



The Patient Partnership Maturity Model:

Five steps to better care

A reconsidered approach that fosters engagement and partnership with patients can provide consistent, authentic, and personalized connections that build trust, encourage alignment among patients and their care teams, and empower patients to make shared, evidence-based decisions. When organizations provide this level of connected care and tailored experiences, they cultivate lasting relationships with patients and reap the benefits of better clinical, financial, and quality outcomes.

At a time when information is available at everyone's fingertips, and when patients have been driven to become more informed consumers of healthcare services, today's patients need healthcare content and digital health technology that empowers them to make educated care decisions. The Wolters Kluwer Patient Partnership Maturity Model will help healthcare organizations identify where they are on the path to providing an aligned and connected patient care experience and assess their strategy and technology needs for moving forward.

Starting with educational and clinical alignment

Hospitals, health systems, doctor's offices, and health insurers are well-positioned to support patient decision-making. Clinical staff already use trusted, evidence-based content to make diagnoses and treatment decisions. To cut through the noise and make appropriate health and treatment choices at the right time, patients need tailored content that follows the same evidence-based rigor that clinicians expect, all delivered in flexible formats that fit their everyday needs. It's not easy to deliver trustworthy, evidence-based content to patients where and when they need it. While nearly all health care organizations have started from the same baseline of patient engagement —providing written materials at the point of care and following up over the phone — most have evolved from this baseline at a different rate. Even after years of developing and honing outreach strategies, many still have not reached a point where engagement fosters a partnership with patients to provide a connected care experience that drives better clinical, financial, and quality outcomes.



Education is an important step in enabling patients to make informed care decisions. But education is just the first step toward providing patient-centered care that achieves sustained behavior change.



This model is meant to serve two key purposes: help healthcare organizations assess the current state of their engagement initiatives, both for individual patient encounters and at an enterprise level, and determine what actions will help empower patients as partners and achieve optimized care in alignment with overall objectives.

Our Patient Partnership Maturity Model traces the path of patient partnership across five steps, from the initial baseline of printed materials to a final step in which patients are confident decision-makers and empowered partners in a personalized, connected care process. This model is meant to serve two key purposes:

- 1 Help healthcare organizations assess the current state of their engagement initiatives, both for individual patient encounters and at an enterprise level.
- 2 Determine what actions will help empower patients as partners and achieve optimized care in alignment with overall objectives.

Recognizing that every organization takes a different path on this journey, the Patient Partnership Maturity Model is meant to be informative and not prescriptive. Just as your ultimate goal is to enable patients to become informed decision-makers, and not to simply tell them what to do, our aim is to help organizations develop the best strategies for their given circumstances.

More isn't better: Build trust in every patient touchpoint

Today's healthcare organizations have realized that the baseline for patient engagement — printed educational materials — is just a first step toward fostering partnership. In order to provide patient-centered care that achieves sustained behavior change through informed decision-making, organizations are supporting more sophisticated ways to interact with patients. These range from interactive voice response (IVR) phone calls to smartphone apps to chatbots.

A 2022 systemic review of studies on shared decision-making in cancer patients found that those who were actively involved in their treatment decisions and those who trusted their physician were **less likely to report decision regret.¹**

Beyond the engagements that healthcare organizations themselves provide, a proliferation of online medical resources has also made it possible for patients to learn about their conditions, possible treatment options, and outcomes long before they make a trip to a provider. More touchpoints and more information, in theory, should improve engagement and lead to more informed decision-making.

However, it's important to note that more is not necessarily better. A 2022 systemic review of studies on shared decision-making in cancer patients found that while those who were more actively involved in their care reported less decision regret than more passive patients, many patients — especially those at a lower health literacy level — felt overwhelmed by too much treatment knowledge and decision-making responsibility¹. In addition, online resources vary tremendously in their trustworthiness, validity, and overall value. Patients with the best of intentions to make informed care decisions can all too easily be led down the wrong path by poorly labeled sponsored content (whose authors have a clear interest in selling a product) or by studies that were quickly debunked but never corrected or removed.

The most effective patient partnership models — those that are able to help organizations improve clinical, financial, and quality outcomes — provide consistent, trustworthy information and support at every touchpoint. Whether digital or in-person, short or long, daily or infrequent, these touchpoints should leverage the same guidance that clinical teams use for evidence-based decision-making and emulate the nurturing experience of a clinical professional who listens with empathy and responds without judgment. The more uniform and seamless these touchpoints and the more empowered patients become throughout this care experience, the more mature an organization's patient partnership model.

