Digital Grateful Patient

How to run a successful patient acquisition program

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EDITION

IDEAS FOR NON-PROFITS
Doing good Digital
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DoingGoodAgency.com

Introduction

Welcome to Doing Good Digital's 2025 Grateful Patient Report. This guide is designed to help you launch, enhance, or optimize a digital grateful patient (GP) conversion program that's adaptable to your organization's technology stack and fundraising goals.

While many hospital foundations still wrestle with how to best incorporate a digital component into their grateful patient efforts—often due to siloed data and complex tech systems—we're here to show you it's possible to start small and scale smart. From our experience, a grateful patient program can be implemented using a wide variety of fundraising tools, including:

> RE NXT for CRM and donation forms, paired with Mailchimp for email.
>
> Luminate Online for both forms and email, with RE NXT as the CRM, connected through Omatic.
>
> GoFundMe Pro for donation forms and Fundraise Up and donor conversion, both integrated with Salesforce CRM.

In this year's report, we'll also explore new insights—like the performance of longer email series versus shorter ones in converting patients to donors. We'll outline what happens next after a patient completes a GP series, including effective stewardship journeys and mid-level upgrade series that deepen donor relationships.

Plus, we'll cover emerging best practices around scoring patient engagement, pushing that data back into your CRM, and how that feedback loop improves your direct mail segmentation over time. Whether you're just starting out or refining an existing program, this report is designed to provide practical guidance, platform-agnostic tips, and real-world examples from health systems of all sizes.

Establish Goals and Key Performance Indicators

Well-defined digital KPIs are essential for securing internal buy-in and tracking the success of your grateful patient program. By identifying the right metrics from the start, you'll set expectations for senior leadership and be able to demonstrate both short-term wins and long-term growth potential.

In 2025, the most effective GP programs use KPIs that go beyond one-time giving. Consider tracking:

Total revenue per month or quarter — segmented by first-time vs. returning GP donors.

Conversion rates by email series length — to evaluate performance of shorter vs. longer sequences.

Time to first gift — average number of days from first touch to first donation.

Mid-level and major gift lift — the percentage of GP donors who upgrade after completing the series.

Engagement scoring — email clicks, page views, or donations used to inform CRM scoring models and refine direct mail lists.

Defining and Managing Your Audience

Work with your hospital's prospect team to identify potential prospects on a monthly basis. These records should be sent securely into your analytics platform, where existing constituents are matched, and remaining patients are scored and modeled according to:

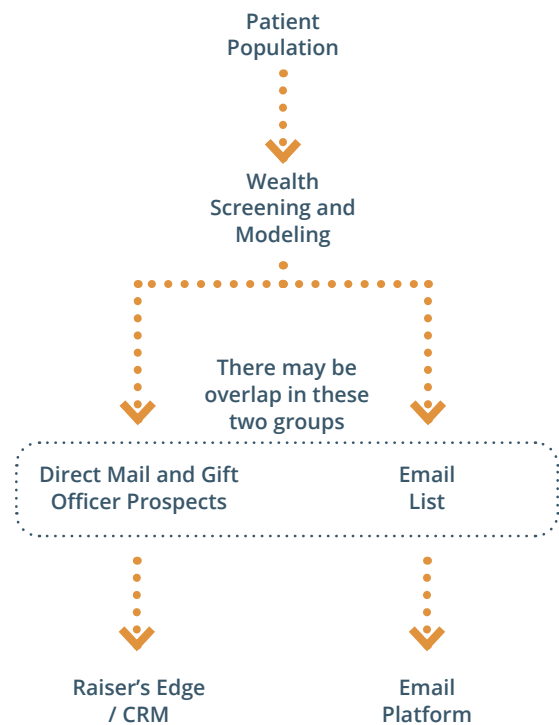|	
Recency	Frequency of clinical and hospital visits
Age of the patient	
Department of care	Recency of hospital and clinical visits
Outcome	Wealth scoring

Patient Population

↓

Wealth Screening and Modeling

There may be overlap in these two groups

Direct Mail and Gift Officer Prospects   **Email List**

↓   ↓

Raiser's Edge / CRM   **Email Platform**

Based on scoring thresholds for direct mail and major gift outreach, some constituents will be sent to your CRM. Most of the remaining, after applying standard suppressions, should be sent to your email platform for digital activation.

While sending all prospects to your CRM may seem easier, it can increase record volume and platform costs. That's why we recommend directing non-DM and non-major prospects into your email platform first, where they can be nurtured and re-scored based on engagement.

