

***A Fit-Gap Analysis of
process flow of e-
Healthcare service-
Credihealth***

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ORGANIZATION-

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INTRODUCTION

- Gurugram-based **Credihealth** , started in 2014, is an online healthcare marketplace that provides end to end services including information on various medical ailments, doctors, hospitals, treatments and their implications and post treatment care.

Conventional process

User Journey to get IP treatment today

Ask family and friends, family doctors to refer specialist doctors/hospitals



Visit 1-2 doctors who recommend course of treatment / specialist consult required



Get second opinions on the same



Decide on treatment based on urgency of need / comfort level with consulted specialist doctor



Undergo treatment at the corresponding hospital

Limitations/ pain points

▪ Discovery & Search:

- Identification of doctors / hospitals via referrals from GPs, friends & family – limited visibility to options
- No comprehensive comparison available across doctors / hospitals

▪ Quality & Trust:

- Fear of getting 'overcharged' & unreliable referral system
- Anecdotal Decision making on purely subjective parameters and

▪ Convenience:

- Individual has to manage the entire process on their own, including all appointment booking, actual hospitalization & follow ups

The Credihealth Solution

- **Discovery & Search - Online:** Provide extensive information to help users make an informed decision on their treatment
 - Comprehensive database of Hospitals & Doctors
 - Pre-recorded Doctor interviews, Articles and patient feedback on hospitalization and treatment
- **Quality & Trust - The Personal touch:**
 - In-house Doctor team provides reliable inputs & clarifications
 - Transparent comparison of procedure pricing across hospitals
- **Convenience - Offline:**
 - Project manage the entire hospitalization process for the user / patient through to post-op care

Aim Of Research

- The overall aim of this study is to map the process flow of e-healthcare service at Credihealth with respect to requirement, of the users, channels through which users reach and operational flow at Credihealth.

Research Question:

- What are the reasons of the drop-offs in the process flow leading to low conversion rates of patients reaching to the healthcare facilities through Credihealth?



Research Objectives:

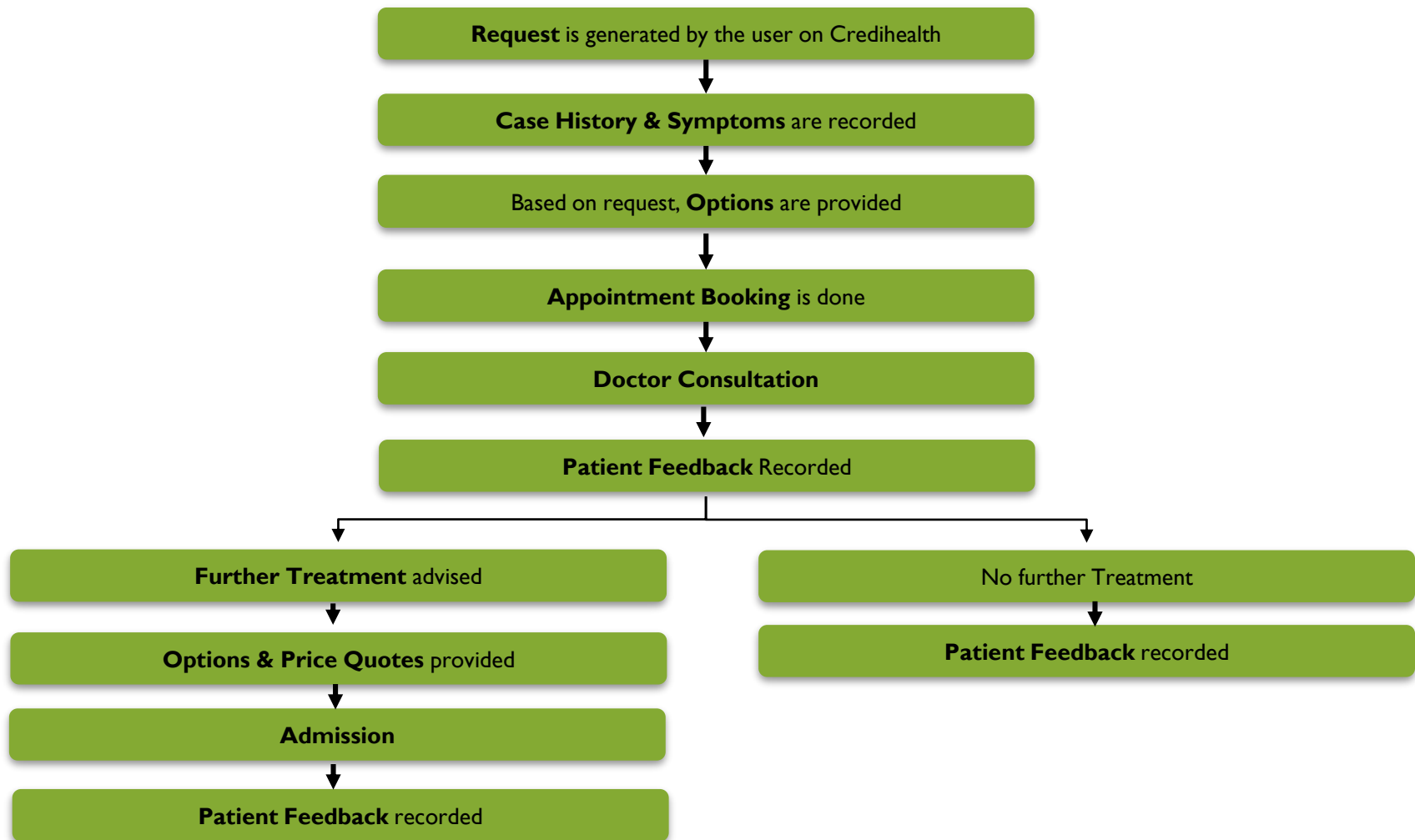
1. To map the current process flow.
2. To measure the conversion rate for OPD and IPD city wise.
3. To analyze the search attributes city wise.
4. To identify the reasons for Drop-offs.
5. To suggest the value-additions in the process.

