clearstep

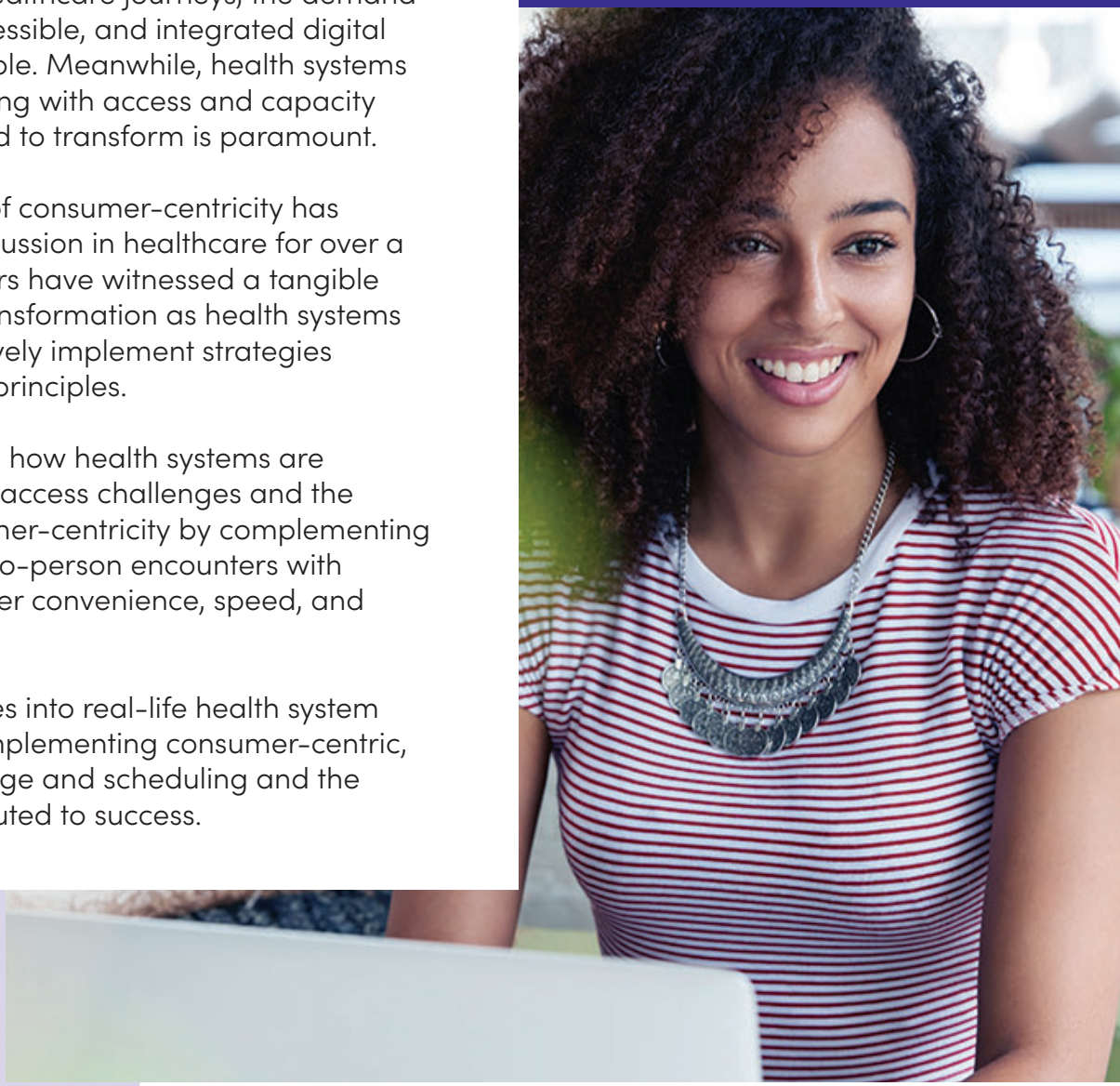
# 2024 Market Adoption Report

Consumer expectations are increasingly influencing the healthcare industry. As patients seek more control over their healthcare journeys, the demand for immediate, accessible, and integrated digital services is undeniable. Meanwhile, health systems are acutely struggling with access and capacity issues, and the need to transform is paramount.

