

Digital Grateful Patient Program

How to run a successful
patient acquisition program

2024 Edition



DoingGoodAgency.com

Introduction

Welcome to Doing Good Digital's 2024 Grateful Patient Report. Our aim is to help you enhance or implement a digital grateful patient conversion program.



Many hospital foundations struggle with how-to best implement the digital component of a grateful patient program - mainly due to the complexity around data and having siloed technology. Through our work with clients, we know a grateful patient program can be implemented on many different combinations of fundraising technology and platforms, including:

RE NXT for donation forms, RE NXT for CRM with Mailchimp for email.

Luminate Online for donation forms and email, RE NXT for CRM, connected by an Omatic solution.

Classy for donation forms with MyEmma for email, both integrated to Salesforce CRM.

Our aim is to make this report practical and applicable to most combinations of technology platforms, while providing specific examples that involve some of the more popular combinations we have come across.

Legal Disclaimer: The Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health Act (HITECH) are federal laws pertaining to the privacy and security of individuals' health information. Covered entities should be aware that these and other laws, including state or other jurisdictional laws, may apply to their implementation of any recommendations in this paper to the extent they rely on, use, or incorporate protected health information. We aim to fully comply with HIPAA as is required of us by law, but additional steps may be required of you and your organization. Our recommendations in this paper do not constitute legal advice or guarantee that you fulfill your legal obligations. Please consult a licensed attorney familiar with these matters to ensure avoidance of any such violation.

Establish Goals and Key Performance Indicators

Digital KPIs can help gain buy-in for your new digital program. It will demonstrate to senior executives exactly what they can expect. KPIs could include:

Total raised per month or quarter

Average email response rate

Average time to first gift

Average conversion rate of first year journey

Other KPIs and data to measure include:

Email response rates to onboarding series

Email response rates to post onboarding series

Number of gifts per month or quarter

Average gift size

ROI of program

Cost per dollar raised

Number of prospects added to program per month or quarter

Response rates further broken down per department, location or other patient data points

Opt out rate

Email engagement rate

Average time to second gift



Defining and Managing Your Audience

Work with your hospital prospect team to identify prospects on a monthly basis. Prospects should be sent securely into your analytics platform where existing constituents are identified and the remaining are ranked and modeled according to:

Recency

Age of the patient

Insurance

Department of care

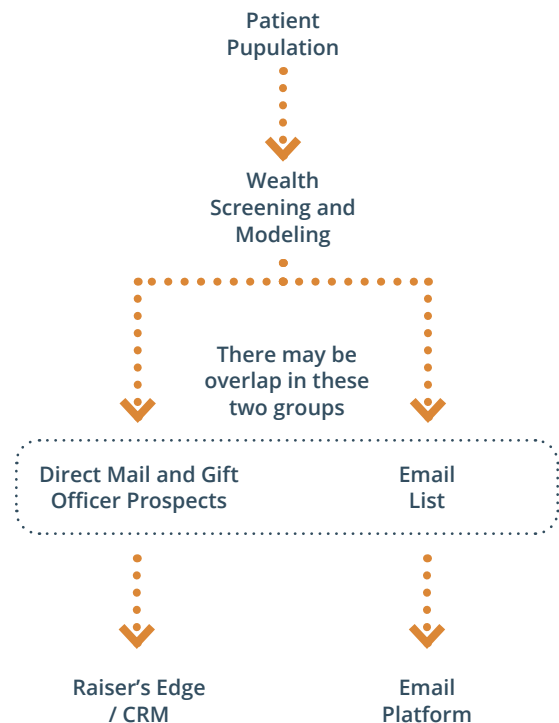
Outcome

Frequency of clinical and hospital visits

Recency of hospital and clinical visits

Wealth scoring

Based on scoring requirements for direct mail and major gift prospects, some constituents will be sent to your CRM. Most of the remaining, less some suppressions, should be sent to your email platform.



*You could send all prospects to your CRM, and this would be easier from a data management standpoint, but this would increase your record counts and could impact pricing. Therefore we recommend sending non-DM and non-Major prospects into your email platform.

Technology Integrations and Considerations

Many of our clients use Raiser's Edge as their database of record. For Raiser's Edge, it would not be ideal to import all of your patient prospect records into Raiser's Edge because it would clutter up the database and likely add to or complicate your pricing with Blackbaud.