Methodology:

- Study type- Observational study
- Study Area- Online data of Six Major Metropolitan Cities- Bangalore, Chennai, Delhi-NCR, Hyderabad, Kolkata and Mumbai and Four Minor Cities- Jaipur, Indore, Pune and Ranchi
- Study Period- Data Tracking for Three months (February- April 2017)
- Sample Size- Distant online data of 25000 people who have visited the different digital sources.
- Study Respondents- No. of visitors on different digital sources
- Sample method- Non-probability convenient Sampling

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- Data Collection Technique-Online Data tracking (Website, Android app, telephonic, Google search, social media campaign leads)
 - Limitation in Data Collection:
 - i. Missed CRM requests
 - ii. Non responding Users
 - iii. Untracked CRM Request

Credihealth Process Flow



Steps of Process

1. The traffic generated at the Credihealth website is the team effort of the marketing or digital marketing team, through various sources of channels to reach Credihealth.
2. It is supported by the product and IT team. The request can come in any of the three way-appointment requests, call backs or teleconsultation.

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4. This reaches the medical experts, who are the direct point of contact with the patients (Credi Consumers). The doctors assist the patient to the appropriate specialist or hospital of choice, which is confirmed by the patient care executives.
 5. The same patient is followed up by the medical professionals, the next day of the appointment, which decides if patient requires further line of treatment or not.
 6. The discovery team's role begins here to find out the admissions.

