planned decision trees that can not only answer the most easy and common patient questions (e.g., “What hours are you open?” or “Where is your office located?”) but also incorporate data and analysis functions (in order to gather existing office information about a patient to better inform the chat) and finally, they recognize when a patient needs help from a human navigator and have a system set up for office staff to respond in a quick, set time to patient requests that need extra guidance from an internal office expert.

A good chat system encourages patients to rely on technology for standard interactions such as confirmation, cancellation, rescheduling, and getting directions. A helpful online chat solution will automate the service of these sort of standard interactions and dynamically route to staff only the chats that require human interaction.

- **Leverage multiple communication methods.** Besides offering in-office visits, phone support, and both chat and automated outreach, many forward-looking organizations make a point of offering additional communication methods: health orgs will text patients (instead of email, if they prefer), use video (both for educational material on their website and for telehealth appointments), and sometimes even offer on-site company clinics for employers about specific areas of health concern.
- **Make data easily accessible.** The more data your organization has on its website about staff, specialty expertise and the variety of services offered, the easier it is for patients to engage and feel welcome. Educational materials can be particularly helpful here, too: If a patient has a symptom and reads a blog or sees a video that helps explain what that symptom might mean, the more likely they are to feel confident about setting up and keeping an appointment with the publishing organization or specialist.
- **Improve self-service through communications.** When outbound communications programs (reminders, campaigns, etc.) are used in combination with existing online self-service tools, everyone wins. By embedding links to enable chat, reschedule, or add appointments to a calendar, patients are not only empowered to manage changes to their care, but free-up organizational capacity of staff and call-center agents to focus on patients who need more assistance or have more complex needs. For example, a patient who can quickly and securely self-reschedule from a link in a reminder can save both parties countless rounds of ‘phone tag’ and experience-impacting frustration.
- **Improve proactive education/communication to engage patients.** Set priorities about which ways to communicate are most important to work on first and why. Then, be sure to track results. Set targets and measure progress: e.g., if you put in place a reminder system and it reduces no-shows by 10% over 6 months, might a more robust reminder system with multiple reminders be able to reduce no-shows by 20% over the next six months? Experiment and see. Do longer, more information rich messages have a higher response rate, or shorter ‘just the facts’ messages? How do your patients respond and appreciate different deliver cadences. Different providers work with different populations that have different communications expectations and response rates, and knowing your customer is an essential requirement to optimizing your own organization’s workflows.

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- **Work telehealth appointments into your schedule.** Telehealth, or remote video consults, is growing, popular and seems set for even more widespread adoption. Before the pandemic [just over 1%](#) of medical and behavioral doctor visits were conducted virtually. Today, telehealth appointments make up [nearly 25%](#) of such visits. Strikingly, a full 58% of Americans say they are comfortable with virtual appointments replacing in-office appointments. There appears to be savings for patients, too: Telehealth visits cost patients an average of \$70, compared to \$146 for an office visit, [one study found](#). Telehealth also allows the chance for a patient to consult expert sub-specialists in their particular condition who might be geographically thousands of miles away—all at considerably reduced cost. It thus allows many providers to widen the number of patients they serve.

Smart scheduling solutions can help facilitate telehealth appointments, and since video consults are in many cases more accessible for many patients, which could also help reduce no-shows.

- **Make sure you're asking the right questions when it comes to vendor selection.** If optimizing your current technology and patient engagement setup won't cut it or you're simply ready to start over, it's time to start identifying a new partner with proven results. Choosing a vendor can be overwhelming, but evaluating your options based on the things that will improve your patient satisfaction, provide new efficiencies, and reduce wasted time and effort will quickly narrow the list.

Key Considerations:

- **Can it scale?** Does the system accommodate multiple sites, multiple families on one contact number and multiple modes of communication?
- **Is the system integrated with your EMR?** When a message goes out, or a response comes back, are those activities visible in your EMR? Can everyone in your organization who needs to see the information able to?
- **Is it interactive?** Can patients confirm, cancel or request to reschedule from the appointment reminder?
- **What kind of service will you get after go-live?** Will you have the option to talk to a human during the most critical hours of operation? What's the average turnaround time on support tickets?
- **Is HIPAA, CAN-SPAM, and TCPA compliance built into the solution?** If not, how will they help you ensure regulatory compliance?
- **Can the strategy be expanded later?** It might be appointment reminders now, but when you're ready to look at strategies for closing gaps in care, streamlining patient intake, implementing 2-way secure messaging or offering patient self-scheduling, you'll want a vendor who has robust, mobile-first solutions that can be added to your appointment reminders.

