Transparency Strategies: Online Physician Reviews for Improving Care and Reducing Suffering

Research indicates that patients are increasingly looking to online physician ratings when deciding where and from whom to seek health care services. To increase transparency and ensure the validity of the data on which their physicians’ reviews are based, several innovative health systems have developed their own physician rating web sites. Providing easy public access to robust patient experience data drives accountability and builds market share.

More American adults than ever are relying on online resources for health information. In a national study published in 2013, the Pew Research Center determined that, within the previous 12 months, 72% of adult internet users searched online for information about health issues. Coincident with this trend has been the proliferation of targeted consumer review web sites, including those for physicians and other health care services, which are readily available and have a direct impact on provider reputation and bottom line.

As with purchasing decisions around products, consumers are increasingly relying on online reviews to make informed decisions about where and from whom they want to receive health care. According to a study published in the Journal of the American Medical Association, 59% of American adults find online ratings to be an important consideration when choosing a physician. Over one-third of those who used online reviews chose their doctor based on positive reviews, and 37% reported avoiding physicians with negative reviews (Hanauer, Zheng, Singer, Gebremariam, & Davis, 2014).

Provider organizations and physicians have expressed concern over the validity and accuracy of online reviews. They worry that views reflecting a non-representative sample of patients could lead to unfair bias, they are unaccustomed to being reviewed in this manner, and they feel powerless to participate in the conversations that others are having online about the care they provide.

Recently, several innovative health care systems have implemented transparency strategies to take control of their “brands” by building their own online physician-review web sites. These sites are already having a positive effect on the patient experience—and on overall business—at these systems and have become a cornerstone of their patient-experience improvement efforts.
Overview

Patient engagement with online physician ratings that are not statistically valid concerns providers. Low numbers of reviews on third-party sites, as well as potentially fraudulent reviews, can lead to an inaccurate portrayal of care quality. Further, providers are limited in their ability to address false claims of substandard care because of Health Insurance Portability and Accountability Act (HIPAA) patient-confidentiality regulations.

Despite physician wariness of online reviews, several pioneering health care organizations understand the value of the online medium and are using it to promote internal and external data transparency. They are publishing their physicians’ quantitative and qualitative patient experience data on their own web sites. Every rating and comment—positive, neutral and negative—is posted and ascribed to the physician who delivered care. The strategy gives these organizations more control over the scientific validity of the data that appear online and ensures that patients are getting an accurate picture of quality of care. This, in turn, increases physician confidence in the data and promotes their engagement in improvement efforts.

The most critical step in the progression to full, external transparency of physician performance outcomes is the expansion of the volume of data being collected. By surveying entire patient populations rather than a random sample, organizations are able to paint a picture that is truly reflective of the patient experience that can then be examined through multiple lenses to identify improvement areas. The robust data sets can then be shared internally to foster understanding, insight and accountability among physicians and managers and externally to provide patients with valid information to help in their decision-making processes.

Commitment to data transparency is more than reputation management. It drives improvement by motivating an epidemic of empathy among providers to deliver the best possible care. Physicians are committed to practicing good medicine and to helping their patients. They embrace valid and reliable data that help them better understand how they are doing and how to improve. In addition, data transparency reduces patient suffering by engaging and enabling patients to be active collaborators in their own care journeys.

The Value of Transparency in Patient-Centered Care
Transparency through online reviews mitigates avoidable patient suffering by empowering patients to make the best choices they can for their care. Selecting a physician can be challenging even for a well patient, and can be fraught with anxiety for a patient seeking care for illness or injury. Being transparent with patient experience data honors a patient’s right to have robust, reliable, easy-to-access information to make informed decisions about care. It is a proactive strategy to connect with patients and treat them with compassion and empathy before they even make their first appointment.

Along with growing market share by attracting new patients, a commitment to data transparency is a potent means of retaining existing patients. A recent analysis of more than one million patient records found that low confidence in care providers was the leading driver of negative ratings of their current physician/practice (Press Ganey, 2013). Data transparency addresses this risk factor directly by building credibility and fostering trust and confidence in the organization and the physicians profiled on the organization’s web site.