Process Map of Credihealth

USER JOURNEY

User has a specific need / symptom to check



Log into credihealth.com & research articles / information



Search and compare Doctors & Hospitals providing relevant consults /solutions



Log a query for a call back from Credihealth's Doctor team



Discuss and decide way forward based on information, feedback & pricing



Schedule Appointment with Doctor & take 2nd opinion if required



Perform any diagnostic tests required



Undergo hospitalization procedure



Follow up after procedure for post-op care

PAIN POINT ADDRESSED

CHANNEL DELIVERED

PLANS GOING FORWARD

Discovery of information to address user concerns

Web / Mobile app

Continued focus on **online** content

Search of **quality** healthcare providers to offer solutions

Web / Mobile app / Chat / Telephonic

Automate to provide max information online

Availability of additional inputs from **in-house Doctor** team

Telephonic / Chat

Maintain **personal touch** & trust

Trust based on transparent information & reliable inputs

Telephonic / Chat

Maintain **personal touch** & trust

Convenience of scheduling appointments & follow ups

Telephonic / Chat / In Person

Automate to bring process online

Convenience of scheduling any diagnostic tests

Telephonic / Chat

Automate to bring process online

Complete the transaction

N/A

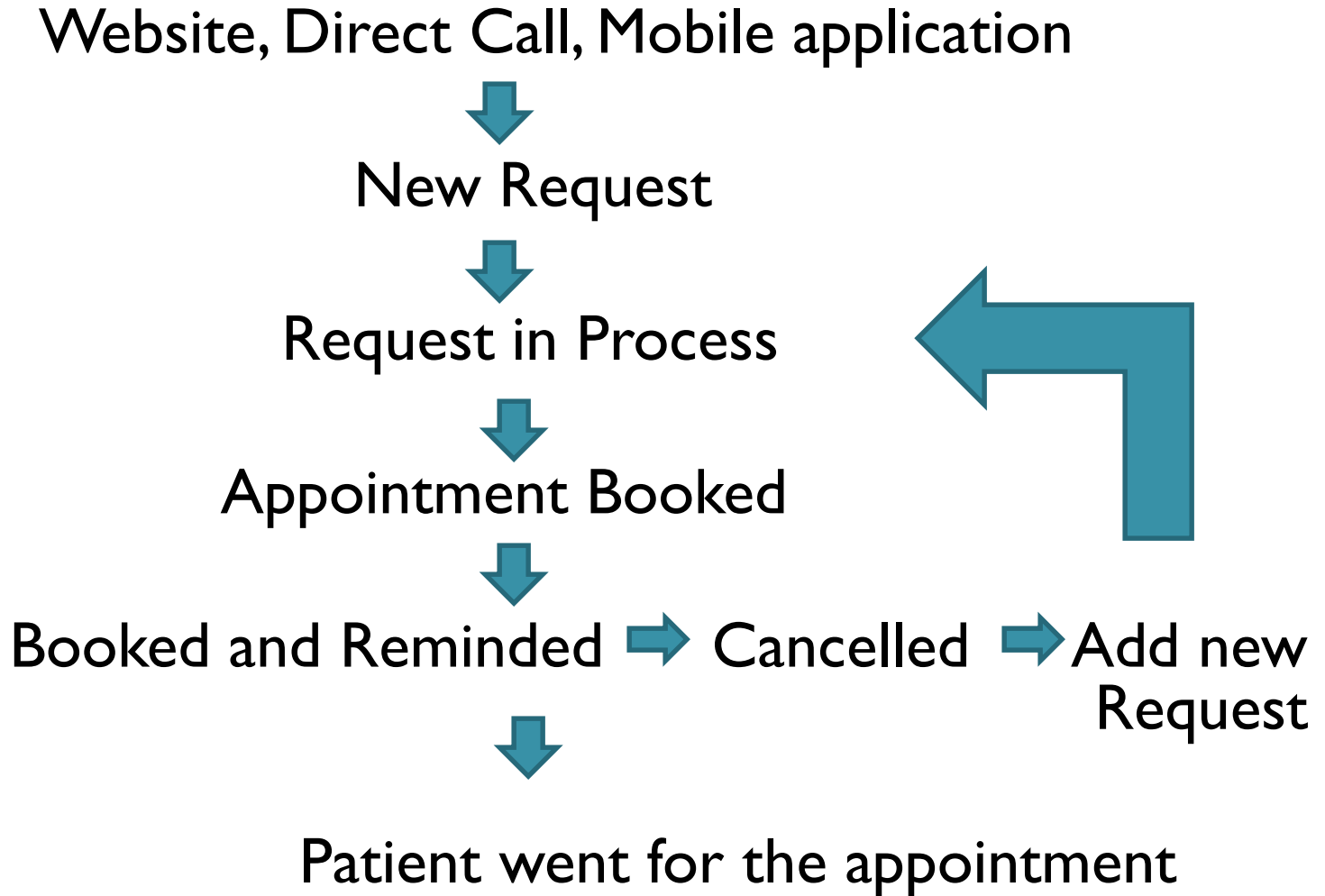
N/A

Convenience of follow-up and scheduling post-op care

Telephonic / Email / Chat

Telephonic / Email / Chat

Operational Process Flow



Sources of Requests

- Android- The requests coming through the mobile application
- Portal- The requests coming from the Credihealth websites
- Call- The requests via direct calls
- Profile Treatments- The requests generated after searching for the particular disease ailment
- Search Doctors- The requests after searching the particular doctors, either suggested by the friends, family or referred by the doctors.
- Profile Hospitals- The requests generated on selecting the particular hospital.
- Profile Doctors- The patients putting requests after looking the profile of the doctors.

