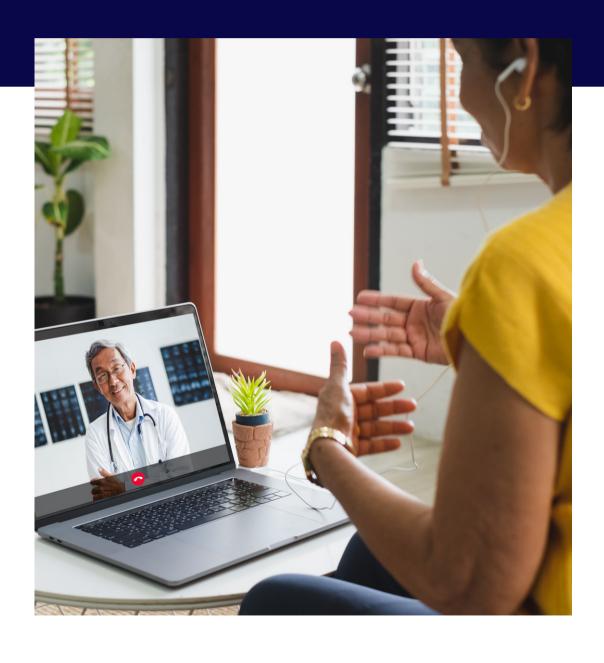
## YOUR GUIDE TO STARTING A SECOND OPINION PROGRAM

EVERYTHING YOU NEED TO KNOW BEFORE YOU CONSIDER A SECOND OPINION PROGRAM FOR YOUR ORGANIZATION







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#### WHAT TO EXPECT

Second opinion programs present an opportunity to promote your existing expertise and where appropriate to convert consultations into inpatient procedures. Offering second opinions alone is usually not a profitable endeavor. Done well, hospitals can expect to break even and have the program fund itself. However, second opinion programs can be a pathway to other direct and indirect benefits for the healthcare organization.

#### Extend Your Brand

Second opinion programs allow hospitals to extend their brand by informing patients beyond their local geography.

#### Attract Top Doctors

Second opinion programs can make your organization more attractive to top specialists whose practice (and potential pocketbook) can be enhanced and expanded by the extended audience an online second opinion may provide.

#### Improve Patient Outcomes

A second opinion consult from a specialist can change the course of a patient's health journey. In fact, a recent study by the Mayo Clinic considering a range of diseases found that 88 percent of original diagnoses were changed or refined because of a second opinion.

#### Build Your Reputation

By promoting your expertise through a second opinion program, your facility will be able to stand out from the crowd.

# IS IT RIGHT FOR ME?



#### Figure Out What You Are Really Good At

When implementing a second opinion program, the best place to start is with a specialization that you are already good at. For some hospitals, this is obvious. For others, it might be worth surveying your patients. It's generally best to focus tightly on one or a small number of divisions or subspecialties.

#### **Get Physician and Staff Buy-in**

The success of any second opinion program relies on your physicians. So as you start planning your program, it's essential to get your providers on board from the beginning. Make sure you answer their questions, address their concerns, and take their perspectives into account as you start planning. Understand and communicate "what's in it for them," to ensure you get their momentum behind you. This may require offering stipends to the physicians who write these opinions.

Almost any hospital can benefit from establishing a second opinion program. However, the success of a program requires a willingness to make some tough choices and engage in focused actions.



#### **Set a Realistic Expectation of Financial Impact**

A second opinion program is unlikely to be a profit center for your hospital. If you expect or require the program to make money from the start, you probably shouldn't invest in a second opinion program. In the long run, the financial impact will likely be positive. It will take time and investment to start, but it does open up an avenue for consults to convert to patients. Depending on your conversion rate, a second opinion program should be a revenue generation engine.

#### **Assess Competitive Environment and Geography**

Second opinion programs are just starting to pop up in more places. So while second opinion programs can indeed increase your geographic reach, one of your competitor's second opinion programs may intrude on your local turf. In some cases, establishing a program early can be a good defense against losing market share.

#### **Understand Interstate Licensure**

Assess your propensity for taking on risks. Licensure is tricky. Unless you are willing to create clear processes and enforce strict practices, you may find yourself and your doctors running afoul of regulations. You will need to engage your legal team early to ensure you remain in compliance.