Therefore we recommend that you purchase a separate email platform to send your acquisition emails to your patient file.

You could either purchase a stand-alone email platform like Mailchimp or MyEmma, or purchase an integrated platform, like Luminate Online or Engaging Networks, that include donation forms, surveys and landing pages. Landing pages and surveys are ideal to engage your audience in more ways than just asking for a donation. Ex. downloads, messages to caregivers. We know that response rates are low early on, but by engaging in unique ways throughout their journey, they will convert.

If you are hesitant to transition all your communication to a new email platform, it's possible to run your existing donor communication through RE NXT email module, and your patient prospecting communication through a separate email platform as per the following pages.

Lastly related to technology integrations and considerations, a process will need to exist to store historical patient appeal communications. This can either be done 1) in the email platform itself 2) via a data warehouse 3) your prospect research platform 4) using non-constituent records in Raiser's Edge's via Omatic's List Management.

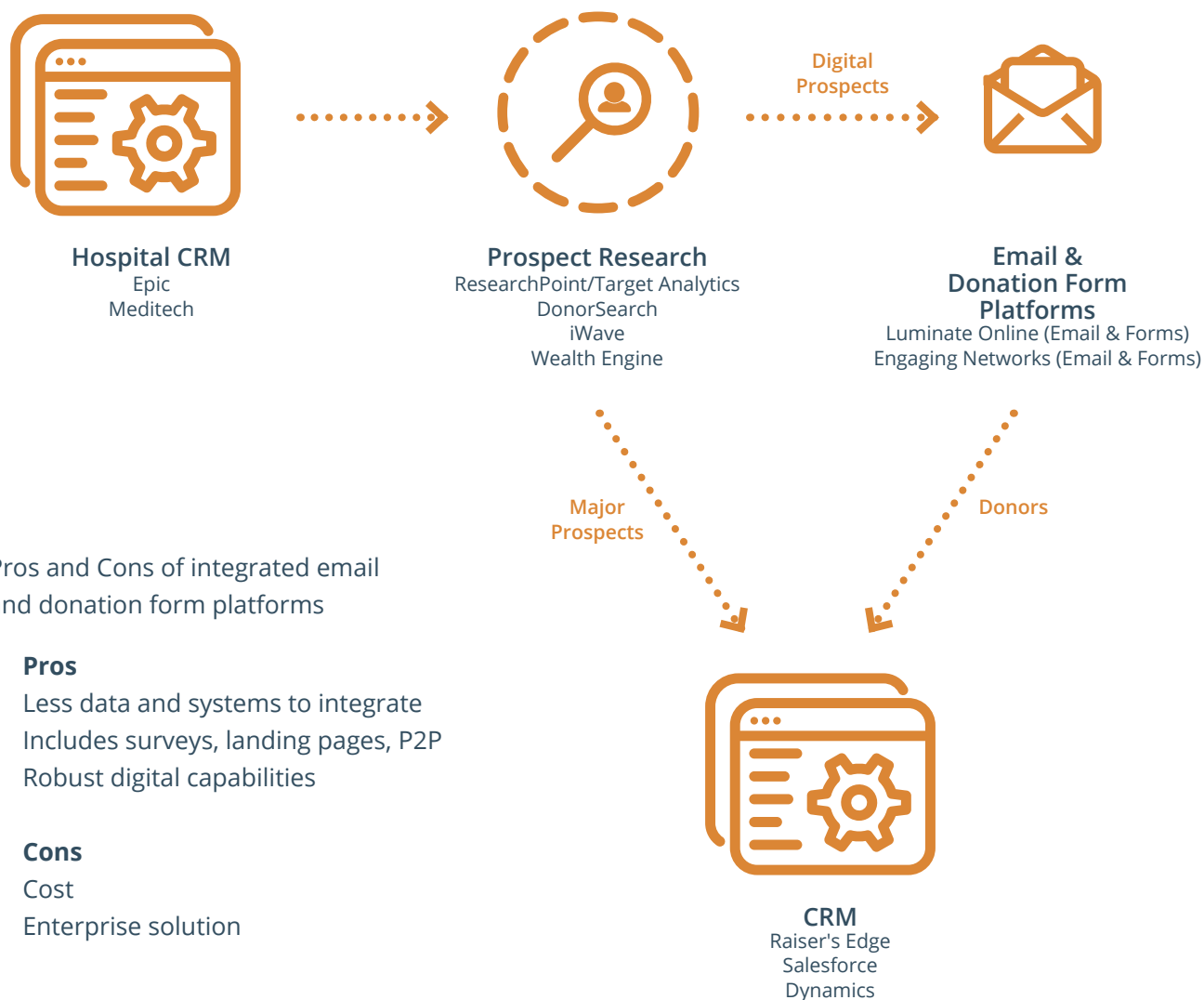


Doing Good Digital provides consulting and implementation services for data, email platforms, integrations, and overall grateful patient program strategy.

Technology Integrations and Considerations

Data Flow Option 1

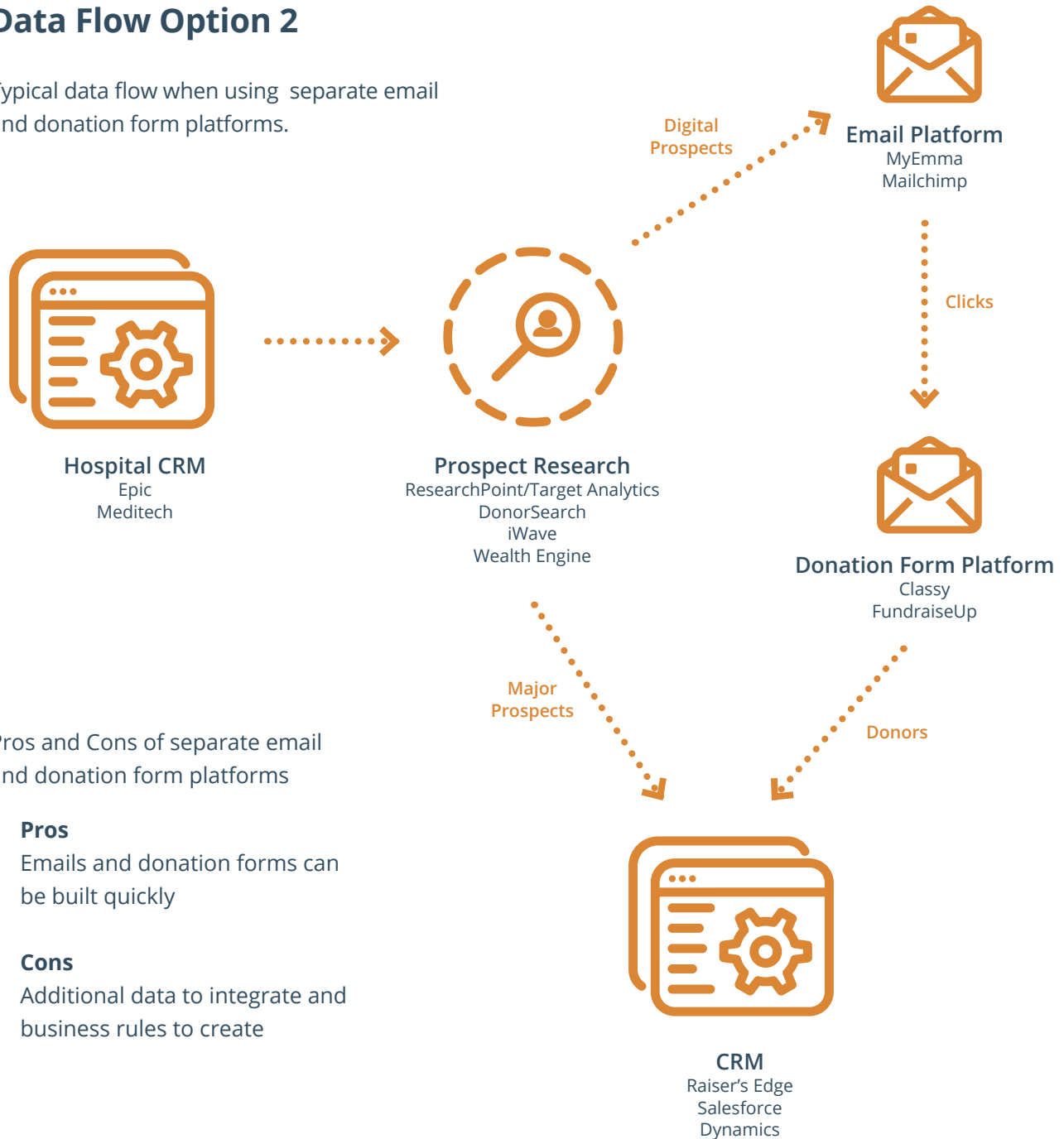
Typical data flow when using an integrated email and donation form platform like Luminate Online or Engaging Networks.