Conversion Rate

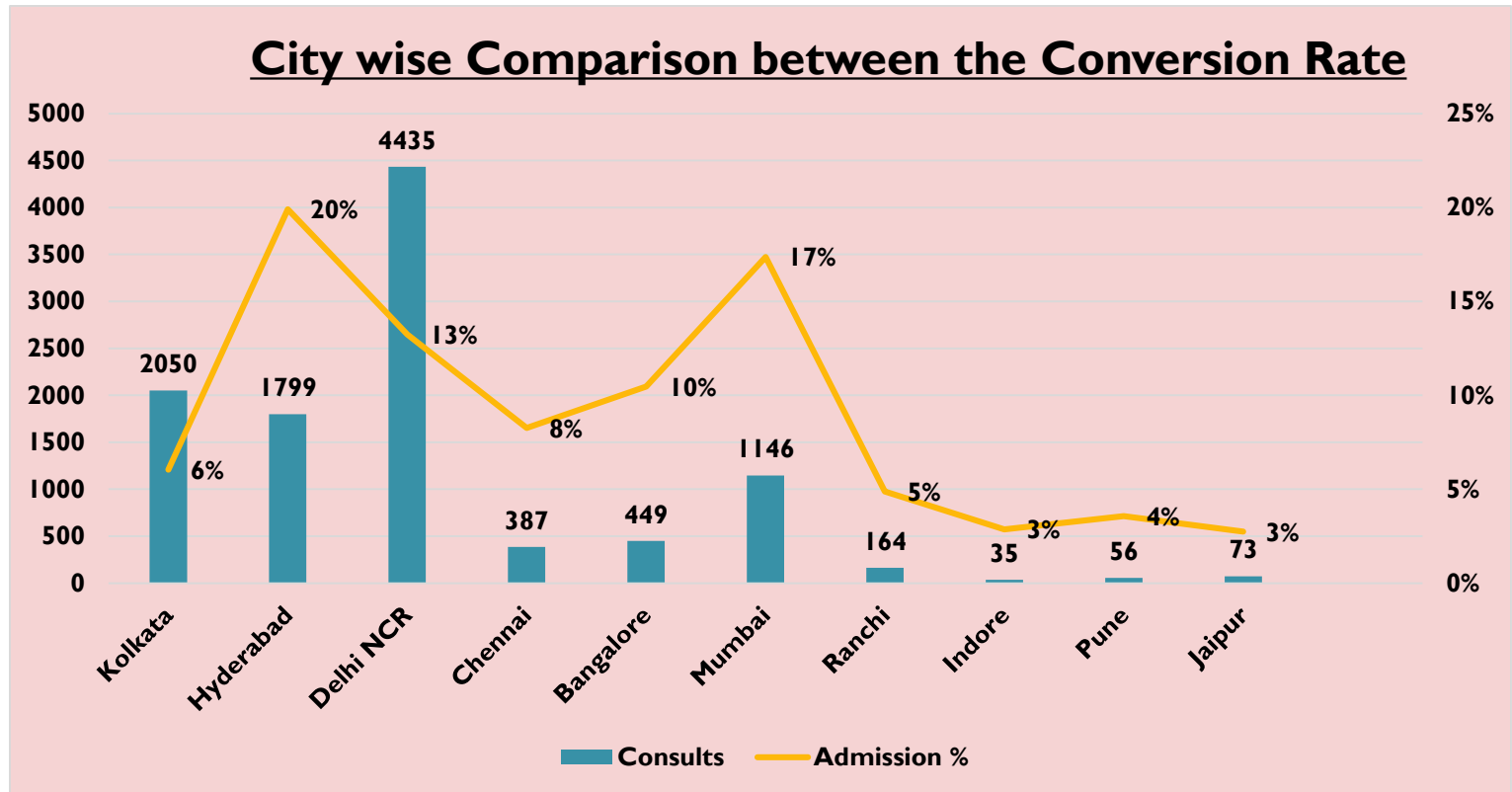
The overall analysis is made on the following basis:

- Total No. of Requests generated= 25000-30000
- Out of these requests, Sixty seven percent of cases were booked.
- Out of these cases booked, Fifty-one percent of the patients actually consulted.
- Further, out of these OPD consultations, Thirteen percent of the patients were admitted (IPD) for further treatment plan.

