Healthcare systems and medical groups have been tackling access improvement initiatives to remove historically restrictive scheduling practices and reduce the time it takes to get an appointment.

Many organizations are focusing on opening capacity and implementing guided scheduling to enable scheduling accuracy and patient self-service capabilities.

Often winning the hearts and minds of physicians, nurses, and staff around changing scheduling practices is difficult. Physician practices tend to be very busy places; it can be hard to convince practice leadership that there is an opportunity to improve access or reduce frustrating no shows and late cancellations that lead to unused capacity, ironically caused by long lag times due to poor access.

In our work helping clients transform their access operations, KPMG has found that one of the most valuable ways to change people’s minds has been by providing them with a picture of what is really happening with their time. From better understanding provider allocation of time to identifying how open or fractured a specialty’s or practice’s scheduling templates are, data-driven insights tend to move the needle on convincing people there is real opportunity to improve performance. Quantifying the dollar value of the opportunity can help fund access transformation engagements and engage physicians to drive change.

KPMG offers an access analytics platform built using Tableau that ingests historical* scheduling data from any practice management system and produces dynamic dashboards to drive insights into unmet demand, latent capacity, and the associated opportunity. The insights are built from the lowest level of appointment information so you can reconstruct what happened in a specific slot on a template, or how an appointment changed.

Insights are provided first at a summary level to point organizations in the direction to where greatest opportunity exists. From there you can drill down and/or filter on many different data elements to inform prioritization and re-design efforts.

### Examples of opportunities and challenges detected via access analysis

- **43.4%** of provider templated session time is filled with patient visits
- **While still having...**
- **44.7%** of the time goes unused due to blocked time and appointments not completed or scheduled (future slots)
- **Having...**
- **21 day(s) media lag** time for new patient visits and losses per year of up to...
- **119K** potential visits due to demand opportunity
- **380K** potential visits due to access opportunity
- **143K** potential visits due to provider schedule optimization
- **For a total opportunity of...**
- **642K potential additional visits per year** representing an increase of...
- **25.6% volume increase**

*Typically, at least one and up to three years of data is ideal for analytics purposes

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Understanding demand opportunity

KPMG defines demand opportunity as recoverable appointments that were canceled or lost due to manageable or avoidable reasons. For example, patient driven cancelations or no shows that are recoverable by reducing “lag” times for appointments, improving appointment reminder processes, or by offering patients transportation services. Provider “bumps” can also lead to lost patients and can be recoverable through improving front-end revenue cycle or improving flexibility for load balancing patients across providers.

The access analytics platform enabled by Tableau allows you to model the financial impact of recovering a portion of those lost, canceled or no-show appointments, based on assumptions of how much you might be able to recover and your average reimbursement rate. You have the flexibility to model at an overall level or at a specialty group level.

Demand opportunity—Potential recoverable # appointments by specialty group

Demand opportunity—Potential additional revenue ($) by demand opportunity category

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KPMG ambulatory access analytics—It’s about the data
Uncovering capacity drivers

KPMG looks at optimization opportunity as places where unavailable time on scheduling templates could potentially be converted to available patient-facing time. For example, time blocked by providers for meetings, travel time, telephone time, and chart review are important to the operations of the practice but could potentially be optimized to create more time to see patients. Similar to demand, capacity opportunity can be looked at with different views—e.g., by specialty or provider type.

Optimization opportunity—Potential additional appointments by manageable reason

Exploring the data

There are multiple dashboards that have been developed to help you explore your scheduling data to see impacts of current schedule design and practices on your accessibility. Some examples include:

- **Provider Schedule Optimization**: Shows what physicians are doing in their schedule when they are not seeing patients, analyzes existing, templated time

- **Provider Access Opportunity**: Compares total available time on a schedule vs scheduled time; can help to identify sub-optimal scheduling practices

- **Encounter Analysis**: Shows what is going on with your encounters including what is driving cancelation rates by patient type or practice; provides a view by department/provider of what is happening with their schedules

- **Utilization Analysis**: Places providers into 1 of 4 quadrants based on their percent of time available vs percent of time filled; e.g., demonstrates who has reduced patient access because they offer very little time and are seeing few patients
Conclusion

Often, redesigning templates and optimizing scheduling practices can improve patient access and give providers a better quality of life. With analytics to inform decision-making, your organization can take the guess work out of what is really driving access performance and begin to work toward sustainable change.