#### **Commit to a Marketing Plan**

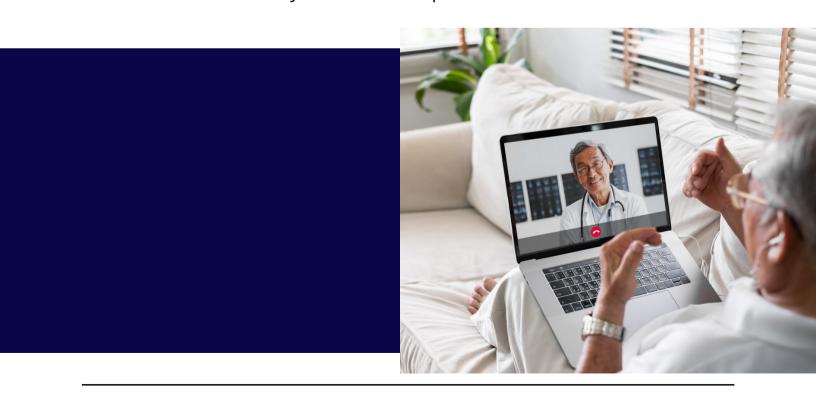
Patients won't use your second opinion program if they don't know about it. As you're getting started, bring your marketing team into the conversation early. A remote second opinion program can differentiate your brand – especially for a specialty or subspecialty you're already known for. Working with your marketing team to clarify your message, develop content, and identify the most effective channels for reaching patients and promoting your program is a basic requirement of any successful program.



One of the initial decisions you will need to make is whether to administer the plan yourself or hire a third-party to handle all or some of the administration. Some hospitals feel it's important to do the administration themselves since this is a core part of the culture of the hospital. Others decide to outsource the entire administration to simply enable their physicians to participate in a second opinion program. There also are some alternatives to keep this administration fluid between the hospital and an available third party.

This decision will have a material financial impact on the program. Third-party administrators generally charge somewhere between \$500-\$800 per case to administer a second opinion program. However, offloading the costs of administration to a third party may be a great way to get started, especially when cases are just starting.

Be realistic about whether you have the required resources.



### COLLECTING PATIENT RECORDS

Securely collecting, organizing, and presenting patient records and cases to your expert physicians is a time-consuming and critical component of second opinion program administration. Unfortunately, some providers still share EHR and test results records manually via faxes or photocopies. Images are often burned onto CDs and couriered. There are newer technologies that make these methods obsolete, but using them requires convincing providers to change their habits.

Consider what you will need to minimize the delay in collecting paper records and the time consumed by your staff or administrator correlating them. Once these records are collected, be sure they are clearly presented and available to your expert physicians to enable them to be as productive as practical.





If your hospital is planning on providing second opinions to patients who live outside of your legal jurisdiction in a different state or country, you will need to determine what is required to provide opinions in states where your providers may not be credentialed.

Ultimately, the decision on what risks you are willing to take is up to you and your legal team. This section will provide an overview of today's legal landscape so that you can plan accordingly.

#### **Assess Competitive Environment and Geography**

When the adoption of telehealth increased during the COVID-19 pandemic, the US Federal Government emergency order enabled doctors to consult with patients outside their jurisdiction. That emergency order has since expired in most jurisdictions, leaving us legally "uncovered" in many locations. Recently, there has been a consortium of states that are trying to make licensing in multiple states just as easy as applying in one.

The Interstate Medical Licensure Compact (IMLC) is an agreement currently adopted by <u>30 states</u>, the District of Columbia, and the Territory of Guam that gives providers who want to practice in multiple jurisdictions a streamlined pathway to obtaining licensure. After joining the compact and meeting its requirements, providers and hospitals can provide remote consults and second opinions to patients who live in participating states and territories. But unless your state is a member of the pact, this won't work for you. Check <a href="here">here</a> to see if your state is a member.



#### **Assess Competitive Environment and Geography**

Doctors in the United States are licensed within a specific territory or state, not federally. There is a movement to change that legislation (see below), especially with the popularity of telehealth. But in the meantime, most state's medical licensure laws have some exceptions that create room for providers to consult across state lines.

In certain jurisdictions, out of state providers can consult with a physician local to a specific patient. According to the constructs of the law, this consult is exempt from the issue of a physician practicing in a state in which she is not licensed. Requiring the patient to identify a local physician who receives the consult is a common way of extending second opinion care to these jurisdictions.

If your hospital is not located in an area where this exception or interstate licensing exist, you can still provide consults to patients who live locally, who may not find it convenient or expedient to travel to your facility, at least until they are sure you can treat them there.

#### **Coming Federal Legislation**

Several paths are being explored for allowing interstate telehealth on a federal level, including using the power of the United states' federal executive departments, like HHS, the VA, and others.

For example, The Veterans Health Administration, which is the United States' largest integrated health system, currently <u>allows healthcare providers</u> to deliver care via telehealth to veterans in any state using a federal pre-exemption to override state medical licensing restrictions. In the future, similar legislation may also be applied to other executive departments to expand the legality of out-of-state remote consults across the country.

You will likely see more of this occurring in the coming years.



Marketing your program is critical. If you expect that if you build a program, consults will just happen, you will be disappointed. Unless you are willing to take some critical marketing actions, things will progress a whole lot slower than you might expect, costing money and time, and losing precious momentum. You should consider these marketing-related ideas as you roll out your program.