Conversion Rate(City wise) for IPD vs OPD

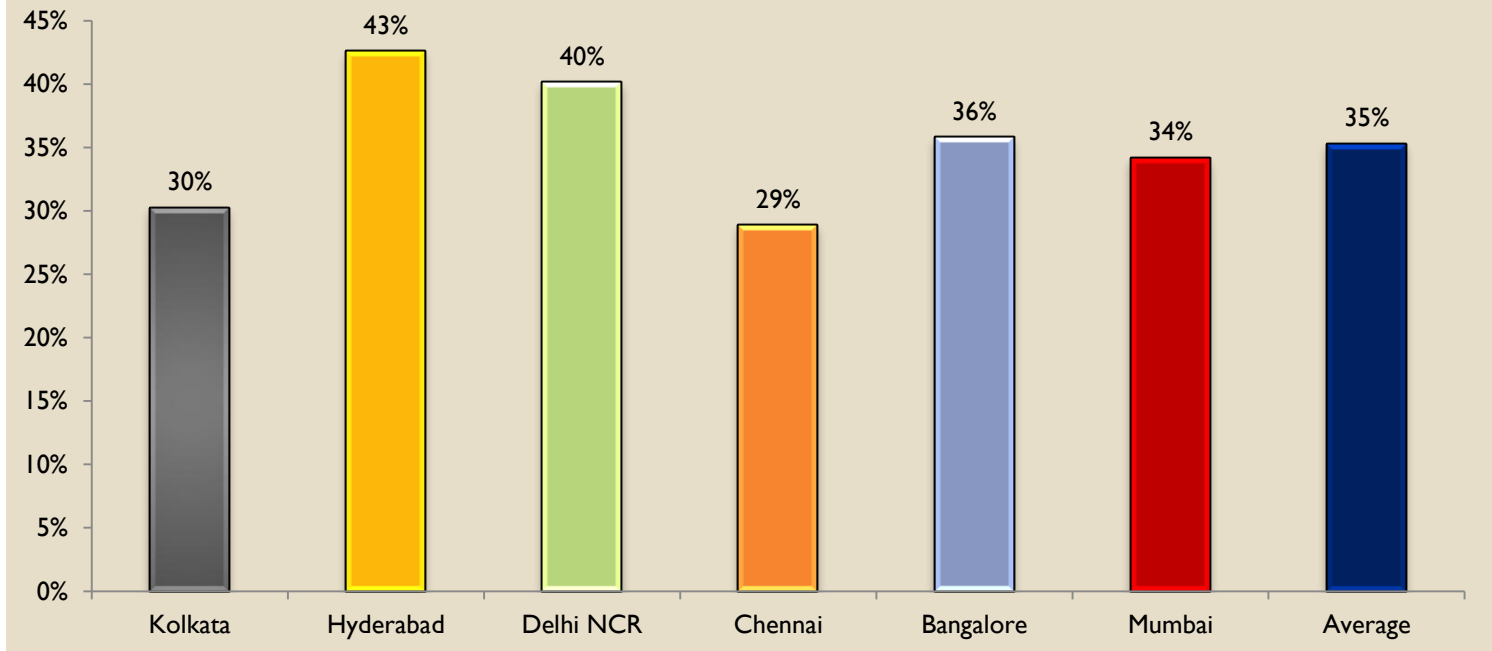
- **Interpretation:**
- Booking Percentage = $\frac{\text{No. of appointments booked}}{\text{Total No. of requests}} * 100$
- Consultation (OPD) Percentage = $\frac{\text{No. of Patients Consulted}}{\text{Total No. of appointments booked}} * 100$
- Admission Percentage (IPD) = $\frac{\text{No. of Admissions}}{\text{Total No. of Patients consulted}} * 100$

Conversion Rate is the change in the status from new request to booking, from booking to consultation (OPD) and from consultation to admissions (IPD).