When a patient searches online for physician reviews, the web site with the most reviews will be listed first in the search results. Organizations that have already committed to capturing the voice of their patients through patient experience surveys have a wealth of reliable, valid data at their disposal that trump what any consumer review web site can provide. Health care organizations that consistently update their web sites with the most current qualitative and quantitative physician data will drive online traffic directly to their own pages rather than less valid sources.

In December 2012, the University of Utah Health Care in Salt Lake City became the first health care system in the U.S. to implement online physician reviews. The organization’s willingness to tread uncharted waters positioned it as a pioneer and created a strategic and competitive advantage that other organizations have the opportunity to replicate.

**Leading the Way: University of Utah Health Care**

In 2009, Utah’s patient experience scores were unimpressive. Further, low survey volume from mailed patient surveys limited the provider-level feedback needed to help physicians identify areas in need of improvement. At the end of 2010, only 137 physicians in a system of almost 1,200 had 30 or more returned patient surveys—the minimum number for receiving individual provider-level patient experience feedback.

Utah’s leadership team understood that engaging physicians in performance improvement efforts would require increasing the volume of returned surveys. To this end, the organization implemented electronic surveying (eSurvey) in January 2011. The introduction of eSurvey led to a 320% increase in survey returns as well as a dramatic increase in the number and richness of patient comments, both of which were instrumental in eliminating objections about the statistical validity of the data. However, it took an escalation in data transparency—from physicians receiving their performance data privately to it being disseminated internally to all physicians—to truly make inroads into patient experience improvement.

With full internal transparency, physicians were able to compare their performance to that of their colleagues, which in turn led to conversations with physician leaders about strengths and weaknesses, engagement in improvement efforts and, ultimately, increasing scores across multiple patient experience domains.
During this time frame, Utah physicians were becoming increasingly frustrated with online consumer review web sites that lacked quality control and portrayed a limited, unrepresentative picture of the patient care they provided. The more valid census-based surveying data and thousands of patient comments from more than 60,000 completed surveys annually indicated that Utah patients were highly satisfied with their care.

To represent its high-quality patient experience data to the market and provide patient access to it when selecting a physician, Utah began developing its own online physician review site, which is modeled after traditional online review sites that contain “star ratings” and comments. Specifically, performance scores for each physician from its medical practice survey are converted from a five-level Likert-type rating scale to a rating system of one to five stars for provider-related measures. These scores are then averaged to create an overall Patient Rating score for each physician.

Resolute in its mission to promote full transparency, Utah leadership determined that all positive, neutral and negative comments—except those that might violate patient confidentiality or be considered libelous—would be posted unedited, despite initial pushback from physicians regarding the posting of negative comments.

To work through physician concerns, the web site was built initially on a temporary platform with only internal access. This allowed time for intensive data modeling and testing, as well as time for physician input individual responses to opposition. Guidelines were also established for data management and reporting:

- The Service Excellence team would review all surveys and upload data weekly
- A minimum of 30 annual patient surveys would be required before a physician’s ratings could be posted
- An appeals process was established through which physicians could bring forth their objections or concerns regarding posted comments

In December 2012, the full site went public. Patients could search for information on Utah physicians and find clinical, academic and education information as well as patient ratings and comments.

The impact to date has been considerable. Prior to publishing online reviews, Utah’s physician-profile page views totaled 32,144. By March 2014, monthly page views had increased nearly fourfold to 122,072. Physician performance on patient-experience measures also improved. The system’s overall satisfaction rating increased steadily from the bottom to the top quartile of Press Ganey’s national database, and the percentage of top performing physicians has increased dramatically as well.
Inspired by the Pioneer: Piedmont Healthcare

Since its implementation, Utah’s online physician review site has become a model for other U.S. health care organizations. For example, inspired by Utah’s example, senior executives at Piedmont Healthcare in Atlanta convened in late 2013 to discuss an action plan, which led to Piedmont becoming the second health care system in the nation to adopt transparency.

As an organization, Piedmont has been active historically in external data transparency, publishing clinical quality statistics for each of its hospitals on its web site. With respect to internal transparency, the organization has been rank-ordering its physicians by their patient experience performance for several years. The health system’s leadership considered online physician reviews to be the logical next step in the transparency journey, as a way to increase community visibility, promote physician accountability, drive additional physician volume and reinforce Piedmont’s commitment to patient-centered care.