Understanding the present patient engagement landscape

Before exploring the Patient Partnership Maturity Model in depth, it's important to understand how patient engagement has evolved from the baseline of written education materials to include a range of patient-facing approaches and enterprise-level support systems and services.

First, let's begin by **defining patient engagement**:

Patient Engagement is the intersection of information, motivation, and access —communicating evidence-based information that is tailored to the patient's means and values by using proven, personalized methods to motivate action.

Next, let's look at the **three common objectives** that typify an organization's efforts to initiate or improve patient engagement.

- 1 Provide patients with the information or knowledge required to understand the steps necessary to manage their health and improve their long-term outcomes.**
An organization may choose to focus on a particular procedure (such as joint replacement surgery) or condition (such as prediabetes) where there is a clear opportunity to improve clinical or financial outcomes.
- 2 Motivate patients to take the actions necessary to manage their health.** Patients who have been empowered to self-manage a care episode or chronic condition are more confident in their ability to make informed, data-driven decisions about their health and well-being. In essence, they become a partner in the care process, not just someone who is treated by a care team.
- 3 Create a healthcare environment to ease the burdens that otherwise inhibit patients from improving their health and accessing the care they require.**
When patients are unable to access care, whether in person or virtually, they put it off. All too often, this can lead to a downstream visit to the emergency department — a high-cost care venue ill-suited to address patients' true care needs.

When we combine the definition of patient engagement with its core objectives, **we can articulate a general goal for the process**:

The goal of patient engagement is to foster partnership with patients in order to provide consistent, authentic, and personalized connections that build trust, encourage alignment between patients and their care teams, and empower patients to make evidence-based decisions with the guidance and support of providers.

Introducing the Patient Partnership Maturity Model

Just as every patient is on a different step in their healthcare journey, every organization is on a different step in their journey toward patient partnership. Some have focused on improving specific patient-facing approaches, such as expanded telehealth offerings or condition management programs. Others have emphasized work on enterprise-facing systems for patient segmentation, analyzing emerging community health trends and determining key areas for outcomes intervention, or reimbursement optimization.





More touchpoints and more information, in theory, should improve engagement and lead to more informed decision-making.

Whatever the case, there is always a greater role for the patient to play in their own care journey, regardless of health status or previous level of individual engagement in their health. This is true both at the point of care and in the many hours of their lives spent away from the healthcare system.

After all, the most effective partnership models are not only able to meet patients where they are and provide the guidance they need within that moment, but also in the broader context of patients' overall health and well-being goals.

The baseline for patient partnership: Initiating patient education

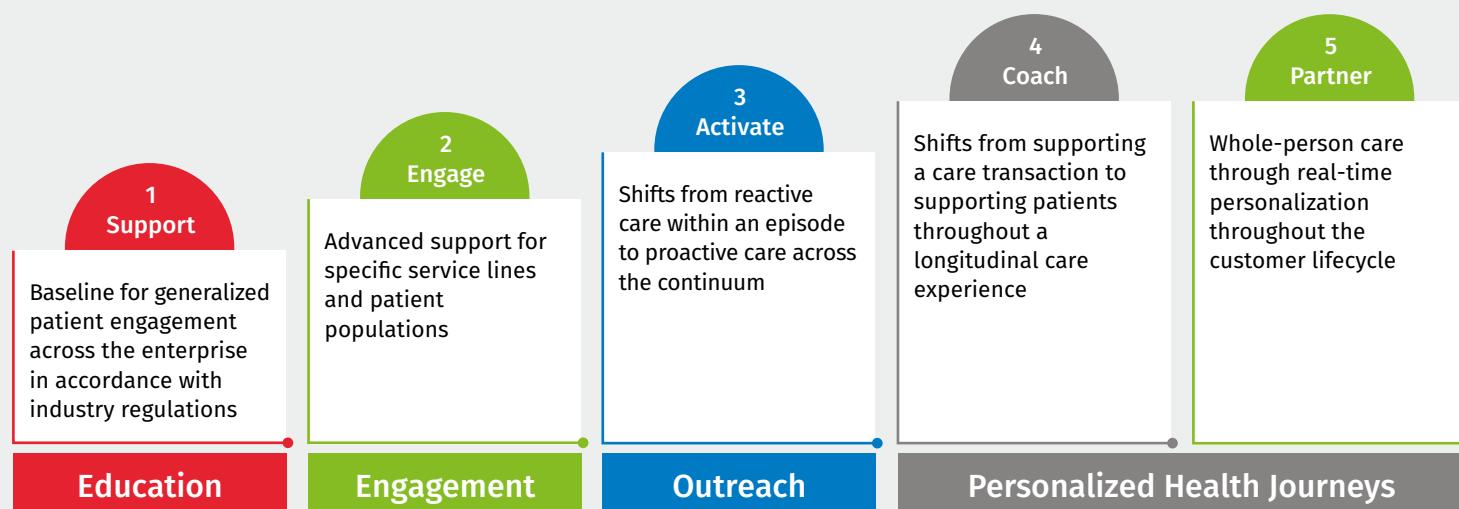
Engagement is a multistep process, and the initiation of patient education efforts serves as the baseline step. Patients are accustomed to receiving printed materials at the end of an encounter, whether it's a discharge summary or an informational leaflet. Many organizations augment printed materials with follow-up phone calls, patient portal messages, or some form of multimedia content accessed through a portal or other website. In short, receiving educational materials is now a standard part of the patient care journey.