Technology Integrations and Considerations

Data Flow Option 2

Typical data flow when using separate email and donation form platforms.



Pros and Cons of separate email and donation form platforms

Pros

Emails and donation forms can be built quickly

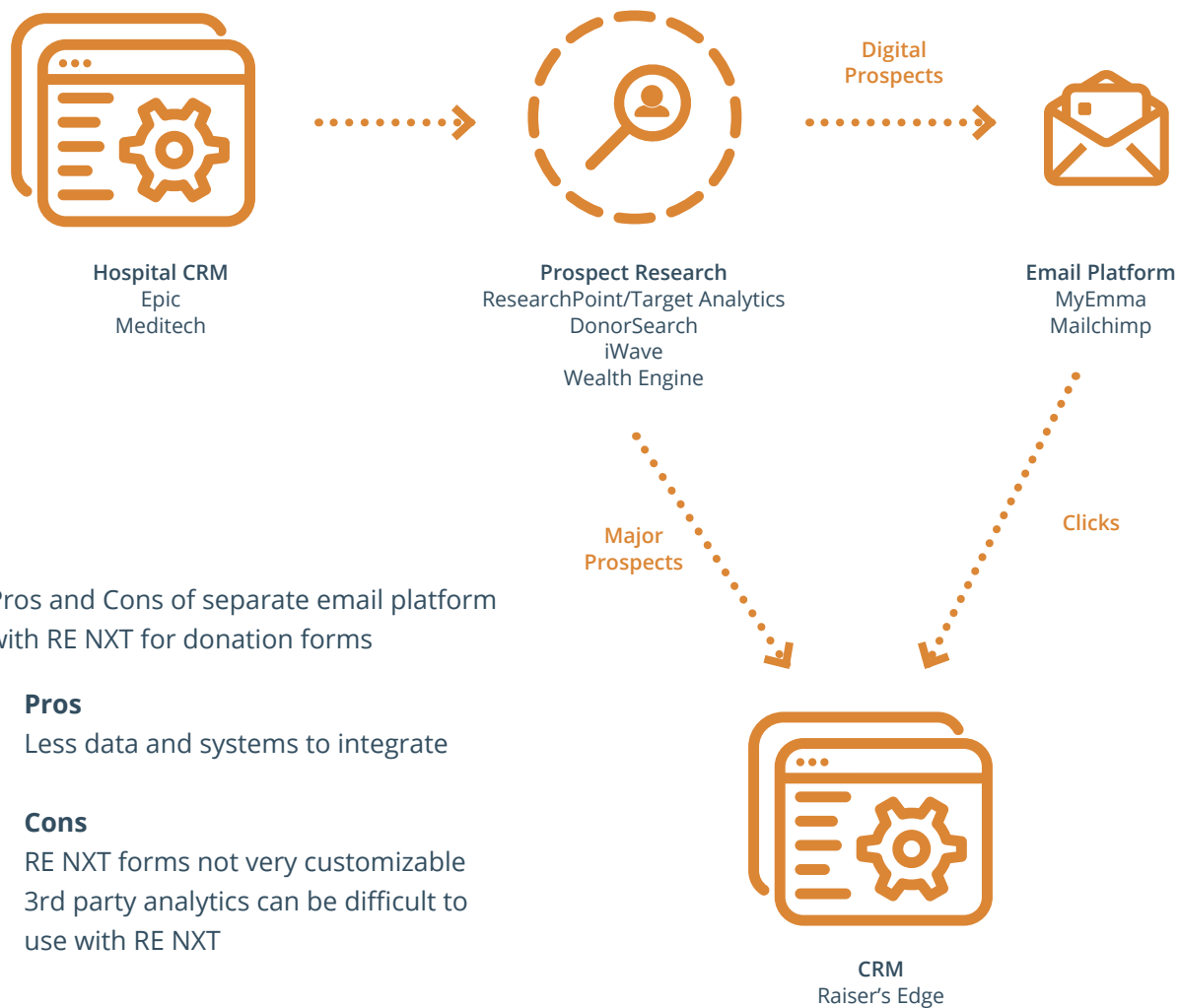
Cons

Additional data to integrate and business rules to create

Technology Integrations and Considerations

Data Flow Option 3

Typical data flow when using RE NXT as your donation form.



Pros and Cons of separate email platform with RE NXT for donation forms

Pros

Less data and systems to integrate

Cons

RE NXT forms not very customizable
3rd party analytics can be difficult to use with RE NXT

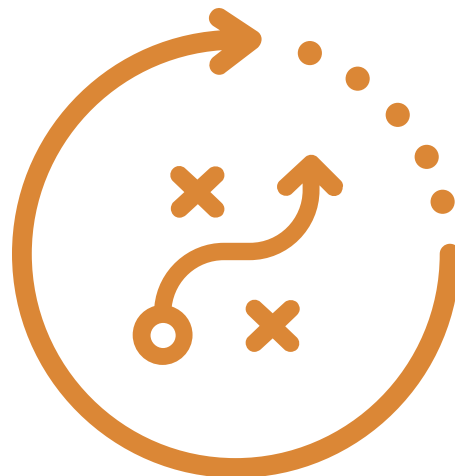
Map the Patient Journey

Now that we have our data and technology in place, let's map the patient journey.

Our recommendation is that hospitals and foundations need to extend the length of their digital patient acquisition strategy in order to increase response rates. Rather than just sending a short digital campaign over 1-2 months, we recommend extending the digital engagement to patients over a longer time period.

Therefore, if patients do not convert in the initial digital campaign we recommend that you:

- **Keep patients on a dedicated digital engagement track after the initial campaign**
- **Remove any patients from the digital track that are not engaging**
- **Send dedicated or automated engagement touches throughout the year**
- **Send digital solicitations at key moments throughout the year such as Giving Tuesday, EOY etc.**