While the concept of consumer-centricity has been a topic of discussion in healthcare for over a decade, recent years have witnessed a tangible and noteworthy transformation as health systems have begun to actively implement strategies aligned with these principles.

This report explores how health systems are responding to their access challenges and the demand for consumer-centricity by complementing traditional person-to-person encounters with digital tools that offer convenience, speed, and personalization.

Additionally, it delves into real-life health system success stories in implementing consumer-centric, automated self-triage and scheduling and the factors that contributed to success.



# Health Systems Market Adoption Of Online Scheduling and AI Virtual Assistants In 2024

## Inclusion Criteria

A cohort of 647 health systems from Definitive Healthcare's complete list of U.S. hospitals and health systems was curated using the following criteria:

- 3+ hospitals and $250M in net patient revenue.
- Hospitals or regional systems in an Integrated Delivery Network (IDN) with a shared, consolidated web experience were only counted once.
    - *e.g., individual Providence Health markets were counted only once since the whole IDN's digital experience is consolidated on providence.org.
- IDNs with distinct web experiences for each hospital/system were counted individually.

## Research Approach

Clearstep analyzed the websites of each of the 647 health systems to document the following in relation to digital self-service capabilities:

1. How many have enabled single- vs. multi-specialty online scheduling or neither?
2. How many have implemented a chatbot/ virtual assistant on their website and/or web applications?
3. If a health system has implemented a chatbot, is it used for:
    - COVID-19 self-triage (i.e. a temporary and narrowly-focused symptom screening and navigation tool)
    - Self-triage for any symptom (i.e. digital self-triage for any combination of symptoms or clinical conditions to route patients to the right point(s) of care across the health system)
    - Patient Services support (i.e. administrative, non-clinical workflows that help people find information, doctors, prescription support, billing information, etc.)

## Adoption of Online Scheduling

**2024**
**75%** for at least one specialty
**24%** for multiple (3+) specialties

**2023**
**74%** for at least one specialty
**20%** for multiple (3+) specialties

**2022**
**56%** for at least one specialty
**14%** for multiple (3+) specialties

## Adoption of a Self-Triage Solution

**2024**
**7%** with 1% of that being COVID-only triage

**2023**
**9%** with 4% of that being COVID-only triage

**2022**
**11%** with 7% of that being COVID-only triage

## Adoption of a Patient Services Chat Solution

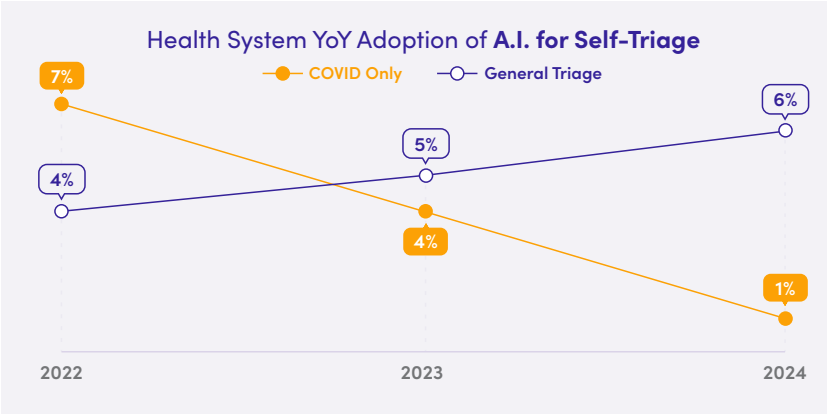
**2024** **16%**

**2023** **15%**

**2022** **11%**

Our analysis shows that the adoption of online scheduling has slowed in 2024 compared to prior years—from 56% in 2022 to 74% in 2023 and a slight increase to 75% in 2024. These figures underscore the larger shift towards digital transformation within health systems, driven by consumer demand for more accessible healthcare services and the efficiencies it brings to healthcare providers.