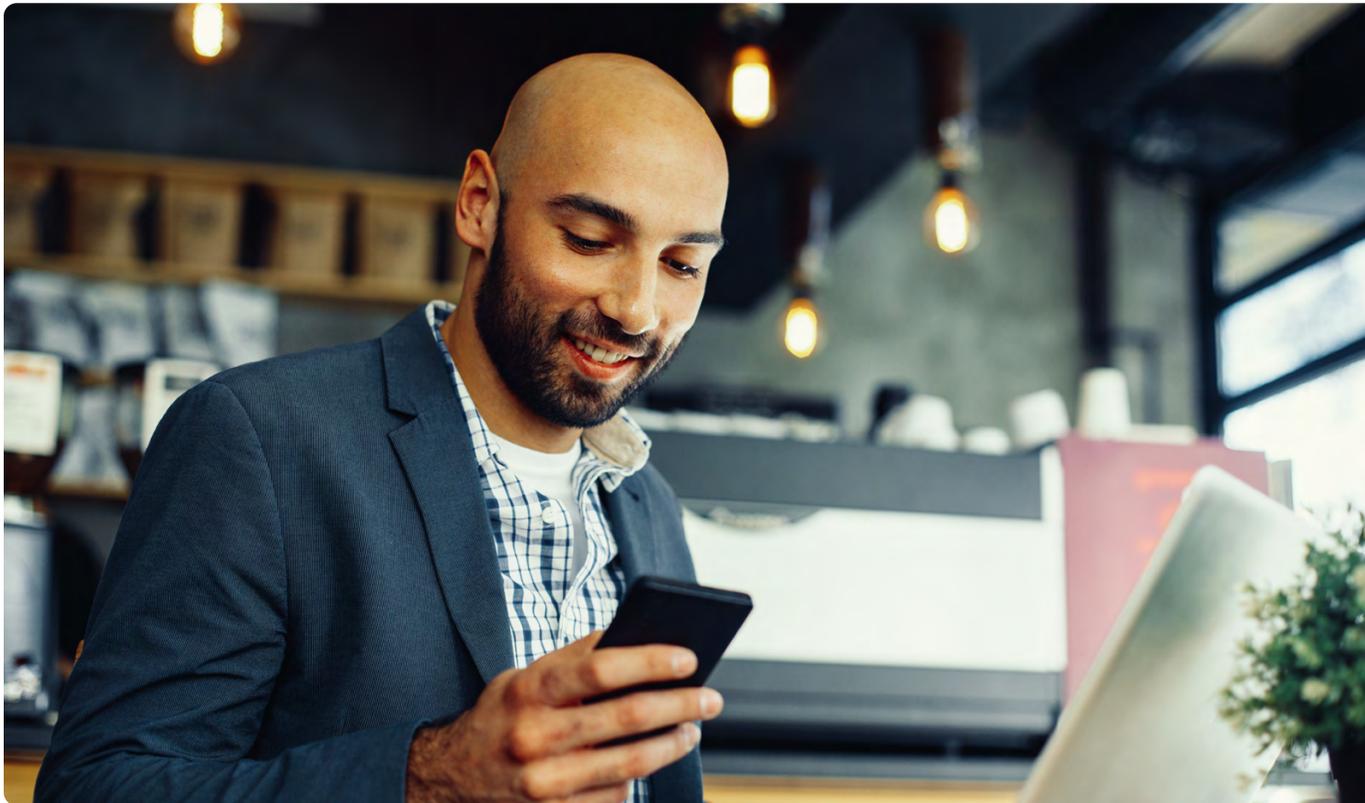
Finding the right partner to help you identify existing gaps, match you with the right solutions, and provide long-term support and training will do more than just lower patient no-shows. This kind of collaboration helps equip healthcare leaders with the tools and solutions that deliver efficiency, patient satisfaction, and a streamlined patient experience that isn't possible with manual processes or siloed systems.

Smart No-Show Strategies Save Money and Time

Hospitals, health systems and medical groups are all impacted by no-shows. Organizations that don't perceive patient no-shows as a problem are missing an opportunity to increase revenue and fill open appointments in their schedules.

With the many demands placed on medical groups and systems, resources are thin. There's no reason to settle for limited functionality and unresponsive support from first-generation solutions. A top-notch communication system paired with patient-centered best practices and scheduling tools offers healthcare leaders solutions to their no-show problems that operate in the background and require minimal work from support staff. This frees physicians and office staff to focus on the core work of patient care.

To learn more about Dash by Relatient, visit [Relatient.com](https://relatient.com).



About the Author



David Dyke serves as Chief Product Officer at Relatient, a leading provider of patient scheduling, self-service, and communications solutions for healthcare organizations.

At Relatient, we believe people deserve a simpler experience with the healthcare system. Every day we transform that belief into reality by delivering solutions that enable our customers to create consistently positive touchpoints across every individualized patient journey.

David has over 25 years of product, R&D and commercial experience across many healthcare verticals, including patient access, revenue cycle, clinical research & health information management. David is passionate about helping healthcare organizations achieve their full potential while positively impacting the lives of people in their communities.

About Relatient

Relatient, Inc., is a leading patient scheduling and engagement technology company that utilizes a mobile-first approach to improving access to care. On behalf of medical practices and health systems across the U.S., Relatient engages with over 50 million unique patients per year. Relatient's self-scheduling, patient messaging, chat, digital registration, and payment solutions drive operational efficiency, increased appointments, reduced no-shows, faster patient payments and improved patient satisfaction, all while supporting better health and care quality initiatives. For more information, visit www.relatient.com.