Map the Patient Journey



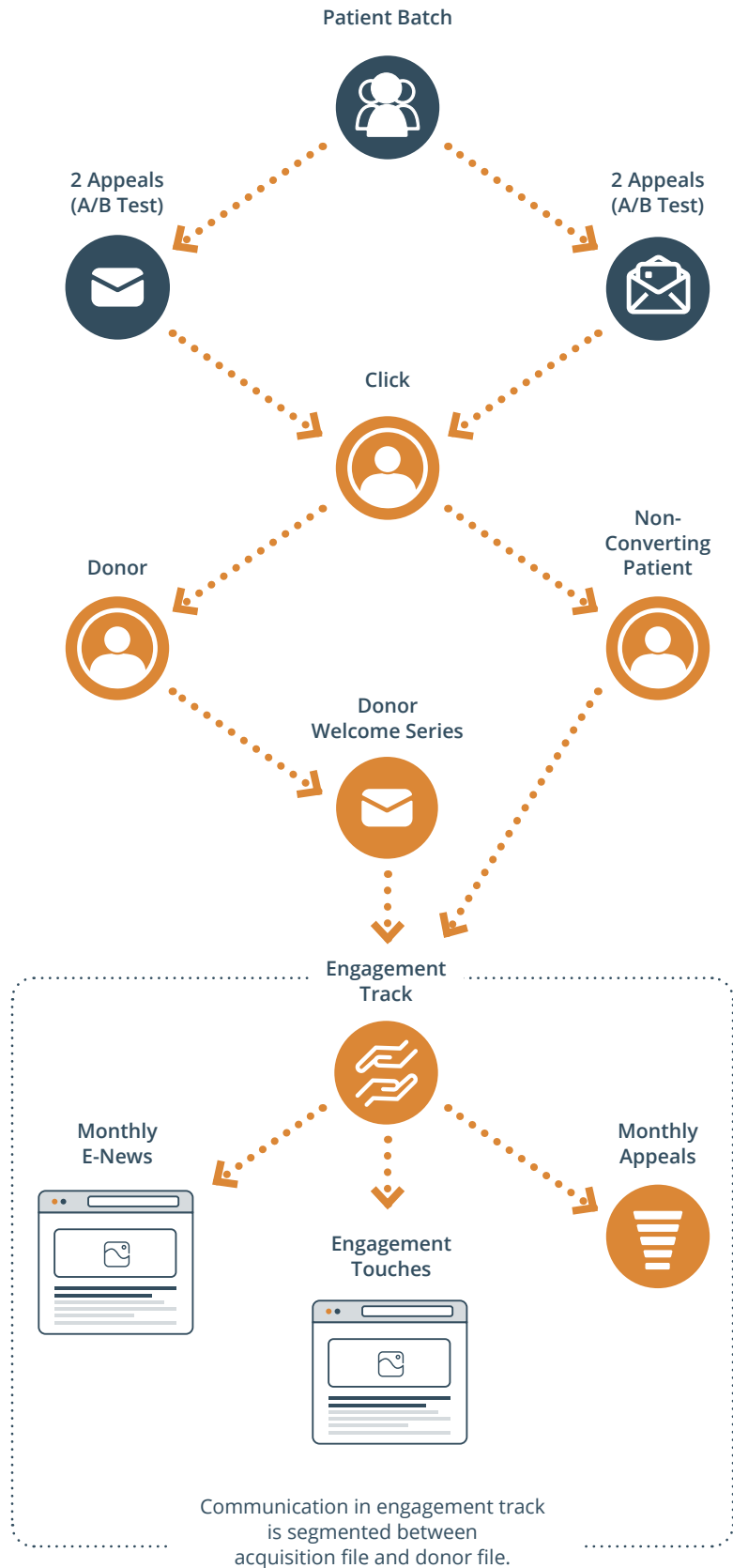
Option 1 Campaign Style

2-part email campaign with hard asks, followed by engagement for non-converting patients.

- 1-2 email series appeal for each batch of patients
- A/B test email format, messaging or imagery
- Suppress patients in all other email communication
- Move non-converting patients to an engagement track after campaign is complete.

Depending on capacity and budget, engagement track could consist of: appeals, eNews, conditional stories in eNews, dedicated or automated engagement touches.

Remove unengaged emails after 90-180 days.



