Title:
ARE PATIENTS ASSIGNED A NEW PATIENT CONCIERGE MORE LIKELY TO PROCEED WITH TREATMENT?

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Objective:
Navigating the health care system can be an overwhelming experience for patients pursuing fertility treatment. By implementing a New Patient Concierge process at a high volume fertility center, we aimed to evaluate if patients who receive additional intervention in the weeks pre and post new patient visit are more likely to move into treatment within the first 90 days post visit.

Design:
Randomized Control Trial

Materials and Methods:
Patients calling to schedule a new patient appointment were randomly assigned to a specialist new patient concierge or a generalist call center representative by a hosted voice solution. Patients assigned to the concierge group received a dedicated coordinator who scheduled the new patient appointment, checked in with the patient pre and post new patient appointment to ensure all questions were answered, and provided direct contact information for key members of the patient’s physician team. Patients assigned to control group were scheduled by a call center representative, and were then sent routine instructions regarding next steps in filling out the new patient portal. Time to treatment and likelihood to proceed with treatment was evaluated.
Treatment initiation was defined as start of a monitored natural cycle, an IUI cycle, or an ART cycle.

Results:
A total of 132 patients in the concierge group and 2105 patients in the control group were evaluated for time to treatment at 30 days, 90 days and greater than 90 days. Our findings showed that while average time to treatment was almost identical between the two groups with an average of 52.2 days for the control group and 53.3 for the concierge group, patients in the concierge group were 73 percent more likely to proceed with treatment within 90 days.

Table:

<table>
<thead>
<tr>
<th>Covariate</th>
<th>Statistics</th>
<th>Level</th>
<th>Control N=2105</th>
<th>Concierge N=132</th>
<th>Parametric P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>TimeToTreatment30</td>
<td>N (Col %)</td>
<td>Control</td>
<td>1902 (90.36)</td>
<td>116 (87.88)</td>
<td>0.353</td>
</tr>
<tr>
<td></td>
<td>N (Col %)</td>
<td>Treatment</td>
<td>203 (9.64)</td>
<td>16 (12.12)</td>
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</tr>
<tr>
<td>TimeToTreatment90</td>
<td>N (Col %)</td>
<td>Control</td>
<td>1699 (80.71)</td>
<td>88 (66.67)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td></td>
<td>N (Col %)</td>
<td>Treatment</td>
<td>406 (19.29)</td>
<td>44 (33.33)</td>
<td></td>
</tr>
<tr>
<td>TimeToTreatment&gt;90</td>
<td>N (Col %)</td>
<td>Control</td>
<td>1613 (76.63)</td>
<td>79 (59.85)</td>
<td>&lt;0.001</td>
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<tr>
<td></td>
<td>N (Col %)</td>
<td>Treatment</td>
<td>492 (23.37)</td>
<td>53 (40.15)</td>
<td></td>
</tr>
</tbody>
</table>

Conclusion:
Our study demonstrated that patients provided with additional support in the weeks pre and post new patient visit increased the likelihood to proceed with treatment. Clinics can increase their overall level of patient-centered care by providing a variety of non-professional services that may be useful to patients. Specialized patient concierge representatives can be trained to normalize patients' experiences, to provide appropriate emotional support, and to ensure that patients experience an inclusive environment. Based on this data, the practice plans to expand the new patient concierge model and provide this service to all new patients. We believe that all clinics, small and large, would see benefits from implementing a similar service for its patients.