By offering to remind patients of upcoming appointments via text message rather than a phone call, Vanderbilt Medical Center has proven that communication through patients’ preferred channels can increase response rates.

Through its decade-plus partnership with West for the delivery of voice call appointment reminders, Vanderbilt had experienced a consistent confirmation rate of approximately 30%. This means that upon hearing the phone message, 3 in 10 patients would press a button on their keypad to confirm their appointment. Allowing for patient preference in appointment reminders has increased response rates across the board. Since giving patients the option to receive a text message instead of a phone call, confirmation rates have reached 55% among those who have opted for a text. Now that patients with a preference for text have been removed from the voice group, confirmation rates among the voice group are now up to 37% - a 23% higher confirmation rate than the historical average for those patients.

When reflecting on the gap between text and voice confirmation rates, Brant Smith, Health Systems Analyst with Vanderbilt’s Capacity Management team, attributes the success of text messages to their extended shelf life.

“Answering a live phone call gives the patient one shot to confirm or cancel their visit,” says Smith. “On the other hand, texts can be stored and remain on the patient’s phone until it’s convenient for them to take action and respond.”

**RAPID ADOPTION OF TEXT MESSAGING**
After the first month of availability, 10% of appointment reminders to Vanderbilt’s patients were delivered via text. Seven months into the program, and thanks to
the efforts of Director of Capacity Management Paul Schmitz and other key team members involved in the system-wide implementation, Smith notes that text now accounts for 28% of all appointment reminders. Rather than opting every patient in on a mass level, Vanderbilt prefers a more organic, patient-driven approach to opt-in. Schedulers consult with patients on an individual basis to help them select a preference for how they will receive appointment communications moving forward.

“‘We’re getting good results because our patients are making their own choice on how to be reminded,’ says Smith. ‘It’s important not to push text too aggressively or try to steer patients in that direction based on demographic assumptions. The decision to receive text vs. phone reminders is truly a matter of individual preference, and embracing that idea gives us the best opportunity for success moving forward.’”

Vanderbilt’s default communication is a phone call to those patients who have not been asked a preference. As schedulers continue to work with patients to set their preferred communication method, the percentage of appointment reminders delivered via text will grow. Smith also anticipates seeing higher confirmation rates among the voice group, as the patients least likely to respond to that medium move to their preferred text communication.

**MORE CONNECTIONS WITH PATIENTS**

Another interesting metric Smith has examined is the number of patients who go untouched through each communication method. Voice calling efforts have shown that approximately 10% of patients who should receive a voice appointment message never receive that message. These deliverability limitations can be attributed to out-of-order phone numbers, busy signals, etc. - challenges that are largely beyond the control of Vanderbilt and West. In some cases, patients simply may not answer the phone. In contrast, only 5% of text messages do not make it to their intended recipients (due to unavoidable carrier errors). In future text notifications, West will further combat deliverability challenges by attaching a “fallback” feature to outbound text messages. When West receives notice that a text didn’t reach the patient, the system will send a voice call as a backup to ensure the message is heard.

**INCREASED ACCESS TO CARE**

Vanderbilt’s increased appointment confirmations from text reminders have been accompanied by an equally significant jump in cancellations. Where voice call reminders in years past typically resulted in a 2% cancellation rate, that figure for text messaging is 4%. In Vanderbilt’s case, cancellations are noted in their Epic system using an auto cancel feature. Staff can run reports indicating who needs to be contacted to reschedule their appointment and which patients can be offered the newly-opened appointment slots. If handled appropriately by the staff, these cancellations can be a positive thing, opening up opportunities for high-priority “wait list” patients to have quicker access to care.

“Cancellations are very valuable to us in terms of both our bottom line and overall patient access,” says Smith. “We would rather the patient tell us that they aren’t coming than give no indication and ultimately no-show. For our wait list patients, offering an earlier appointment time is an opportunity to extend our care beyond the exam room and into the scheduling process.”