Map the Patient Journey



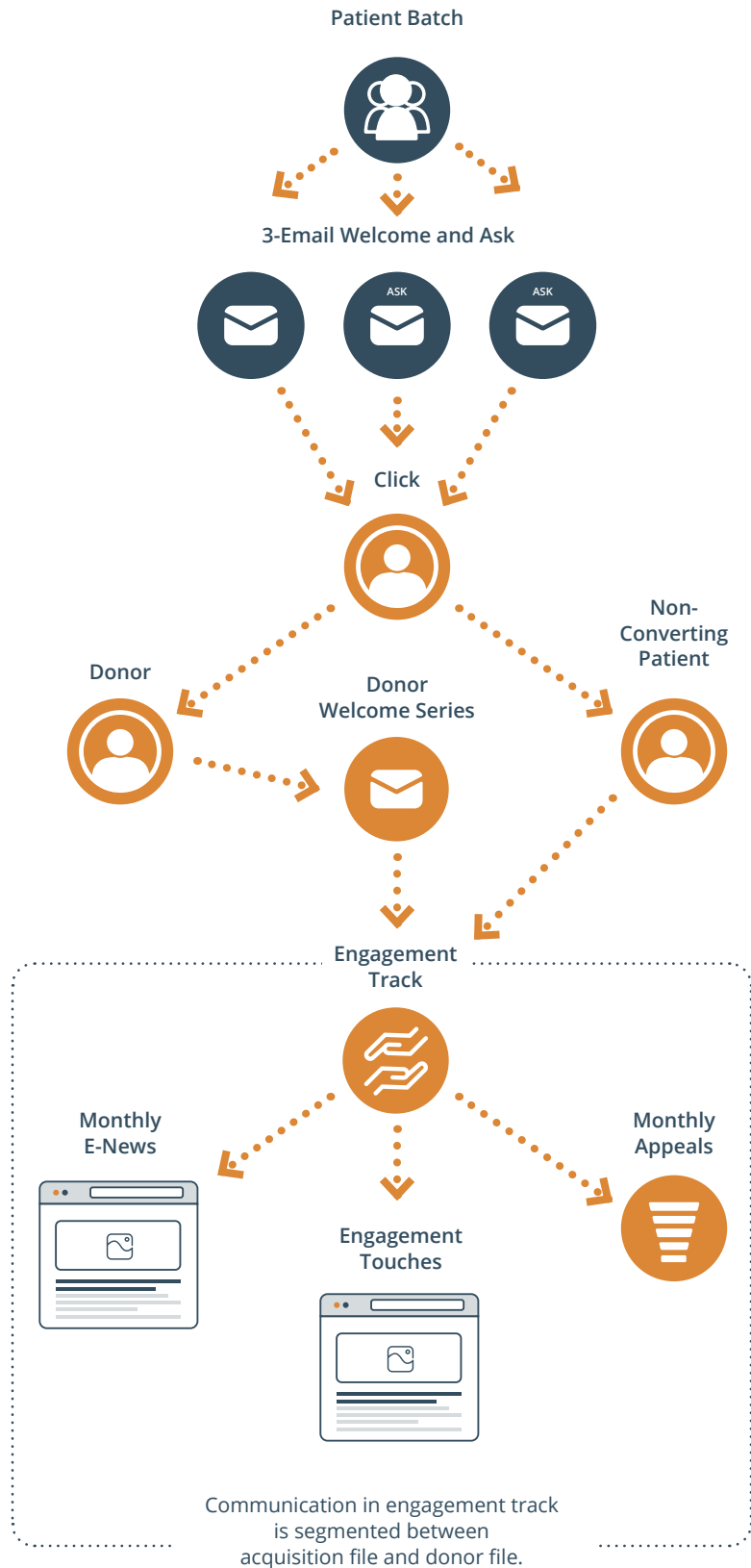
Option 2 Welcome and Ask

Provide patients with a welcome series with an ask at end, followed by engagement track.

- Welcome series of 2-3 emails with ask in second and/or third email
- Suppress patients in all other email communication
- Move non-converting patients to an engagement track after welcome is complete.

Depending on capacity and budget, engagement track could consist of: appeals, eNews, conditional stories in eNews, dedicated or automated engagement touches.

Remove unengaged emails after 90-180 days.