Adoption of multi-specialty online scheduling (defined as at least 3 specialties) has shown notable growth. From 14% in 2022, there was a jump to 20% in 2023 and a further increase to 24% in 2024, indicating a move towards more comprehensive online scheduling systems that cater to a wider range of healthcare needs. Growth for multi-specialty online scheduling also indicates that health systems are focusing significant effort toward standardizing scheduling templates on the backend. This is generally a prerequisite for enabling online-self scheduling.




The proportion of self-triage solutions dedicated solely to COVID-19 decreased significantly from 7% in 2022 to 4% in 2023 and then to 1% in 2024, reflecting the shift in focus from pandemic-specific solutions to more generalized self-triage systems.

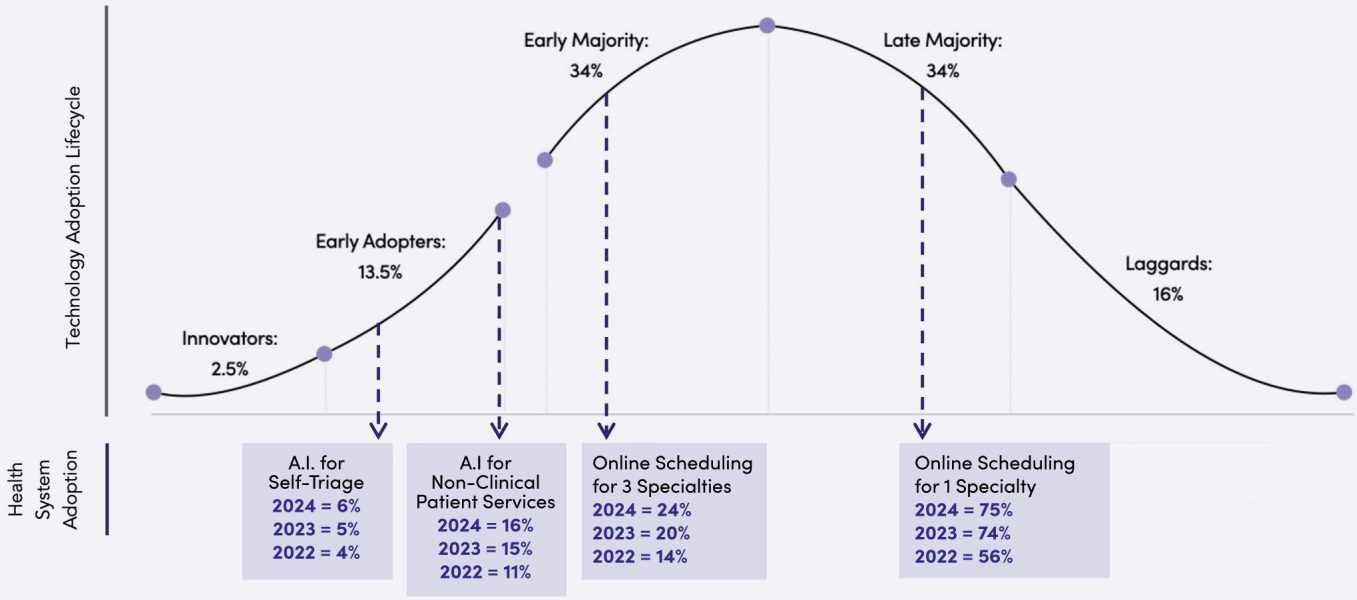
On the other hand, the adoption of generalized self-triage continues to steadily increase—4% in 2022, 5% in 2023, and 6% in 2024. As online self-scheduling grows, so too does the need to equip patients with self-triage and navigation tools to understand their care options.