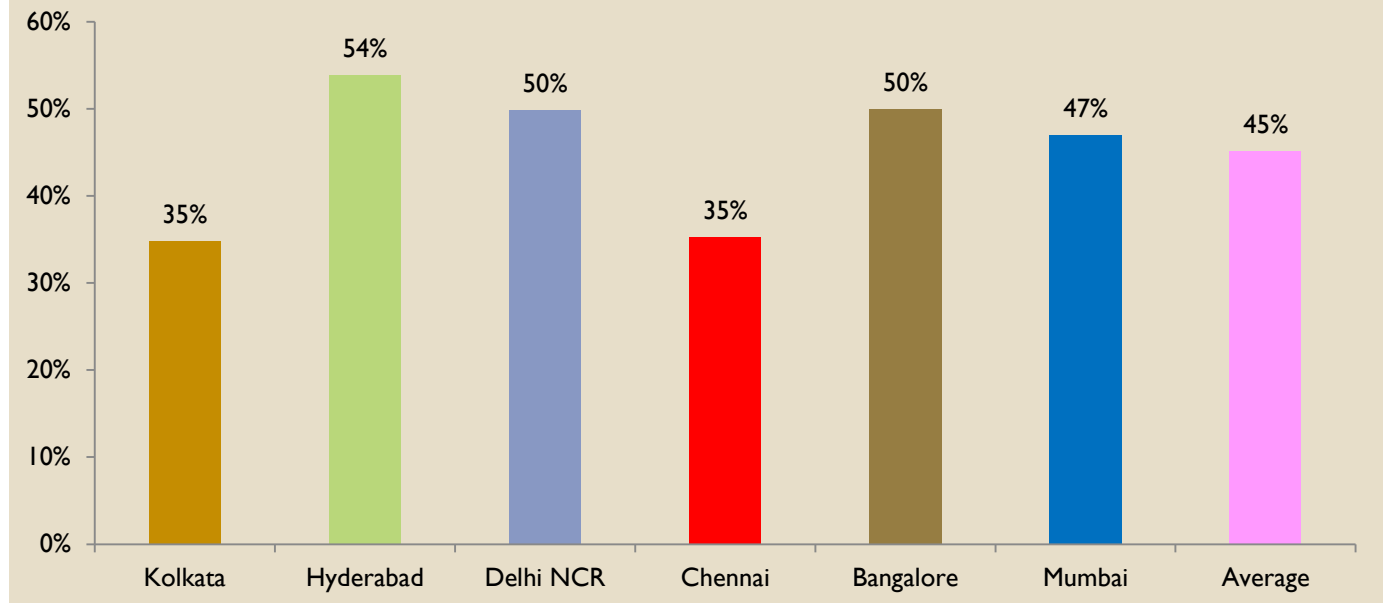
- **Interpretation:** The maximum number of patients requesting the appointments and turn up in reality for the OPD consultation in hospitals partnered in Delhi-NCR. But still the maximum number of IPD conversions (Twenty percent) is observed in Hyderabad.