Map the Patient Journey



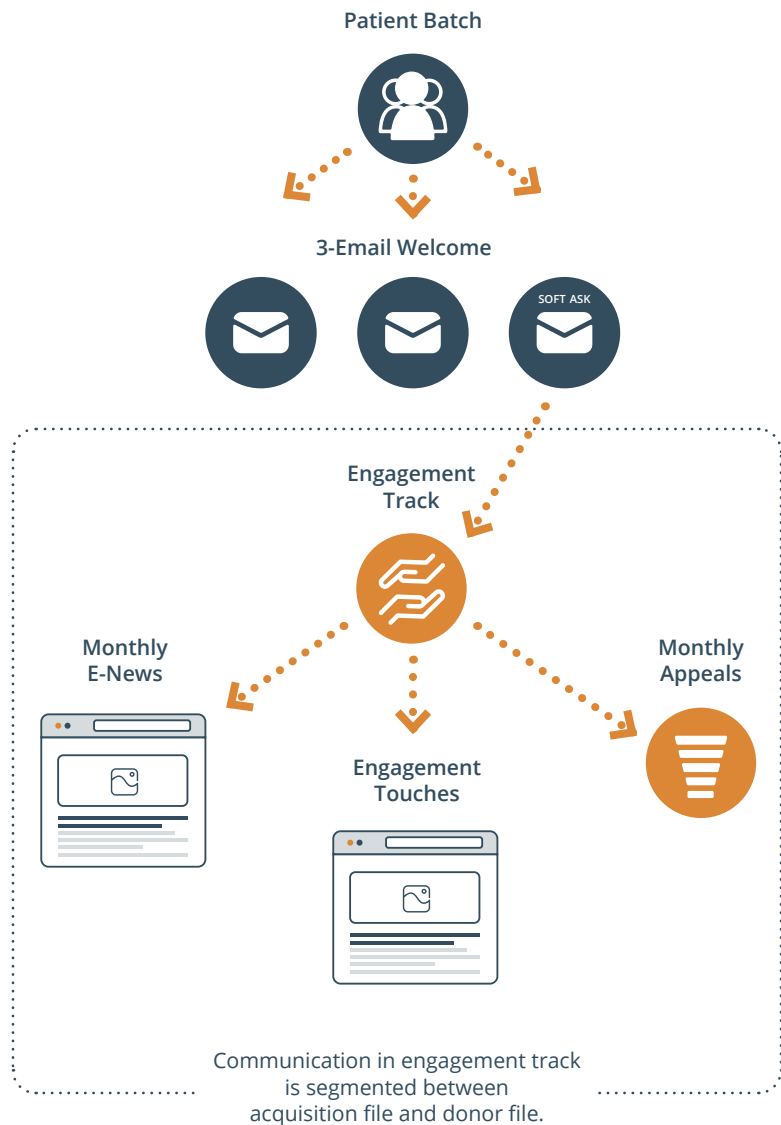
Option 3 Engagement Focused

A non-soliciting welcome series sent to patients, followed by engagement track.

- Welcome series of 2-3 emails with no ask or a soft ask
- Suppress patients in all other email communication
- Move non-converting patients to an engagement track after welcome is complete.

Depending on capacity and budget, engagement track could consist of: appeals, eNews, conditional stories in eNews, dedicated or automated engagement touches.

Remove unengaged emails after 90-180 days.



An opportunity to increase giving from existing constituents

The previous few pages address the journey for patients that are not in your CRM. What about constituents that have already made a donation or may be existing in your CRM?

We recommend that this group be sent a 1-2 part grateful patient solicitation after their visit, however they should only receive this solicitation once per year. This is an excellent opportunity to seek a monthly donation, upgrade to mid level or just a second annual gift if they are a recent donor.





Content

Once you determine your journey above, your next step is to consider and develop content that would resonate most with your patient audience in your initial 2-3 emails, and then in the stewardship cycle. You'll want to consider a mix of CTAs and content such as:

- Honor a Caregiver
- Medical stories, updates, videos
- Patient stories and videos
- Impact stats, stories and news
- Share your story
- P2P
- Patient only events
- Birthday fundraising
- Quizzes
- Surveys
- Profile building surveys
- Content download





Technology Considerations

With all of the options above, it comes down to budget, capacity and technology. If you are unsure if you have the right technology for anything mentioned in this report, please contact us. Your organization may be on a myriad of different platforms. Our team is experienced with RE NXT, Bloomerang, DonorPerfect, Omatic, Engaging Networks, Luminate Online, MyEmma, Mailchimp, Constant Contact, WordPress and others.