In January 2014, Piedmont approached its clinic physicians to educate them about the initiative and gain their support. As with Utah, Piedmont would post performance data for physicians with at least 30 returned patient surveys annually. The large volume of returned surveys associated with Piedmont’s use of eSurvey not only ensured that all of the organization’s employed physicians would meet that minimum threshold, but also fostered acceptance of the data’s validity (Piedmont’s non-employed physicians are not yet utilizing eSurveys, so the majority of these physicians currently do not meet the minimum threshold of returned surveys needed to upload data).

Rather than posting performance results from patient experience data the organization had amassed up to that point, Piedmont chose to alert patients through a notation on outgoing surveys that their responses might be uploaded and requested their permission. Even with this intentional delay, Piedmont was able to launch its online physician review site in April 2014—only four months after introducing the initiative.

Post launch, Piedmont observed a 200-300% increase in web traffic on its physicians’ profile pages and the reviewers have noted comments indicating patients are making appointments with particular physicians based on positive reviews. There has also been marked impact on the organization's visibility in internet search results, as the site now comes up first in online searches for Piedmont physicians and offers significantly more reviews than any of the third-party review sites.

Since going live with online physician reviews, Piedmont physicians have truly become owners of their data and have access to patient experience coaches in their practices to discuss patient comments and determine improvement strategies.
Momentum Builds: Wake Forest Baptist Health

Wake Forest Baptist Health in Winston-Salem, North Carolina, went live with its own online physician review site in late May 2014. Prior to implementation, the organization was seeking to infuse its culture with an even greater patient- and family-centered focus, and leadership saw data transparency as a potential catalyst that would accelerate progress toward this goal by engaging both patients and physicians.

Wake Forest Baptist’s patient experience data and comments had always been available to faculty and staff, so the organization was accustomed to internal transparency. External data transparency, however, was more controversial, so faculty at the department level of the organization were asked to decide whether or not they wanted their data published online.

Executive service-line leaders contributed to planning and asked how to share information about the transparency initiative with section leaders and faculty members. As part of their discussions, physicians were assured that a multi-stage comment-review process would be implemented:

- **First review**: Patient Experience team screens all comments and excludes those that are libelous or violate patient privacy
- **Second review**: All cleared comments are sent to ambulatory clinic leaders so they have a wide view of the patient experience and can review comments for their specific areas
- **Final review**: Requests for additional exclusions are sent to the chief medical officer and his team for final review before automated upload is approved

The act of consensus-building helped address concerns and answer questions. Although it resulted in an extended implementation process, the system had nearly full participation with the exception of one small department.

At launch, of Wake Forest Baptist’s 900 physicians, performance data was posted for 375 who had sufficient patient-experience data to be reported publicly. Lack of data, not lack of interest, explains the large percentage of physicians without reportable ratings, according to system leadership. Whereas the University of Utah had transitioned to 100% eSurvey before they went live with their doctor ratings, which increased the number of survey responses that they got drastically, Wake Forest Baptist does not yet utilize eSurvey with 100% of their patients.

While the organization is optimistic about the potential impact online physician reviews may have from a marketing standpoint, the system leaders stress that the primary goal of their transparency efforts is to improve the patient experience. By building engagement and trust between patients and physicians and promoting greater accountability, increased transparency improves the patient experience.
Conclusion
The momentum for patient experience data transparency is growing among health care organizations. Posting physician ratings online has been a positive change agent for those choosing to take the lead.

Early adopters share some common characteristics that have contributed to their preliminary successes:

- A core focus on patient-centered care with data transparency as a tool to enhance that focus
- Access to a robust amount of patient experience data to address physicians’ data validity concerns
- A graduated implementation strategy beginning with sustained internal data transparency prior to public reporting
- Strong executive leadership commitment and communication across the enterprise

As evidenced by these early adopters, organizational culture differences necessarily influence how—and at what pace—transparency initiatives are rolled out internally and launched externally. Carefully considered transparency efforts are quickly bearing fruit by empowering patients to make informed choices and inspiring providers to reduce patient suffering through better care delivery.

References


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