

How Can Your RHC Stay Competitive?

Transforming our clinics to be excellent

Have you looked around lately? Have you taken stock? Is there a new walk-in clinic in your service area? Are you having an increase in no-shows? In the RHC economy we are concerned about the allowable costs of providing care and the number of face-to-face encounters, right? Our cost-based reimbursement does help us keep our heads above water, but it does very little in helping us stay competitive and preventing outmigration. Outmigration happens when our patients leave our rural service area to seek care in a larger adjacent market. One reason is because we as the RHC community aren't staying relevant. We love our communities and are committed to them, but we don't realize that our patient demographics and the expectations of our patients are changing. How can we be more competitive?

Be more patient-centric

Yes, we care about our patients. But, we don't always provide care in the way that our patients want to receive care. Or in the way that meets their expectations. We do it our way. We need to look at our RHCs through the lens of our patients and not just through our traditional care lens. Our patients are now healthcare consumers—even poor, rural ones. We need to create an environment that is welcoming and accommodating to our patients. We cannot afford to develop or tolerate negative or condescending opinions about our patients if we want to help them and ourselves. We need to meet our patients where they are. We also need to realize that we need patients as much as they need us if we are to stay viable. Create an environment of respect, understanding & accommodation.



Understand your patient demographics

Did you know that Rural America is seeing an increase in working single mom households with children? More and more of our patients are working poor families with time, transportation, and financial constraints. There is incentive for that working mom to take her kids to the new walk-in clinic 20 miles away after work because she cannot afford to lose several hours of minimum wages to schedule an appointment during business hours if our RHC is only open from M-F, 8:30 to 4:30. Often, that no-show is actually a patient who scheduled an appointment with us but was able to be seen sooner somewhere else. What if 40% of our county has less than a high school education but we require them to complete five pages of paperwork at each visit? Do we understand the needs of our patients? Pulling in census data as part of your annual evaluation can help identify changes in your patient demographics and help you adapt your provision of care to meet the challenges.

Dare to do things differently

Convenience drives almost everything we as a society do? Rural America is no different. Patients, younger providers and even payers are interested in non-traditional, extended patient care hours. You may have seen in the news where payers are partnering with national drug stores to provide more convenient, efficient care models. We can offer our patients that same convenience and efficiency when we transform our RHCs into practices that accommodate and attract healthcare consumers. It means thinking of ourselves and our patients differently. It means developing efficient clinical workflow, creating schedules that work for patients, and engaging our community. It means daring to do things differently.

Be Excellent

As RHCs we have a lot of disadvantages. However, we can strive to be excellent. Patients will not choose to drive 25 miles to the doc-in-the-box after work if we are the best game in not only the town but the county. We can choose to be the best in what we do and how we do it.

Patty Harper

InQuiseek Consulting

pharper@inquiseek.com