The adoption of patient service (i.e. non-clinical) chat solutions has consistently increased from 11% in 2022 to 15% in 2023 and then to 16% in 2024. This growth underscores the rising preference for immediate digital communication between patients and healthcare providers, offering a convenient way to inquire about services, resolve issues, and receive support.

# Analyzing 2024 Patient Services Chat and Self-Triage Adoption Against the Technology Adoption Lifecycle

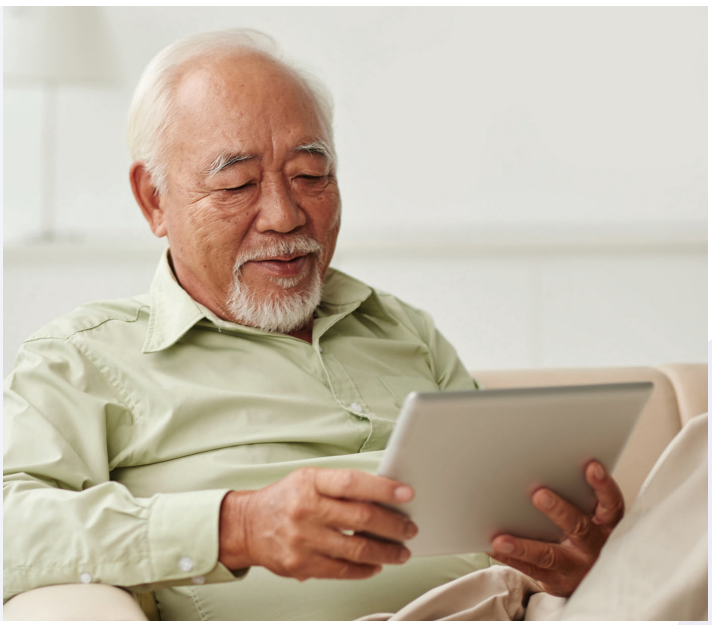
Market Adoption Report

## A.I. for Triage + Navigation is Following The Adoption Curve of Predicate Technologies




### Category Definitions

- **Innovators:** Eager to adopt new tech, don't require established ROI proof points.
- **Early Adopters:** Innovative but make selective purchasing decisions; often key opinion leaders.
- **Early Majority:** Risk-averse, look towards early market for feedback, need ROI proof.
- **Late Majority:** Skeptical with less financial flexibility.
- **Laggards:** Averse to change.



# What Does This Mean?

### Digital Engagement is Growing

Across the board, there's an uptick in adopting digital solutions in health systems, albeit at different rates. This growth suggests a broader trend towards digitalization in healthcare, driven by the need for efficiency, patient satisfaction, and possibly competitive pressures.

### Diverse Adoption Rates Reflect Prioritization and Challenges

The varying rates of adoption reflect the complex decision-making landscape in healthcare technology adoption. Factors such as perceived value, implementation challenges, costs, and shifting priorities play significant roles.