#### **Start With a Specific Service or Subspecialty**

When implementing a second opinion program, we recommend focusing on one or a few specific services or subspecialties your health system is already good at. Piloting your program in a smaller environment will also provide insight into what would work well operationally as you expand the program throughout the rest of the hospital.

#### **Choose Locations Based on Licensing**

Roll out your initial program to locations that have the least licensure risk or that would be most convenient should a second opinion patient wish to become an inpatient or require a procedure. This may make the conversion of an opinion into a procedure more likely, adding to your top and bottom line financials.

#### **Obtain Internal Buy-in**

The success of any second opinion program relies on engaged physicians. As you start planning your program, it's essential to build awareness and get your physicians on board from the beginning. They may have questions about the program, concerns around how it will impact their work, and ideas for making it successful, so make sure you take their perspective into account. Many hospitals provide financial incentives for physicians to participate in these programs.



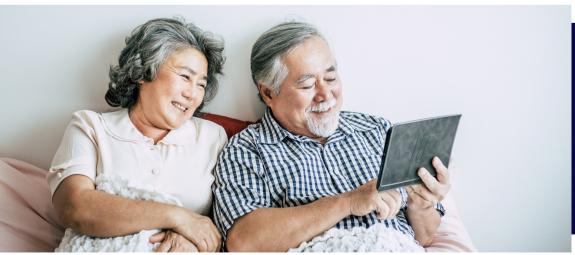
#### **Leverage Physician Word-of-Mouth**

Many of your physicians are already providing remote consults to their colleagues in other organizations. If that's the case, consider giving them talking points about the second opinion program you're building so other physicians can learn through word-of-mouth. Help make it easy to convert these casual consults into true second opinions, aiding both the financial impact of your program and avoiding risky liability.

#### **Publish Blogs and Other Content for SEO**

Patients and their families will do three quarters of their research online in advance of selecting a hospital for their second opinion. That means the people you're trying to reach will determine where they seek elective care through blogs, websites, and social media. Make your credentials and offerings easy to find online and establish yourself as a thought leader so the audience you're trying to reach builds trust in your second opinion program from the beginning.

Publishing content with careful consideration for search engine optimization (SEO) is an important part of any marketing program.





## BUDGETING FOR YOUR SECOND OPINION PROGRAM

As you build your budget for a second opinion program, it's important to consider the technology investment, administrative costs, and reimbursement from payers. This section will help you understand the factors influencing the program's final price tag.

#### **What Other Hospitals Charge**

The average fee being charged for a remote second opinion, based upon publicly available data, is around \$800; they range from \$500 to \$2,500. As you start building your pricing strategy, you can use this information as a baseline. Specialty hospitals with established reputations often charge more. Childrens' hospitals gravitate toward the lower end of the spectrum.

#### Reimbursement

Remote second opinions are generally not covered by insurance, although we expect this to change. As you build your program, consider that you will likely be charging your patients out of pocket for this service.

#### **Technology License**

Unless you hire a concierge that will handle everything on their own technology, you will likely need to acquire a software solution to handle this process. Purpose-built solutions exist. One example is Purview's Expert View with enterprise pricing costing in the range of \$50,000-75,000 per year.

## BUDGETING FOR YOUR SECOND OPINION PROGRAM

continued

#### **Cost of Administration**

Organizations considering a remote second opinion program should build a budget that consider costs such as the following

Annual Fixed Costs		
Personnel	\$150,000	
Technology	\$100,000	
Marketing	\$25,000	

Per Case Fee		
3rd Party Administration	\$500-800	
Physician Stipend	\$500	

There are many things to consider when getting started with a second opinion program. Before you decide to jump in, we suggest the following:

#### TALK TO YOUR COLLEAGUES

Start socializing the idea amongst your colleagues. You may find that some of your staff are especially eager to engage in such a program. Others may see it as just more work. Getting buy-in early will be critical to moving your program forward.

#### TALK TO YOUR DOCTORS

You need physicians to provide the reviews and opinions. Determine what it will take to gain their attention. Determine if stipends will be required.

#### **REVIEW SUBSPECIALTIES**

Subspecialties are a great place to start building your second opinion program, especially for ones that already have brand recognition. Identify which subspecialties could be a good fit for piloting your program.

#### **REVIEW COMPETITORS**

Do your competitors have remote second opinion programs? If so, which subspecialties, patient populations, and geographies do they focus on? Finding the *white space* where they are not competing can be helpful. This type of competitive analysis will help to inform your strategy.

#### **TALK TO VENDORS**

The right solution can help your second opinion program scale while making administration seamless. Before buying or committing to a specific vendor, make sure you review their technology, understand what they offer and what they don't and figure out what role you will need to play.



## CONTACT US!

We are more than happy to help answer any remaining questions or concerns. Please feel free to reach out to us. If you would like to set up a free, no-commitment consult to explore your options, please let us know your availability and we will set something up right away!

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CONTACT US