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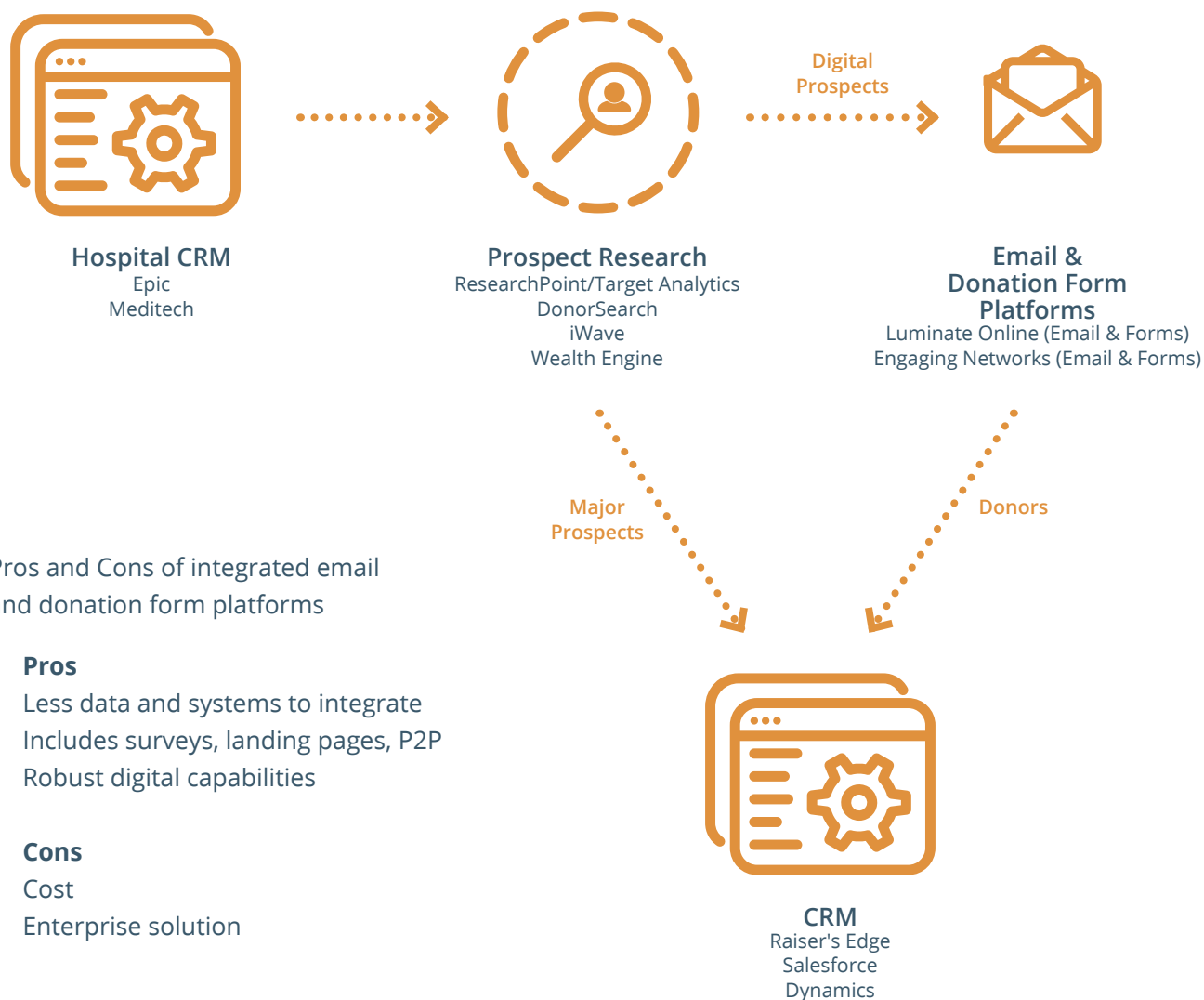
Doing Good Digital provides consulting and implementation services for data, email platforms, integrations, and overall grateful patient program strategy.

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.