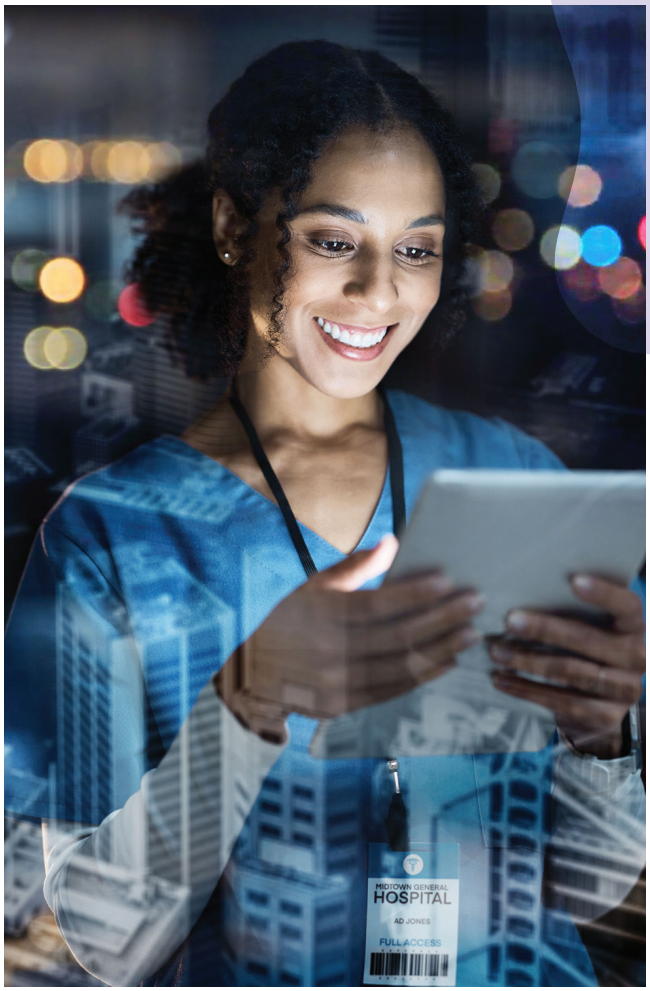
### Potential for Increased Integration

The growth in multi-specialty online scheduling and patient chat solutions, combined with a shift away from COVID-19-only self-triage, suggests increasing opportunities for integrating these technologies for broader applications.

### Prioritization of the Infrastructure Needed for Consumerized Care

Enabling online self-scheduling is more challenging than it seems. Health systems often have to endure painstaking efforts to standardize visit types and agree upon the logic that qualifies a patient for every visit type. Gaining alignment and instituting these standardizations can take many months for a single specialty type.

The tremendous growth in single and multi-specialty online scheduling in the last few years shows that, even though we may not see it so clearly, health systems are working hard to enable downstream digital, consumer-first, self-service initiatives.




### Reflects Response to Patient Needs and Market Dynamics

The data suggests health systems are steadily responding to patient demands for more digital engagement options—and possibly to competitive dynamics—as they invest in technologies that promise better access and convenience.

Overall, the data highlights health systems' enthusiasm for innovation but also their caution regarding perceived challenges. As digital triage and care navigation experts, we're aware of these challenges and assist organizations in navigating them. Our experiences working with health systems reveal how digital triage can lead to meaningful outcomes.

# From Challenges to Wins: Customer Success with Digital Self-Triage

### Florida Health System

After strategic digital self-triage implementation, they were able to:

- ✔ Divert 1000+ unnecessary calls from their nurse triage call center within the first two months of launching their COVID-19 navigator.
- ✔ Transform their employee health screening process.
- ✔ Completely eliminate step one (call #1) of what was typically a two-step process. Prior to implementing the technology, employees had to call to receive a code for testing and then call back after testing to provide additional details. By eliminating step one, they enabled their call center to focus primarily on supporting employees with step two.

### North Carolina Health System

After strategic digital self-triage implementation, they were able to:

- ✔ Reroute 73% of patients to more appropriate levels of care.
- ✔ Deflect 45% of patients from their urgent care and emergency room websites to lower acuity care levels.
- ✔ Generate 4x ROI in less than 10 months.

