

Scheduling reminders are best aimed at those patients who are least likely to attend

PROBLEM:

Attending preventative care appointments such as screenings and annual check ups improves patient health. But, patients often miss these appointments. Our goal was to understand which patients should be targeted for outreach by telephone and MyChart messaging.

INTERVENTIONS:

We (1) built a model to predict patients' likelihood of scheduling their preventative care appointment (closing a gap), (2) based on this, divided patients into risk quartiles and randomized to intervention or control and (3) rang (if no MyChart) or MyChart messaged the intervention group.

Example phone script

"Hello, my name is Jenny. I'm calling from the Wythe Primary Care. Is Kate available? I work on the appointment scheduling team and our records show you are due to come in for a yearly check-up. Your last physical was completed on May 1st, 2018. This yearly check-up is covered by your insurance plan, BCBS. I can help you schedule an appointment. Do you have a few minutes now?"

RESULTS:

Both interventions - MyChart and Phone - significantly improved gap closure compared to the control. MyChart is likely more effective, though the groups were slightly different. The phone intervention was most effective for the 'highest risk' group (the group least likely to close a gap on their own). Resource-constrained systems should prioritize phone reminders for this group.