City wise Comparison for Search Attribute- Profile of doctors



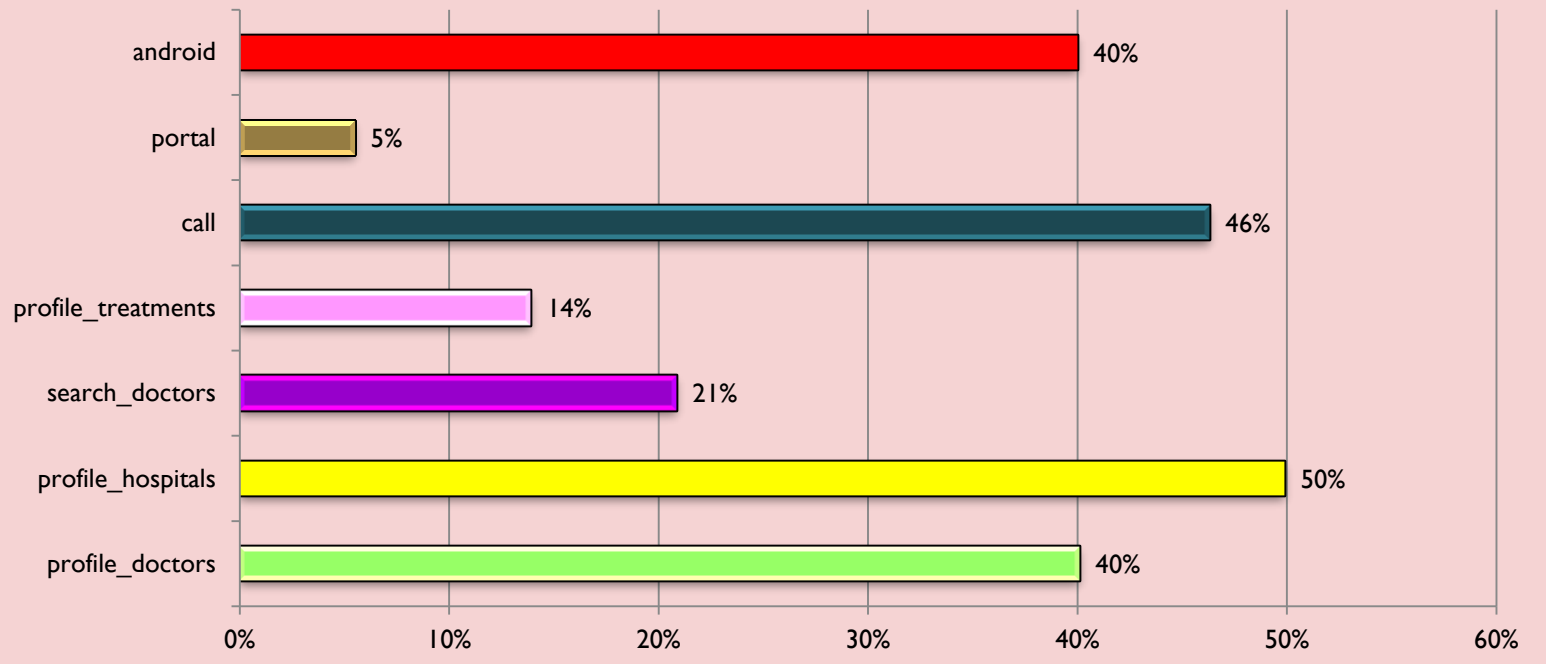
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- **Interpretation:** Around Forty-three percent of patients go for the consultation (maximum in Hyderabad) after viewing the profile of the doctors. On an average thirty five percent of the patients first checks the credentials of the doctors and then proceed for consultation.

City wise Comparison of Search Attribute- Profile of hospitals



- **Interpretation:** More than fifty percent of the patients in Hyderabad check the profile of the hospitals prior to asking for medical assistance in that hospital. Overall, forty five percent of the patients consult by the brand name of the hospitals.