Progressing beyond education: Engagement, activation, coaching, and partnership

Advances in technology and clinical best practices have enabled organizations to progress beyond this baseline of education and develop engagement models that encourage partnership between the patient and the care team. Our Patient Partnership Maturity Model includes four steps beyond initiation.

Patient Partnership Maturity Model

While each component is not a necessary requirement for completing each step, organizations are strongly encouraged to have each component in place before moving further through the maturity model.



Digital Health Solutions: Web and Digital



Baseline level for generalized patient engagement across the enterprise

Characteristics

- Manual, task-driven, and encounter-based touchpoints
- Sharing of patient data via patient portal
- Broad, non-segmented communication
- Education fulfills general accreditation requirements such as MIPS or meaningful use
- Limited enterprise-wide standards are in place for engagement, program alignment, and privacy and security

Key technology components

- Certified EHR system with patient portal
- Printed education materials, primarily in English
- Call center management system, including patient contact database

Key operational components

- Call center and customer service operations

Sample capabilities and outcomes

- Regulatory compliance



Provides advanced support for specific service lines and patient populations

Characteristics

- Omnichannel engagement efforts introduce digital touchpoints, multimodal education and outreach, and video visits
- Engagement fulfills general and advanced compliance and accreditations such as Patient Decisions Aids or Transplant Center UNOS Compliance
- Patient segmentation is implemented but in some cases may remain a manual process
- Development of standards begins, but application is both selective and subjective

Key technology components

- Telehealth apps (native or third party)
- Multimodal and multilingual education materials
- Advanced support for perioperative pathways, chronic condition management, shared decision-making
- CRM system

Key operational components

- Marketing campaigns and lead generation program tied to digital health activities
- Physician network development and alignment for telehealth services

Sample capabilities and outcomes

- 76% of patients felt better prepared to manage their health²
- 81% of patients thought more highly of provider organizations²



- 58% of patients reported less anxiety ahead of colonoscopy procedures³
- Patients were 59% more likely to schedule follow-up appointments⁴
- 81% were likely to recommend the provider organization, with a 2%-13% year-over-year improvement in HCAHPS scores⁵

Shifts from reactive care within an episode to proactive care across the continuum

Characteristics

- Marketing and outreach to schedule patients for routine care
- Digital and in-person touchpoints are increasingly aligned and support “push” of materials to patient
- Digital interventions and education support personalized condition management and medication adherence needs
- Bidirectional communication and data collection are available via portal or app
- Engagement contributes to potential new reimbursement opportunities

Key technology components

- Condition management and medication adherence apps
- Marketing/communication automation system
- Automated and digital billing and scheduling systems
- Wayfinding, digital registration, and check-in systems
- Digital marketing presence and reputation management

Key operational components

- Non-episodic care management teams
- Patient experience measurement and documentation
- Approved standards for engagement, content creation, program alignment, and privacy/security
- Service recovery and digital rating management