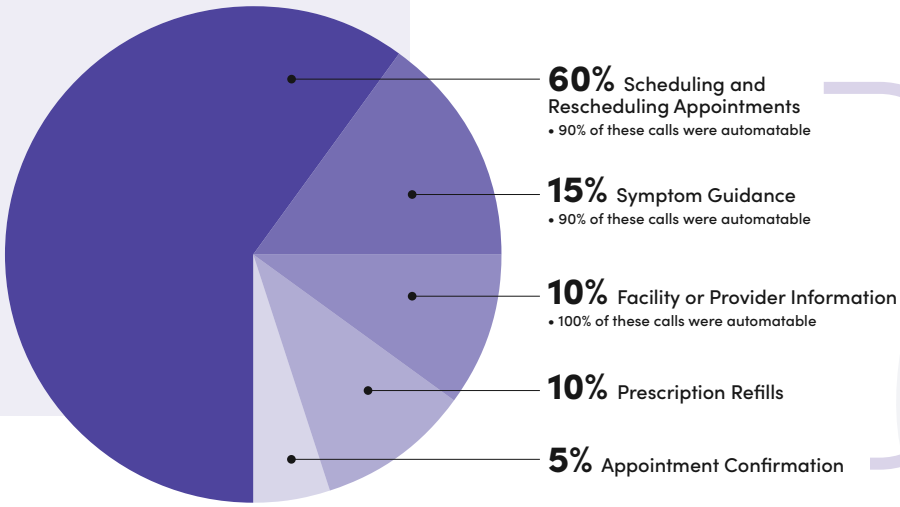
### Large Independent Medical Group in Illinois

After strategic digital self-triage implementation, they were able to:

- ✔ Engage with 1000+ patients via the platform within the first few weeks.
- ✔ Attract new patients (approximately 40% of the patients who used Clearstep).
- ✔ Convert 20% of encounters into booked appointments.
- ✔ Deliver >10x ROI.

### Call Center Time Savings

Reasons for calling and ability to be automated:




In total, approximately **78% of all calls were automatable** via digital self-triage + care navigation technology.

NAVIGATING IMPLEMENTATION:

# Roadmap to Effective Digital Self-Triage Deployment

## Executive Buy-In

One thing each of the aforementioned case studies has in common is that multiple chief executives supported and advocated for the product's needs.

A high level of commitment from the top ensures that initiatives receive the attention, resources, and prioritization needed to overcome obstacles and achieve successful implementation.

Without such leadership endorsement, projects risk lacking direction, suffering from underfunding, and failing to gain the necessary traction among staff and stakeholders critical for transformative change.

## Small, Focused Team With Authority to Communicate and Make Decisions Rapidly

Clinical self-triage and navigation tools require implementations that touch numerous aspects across the organization, including clinical/clinical informatics, digital marketing, design, brand, product, patient experience, IT, EMR, and analytics.

Thus, having a single, designated stakeholder (or committee of at most three individuals) with the authority to make decisions allowed for rapid implementation times (9-30 days) is crucial.

Without a designated stakeholder, organizations fall prey to analysis paralysis or muddied communications stemming from too many conflicting opinions and priorities. The small team composition facilitates clear and direct communication channels within the team and with other departments affected by the implementation.

Additionally, empowering such a focused group with the authority to make crucial decisions on the spot significantly reduces bureaucratic delays, enabling the organization to adapt quickly to changing healthcare landscapes and patient needs.

## Innovation Group Resourced with Budget and Autonomy

The full potential of innovation teams within health systems often remains untapped due to the lack of autonomy and dedicated financial resources. Many health systems operate under traditional procurement processes, which can be lengthy and bureaucratic, stifling the agility needed to effectively test new ideas and technologies.

However, from our experience, when procurements occur through an innovation group that is well-resourced and autonomous, they can bypass the usual procurement bottlenecks and move quickly.

## Close Collaborative Nature to Product Development

The close collaborative nature of product development, as evidenced in the case studies, highlights a strategic approach where organizations first adopt out-of-the-box capabilities to secure immediate value and impact.

This initial step is crucial for gaining quick wins and demonstrating the potential of new technologies or processes to stakeholders. However, the journey doesn't stop with implementation.

The subsequent phase involves iterative improvements and refinements made through a collaborative and empathetic process that ensures that innovations are not just quick fixes but are sustainable and can grow with the organization's changing needs.

## Agile Approach to Product Development Focused on the Iterative, Continuous Delivery of Value

With so many stakeholders, it is easy to collect an ever-increasing list of requirements and desires. This is why having the aforementioned small, focused group is critical to success. In each case study, the team succeeded by focusing on delivering a specific minimum viable product (MVP).