Other Considerations

- Converting patients to donors is only half the strategy. What is your plan for stewarding patients once they have become a donor?
- How could social media and digital advertising complement your strategy? Recently Facebook eliminated the ability to target based on health related interest groups. You could consider advertisements to patients that did not convert (Custom Facebook Audience) if this is in line with your HIPAA compliance policy.

Raiser's Edge NXT™



EMMA



engaging NETWORKS



Luminate Online™



blackbaud®



A note on HIPAA and Compliance

We recommend that you establish Privacy and Security – JNPP (Joint Notice of Privacy Practices) and all Opt-Out Language for Communications. It is extremely important that your legal and compliance teams are included on this aspect of the project to make sure that you are following the federal, state, and local laws, in addition to the hospital's policies to safeguard patients' data.

You will also want to train staff and vendors on how to protect themselves and the hospital by using dual authentication for logins and handling reports and spreadsheets within the policies set by the hospital compliance team.



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A full-page background image showing the silhouettes of two surfers walking along a wet beach towards the ocean. The surfers are carrying their boards under their arms. In the background, other people can be seen walking on the beach, and a cliff with some buildings is visible on the left. The sky is overcast, and the water reflects the light.

Conclusion

Should you have any questions or need help with grateful patient strategy, content, fundraising or technology, our team is here to help.



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