Sample capabilities and outcomes

- Patients were 62% less likely to cancel colonoscopy appointments⁶
- They were 41% less likely to cancel surgical appointments, resulting in close to 4,000 fewer cancellations over a year⁷
- 25% year-over-year improvement in flu vaccines⁸
- 13% improvement in HEDIS scores in just six weeks⁹



Facilitates shift from transactional care to longitudinal care

Characteristics

- Enable monitoring and coaching support across episodes of care
- Patient preference profile informs all patient communication, including educational content and method of outreach
- Engagement and education reflect needs related to social drivers of health (SDoH)
- Engagement maximizes capture of compliance-related reimbursement incentives
- Audit processes are extended to third-party vendor content

Key technology components _____

- Remote monitoring and automated care management teams, inclusive of wearable technology
- Predictive analytics to power clinical intervention decisions
- SDoH resource partnership or referral service; data partnerships

Key operational components _____

- Remote monitoring device strategy and omnichannel capabilities (BYOD or deploy and maintain)
- SDoH data gathering and training of clinical team
- Routine and consistent audit of all engagement programs and educational materials

Sample capabilities and outcomes _____

- 27%-65% lower 30-day readmission rates¹⁰
- 15% of hypertension patients got blood pressure under control¹¹



Supports whole-person care, providing real-time personalization throughout the customer lifecycle

Characteristics _____

- Clinical and marketing alignment to optimize consumer lifecycle
- Program is in place to proactively monitor new incentives or changes (telehealth billing, transitional care billing, etc.) and quickly adapt new engagement methods
- Digital touchpoints trigger updates to patient preference profile as well as care plan interventions
- Value of digital health is shown by routine ROI analysis, which informs changes to digital health strategy

Key operational components _____

- Patient experience analytics
- Bidirectional and autonomous chat to guide patients

Key operational components

- Alignment of marketing, care delivery, and population health management for patient centered experience strategy
- Programmatic development and scaling of new engagement and education initiatives

Sample capabilities and outcomes _____

- Increased Net Promoter Score
- Increased Patient Acquisition Opportunities



5

Partner



The end goal of the process is to empower patients to become active partners in a connected care experience. As our Patient Partnership Maturity Model shows, this is accomplished through purposefully designed solutions, empathetic communication, and evidence-based content.

How to use the Patient Partnership Maturity Model

Our model is meant to help organizations assess their own maturity while providing them with a trajectory that can inform short- and long-term clinical and business strategies for initiating or improving patient engagement efforts.

In our experience, few organizations are likely to find themselves at either Step 1 (the baseline level) or Step 5 (the aspirational level). For organizations at Steps 2, 3, or 4, assessing each section of the model will help determine which components are needed to transition to the next step, as well as which outcomes can be expected upon reaching the next step.

You may find that multiple descriptions could apply to your organization; for example, some service lines may use virtual visits more than others, or some service lines may already provide automated messages for wellness screenings. Similarly, you may have implemented technology or operational components that fall into multiple steps in the model. If either of these scenarios apply to your organization, then we recommend looking at the sample outcomes. If you have achieved comparable outcomes for a given step, then you can consider yourself beyond that step, regardless of the technology or operational components that are in place. If you haven't achieved those desired outcomes, then your organization has likely not completed that step, even if the technology or operational components are already in place.

As stated before, the Patient Partnership Maturity Model is meant to be informative, not prescriptive. Every organization has different needs. We encourage organizations to focus their efforts on approaches to patient engagement, activation, coaching, and partnership that align with existing business goals or targeted clinical or financial outcomes.

Putting it all together

Patient education has been and will continue to be a critical part of the overall care experience. However, in order to achieve an ever-growing range of goals tied to clinical, financial, and quality metrics, organizations must view education efforts as just the first, baseline step in the patient partnership process.

The end goal of the process is to empower patients to become active partners in a connected care experience. As our Patient Partnership Maturity Model shows, this is accomplished through purposefully designed solutions with smart workflow integrations and multimodal delivery options, empathetic communication, and evidence-based content.

Taken together, these efforts complement the in-person care experience, encourage active participation in the care process, and drive sustained behavior change. Patients are confident in their ability to make their own care decisions, while care teams are confident that patients are making informed choices because they are using the same validated and trusted evidence-based content available in the clinical setting.

Each step toward greater maturity will vary depending on an organization's specific needs, but each step brings the organization closer to a care experience that is more empowering, more compassionate, and more personalized for all patients.



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