The initial focus is not on delivering a feature-complete solution but rather on getting something of value out to patients, establishing and collecting baseline data, and continuously monitoring and improving key performance indicators (KPIs) with each subsequent iteration. Using this method, all of the healthcare organizations mentioned above were able to launch our self-triage technology in less than 30 days.

This agile approach contrasts traditional "waterfall" methodologies, which often impose rigid timelines and arbitrary deadlines. Such rigid structures can force teams into making compromises that, while expediting delivery, introduce technical liability and potentially undermine the project's long-term viability and success.

In contrast, organizations that embrace continuous delivery and improvement are better positioned to see sustainable, incremental gains with each development cycle.

## Buy-in from Marketing and Digital Teams

Achieving the full potential of self-service triage and navigation solutions hinges significantly on their visibility to patients—underscoring the need for robust buy-in from marketing and digital teams. Their expertise and resources are invaluable for promoting the solutions effectively and optimizing their placement on digital platforms where patients are most likely to engage.

For example, one healthcare system mentioned above leveraged its marketing and digital teams to launch targeted outreach campaigns that achieved the highest email open rates in that health system's history.

## Well-Defined Problems and Intentionality with the Patient Journey

Healthcare systems with clearly defined challenges to solve are more adept at creating patient-centric entry points into these digital tools.

By understanding their patient population's specific needs and behaviors, these systems strategically placed access points into virtual assistants where they would have the most impact. This was a blend of broad and general accessibility options and targeted placements that aligned with particular patient journeys.

A prime example of this approach is using strategies to manage patient flow to often overburdened emergency rooms (ERs) and urgent care centers (UCs) with cases that could be handled more appropriately—and cost-effectively—elsewhere.

For example, the health system from North Carolina mentioned above ran A/B test experiments and discovered that 61% of the time, their patients incorrectly estimated their level of severity based on their triage results and did not know where to find care (31% underestimated and 30% overestimated) —highlighting the need for not only self-triage but proper care routing.

In response, they identified six unique entry points for self-triage technology: three on its public-facing website and three within its authenticated app. The messaging or copy accompanying these entry points was carefully crafted to resonate with individuals contemplating whether their medical concern necessitated an ER/UC visit, gently guiding them towards considering alternative care options through the triage tool.

The result was that 45% of all traffic was deflected from their urgent care and emergency room websites to a more appropriate level of care, helping to alleviate pressure on critical, resource-constrained ER and UC services.

Similarly, by understanding its patients' needs and intents, the Florida Health system was able to divert thousands of unnecessary calls from its busy nurse triage call center during the throes of the COVID-19 pandemic, a time when healthcare resources were stretched thin and timely access to medical guidance was crucial.

## Attention to Recommendations from Market-leading Solutions

Lastly, these healthcare organizations saw digital self-triage success by trusting the recommendations from the team behind a market-leading solution.

Market-leading solutions have been implemented in various ecosystems nationwide, leading to a range of natural experiments and learnings. These implementations yield valuable learnings on patient behavior, system integration, and operational efficiencies.

Instead of relying solely on external consultants, whose insights may lack access to the data already gleaned from existing deployments, healthcare systems could leverage market leaders' rich, data-driven recommendations. Such an approach promises more informed decisions and ensures that implementations are grounded in proven strategies that enhance patient care and operational efficiency.

Healthcare organizations that overlook the insights offered by market-leading digital health solutions in favor of consulting advice may miss out on critical, data-informed strategies for successful technology adoption.

The Clearstep team brings a deep and nuanced understanding of diverse healthcare environments and implementing digital self-triage and care navigation technology within them.

By leveraging our tried and proven insights, you can streamline your digital health initiatives, reduce trial and error, and more quickly realize the benefits of digital health technologies for your providers and patients.

**Connect with us at info@clearstep.health or www.clearstep.health for more information.**

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