Sources of Request and Search Attributes for Delhi-NCR

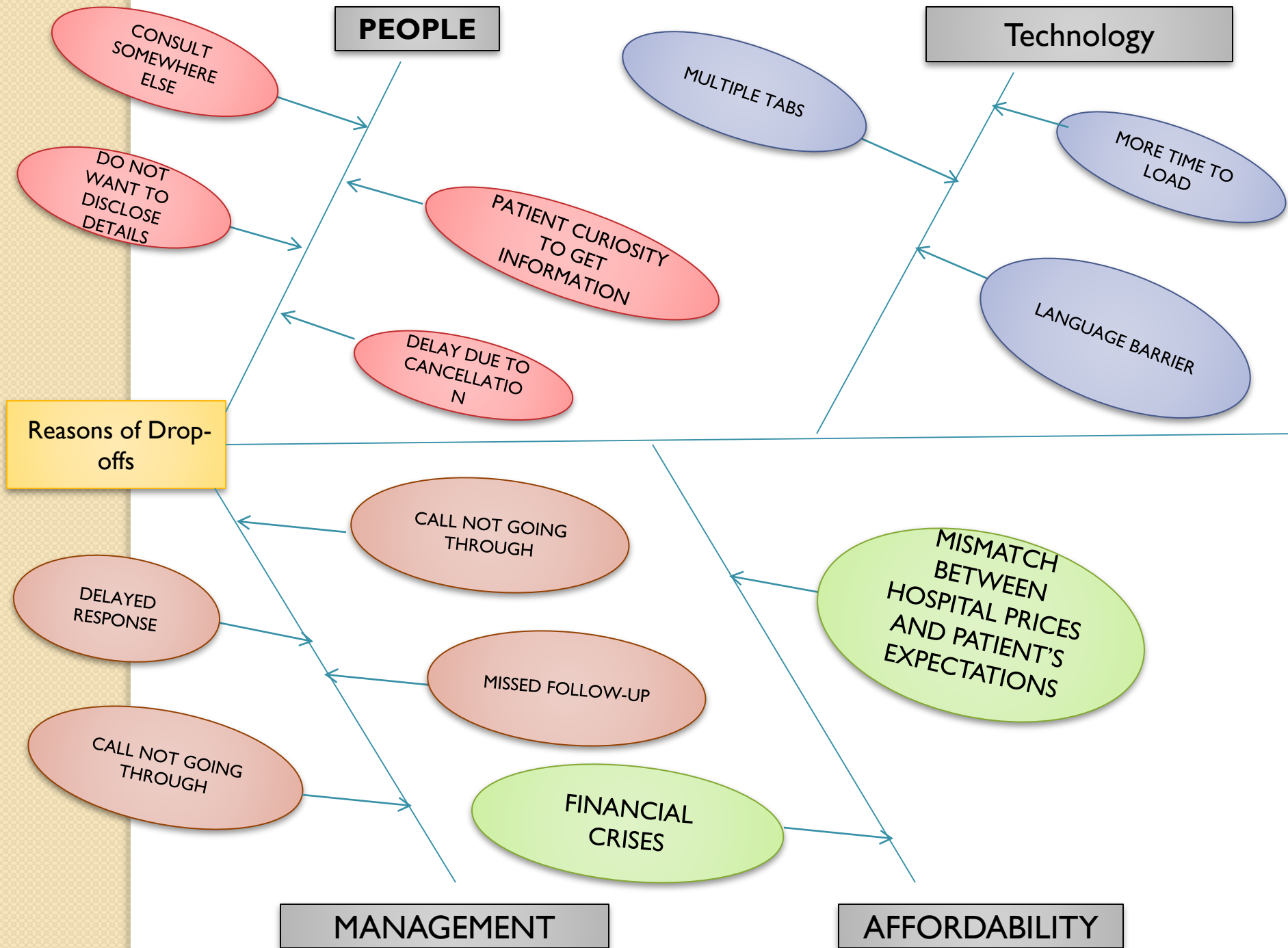


- **Interpretation:** For instance, the sources for Delhi-NCR region was studied as there this region had the maximum no. of requests generated in the study period.
- The maximum number of patients (fifty percent) in Delhi NCR Region prefers to choose treatment after looking the profile of the hospitals. Thus, we can make an inference that Delhi NCR healthcare market is hospital driven.

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- The overall OPD conversion rate is half (51%) of the total appointments booked, so half of the requests are filtered out of the funnel and merely 13% comes out as admissions (IPD).

Cause And Effect Diagram

- The causes for less conversion was analyzed through Fish Bone Diagram.



Reasons of drop-offs

The major reasons for the drop-offs observed were-

1. Missed traffic to the site due to site not opening, high loading time, heavy load on website etc.
2. Delay in attending the cases
3. Missing the calls
4. Improper guidance to the patients- Difference in the information provided by Credi employee and the healthcare facility
5. Incomplete follow-ups- Maybe due to negligence of the employee or no interest of the patient to share the details.
6. No information or incorrect information for the admissions

Recommendations:

- **Admin Queuing System**

The requests should be handled according to the priority and the appointment time required. (e.g.: the Cardiac cases get the high score than the derma case. The surgical case is scored higher than the case requiring medical management. The less the time between the request made and the appointment requested, the more is the score.)

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- **Tracking of the missed calls on the systems.**
So the effort can be made to track the case and get them go through the channel of Credihealth.
 - **Use of artificial intelligence** to automate the time-consuming and unnecessary process.
(Example- Automation of the message sent to the patient on putting the request that they will be reached soon by a medical professional to guide them, Automation of the country codes of the international patients.)

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- **Separate tabs to track the cases by symptoms or procedures done.** This will make the process easy to track the cases in follow-up, that which case need to be followed up. To allow timely follow-up of cases requiring tertiary care. (E.g.:A cancer patient needs to be followed not only till its operated but also for chemotherapy or radiotherapy)
 - **Introduction of local languages.** (E.g.:The site and app were earlier only in English language, can introduce languages like Hindi, Bengali, Tamil, Telugu)

THANK YOU