Hospital CRM
Epic
Meditech

Digital
Prospects

Prospect Research
ResearchPoint/Target Analytics
DonorSearch
iWave
Wealth Engine

**Email &
Donation Form
Platforms**
Luminate Online (Email & Forms)
Engaging Networks (Email & Forms)

Major
Prospects

Donors

Pros and Cons of integrated email and donation form platforms

Pros
Less data and systems to integrate
Includes surveys, landing pages, P2P
Robust digital capabilities

Cons
Cost
Enterprise solution

CRM
Raiser's Edge
Salesforce
Dynamics

Technology Integrations and Considerations

Data Flow Option 2

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

Hospital CRM
Epic
Meditech

Prospect Research
ResearchPoint/Target Analytics
DonorSearch
iWave
Wealth Engine

Digital Prospects

Email Platform
MyEmma
Mailchimp

Clicks

Donation Form Platform
Classy
FundraiseUp

Major Prospects

Donors

CRM
Raiser's Edge
Salesforce
Dynamics
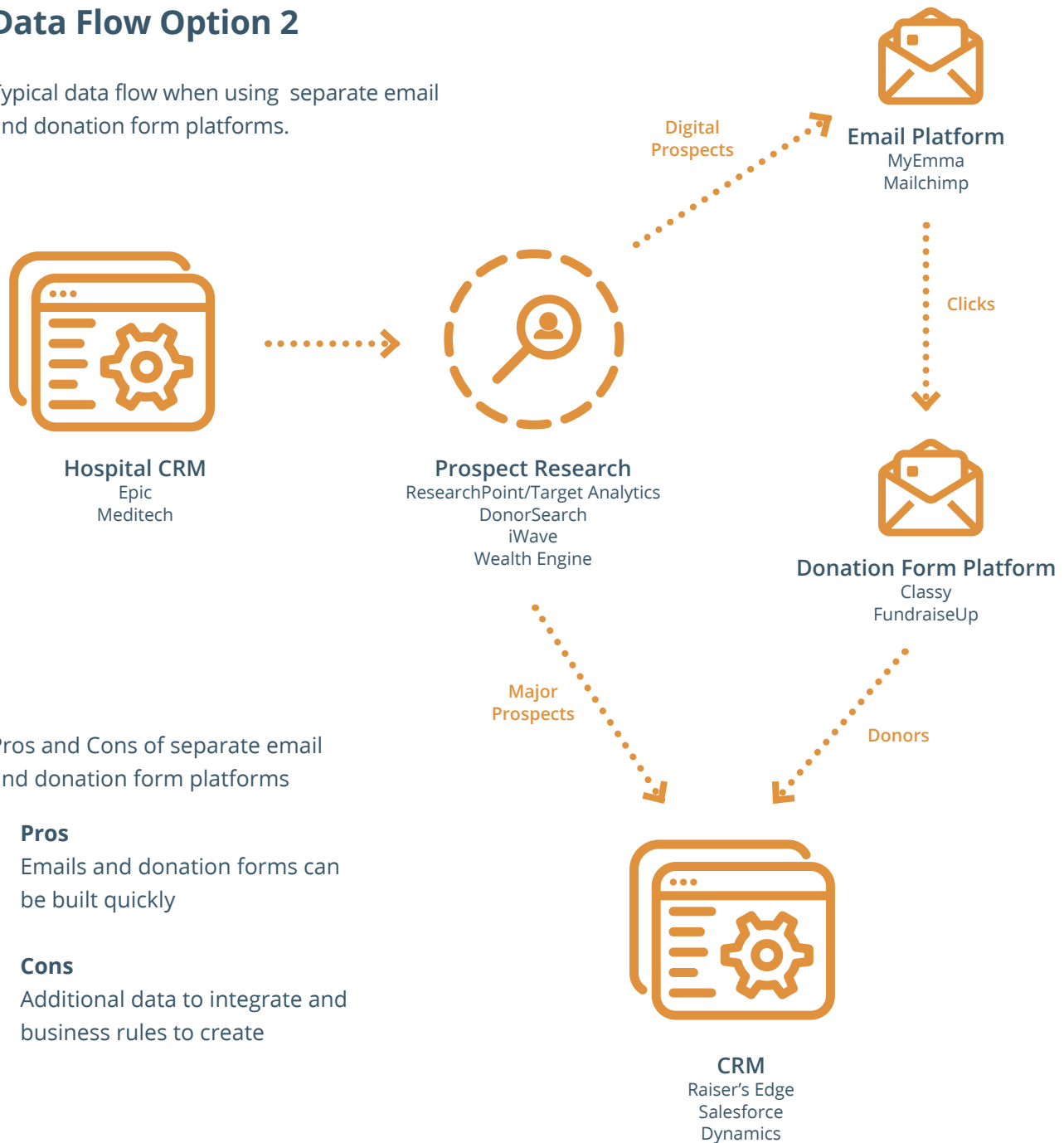
Pros and Cons of separate email and donation form platforms

Pros
Emails and donation forms can be built quickly

Cons
Additional data to integrate and business rules to create

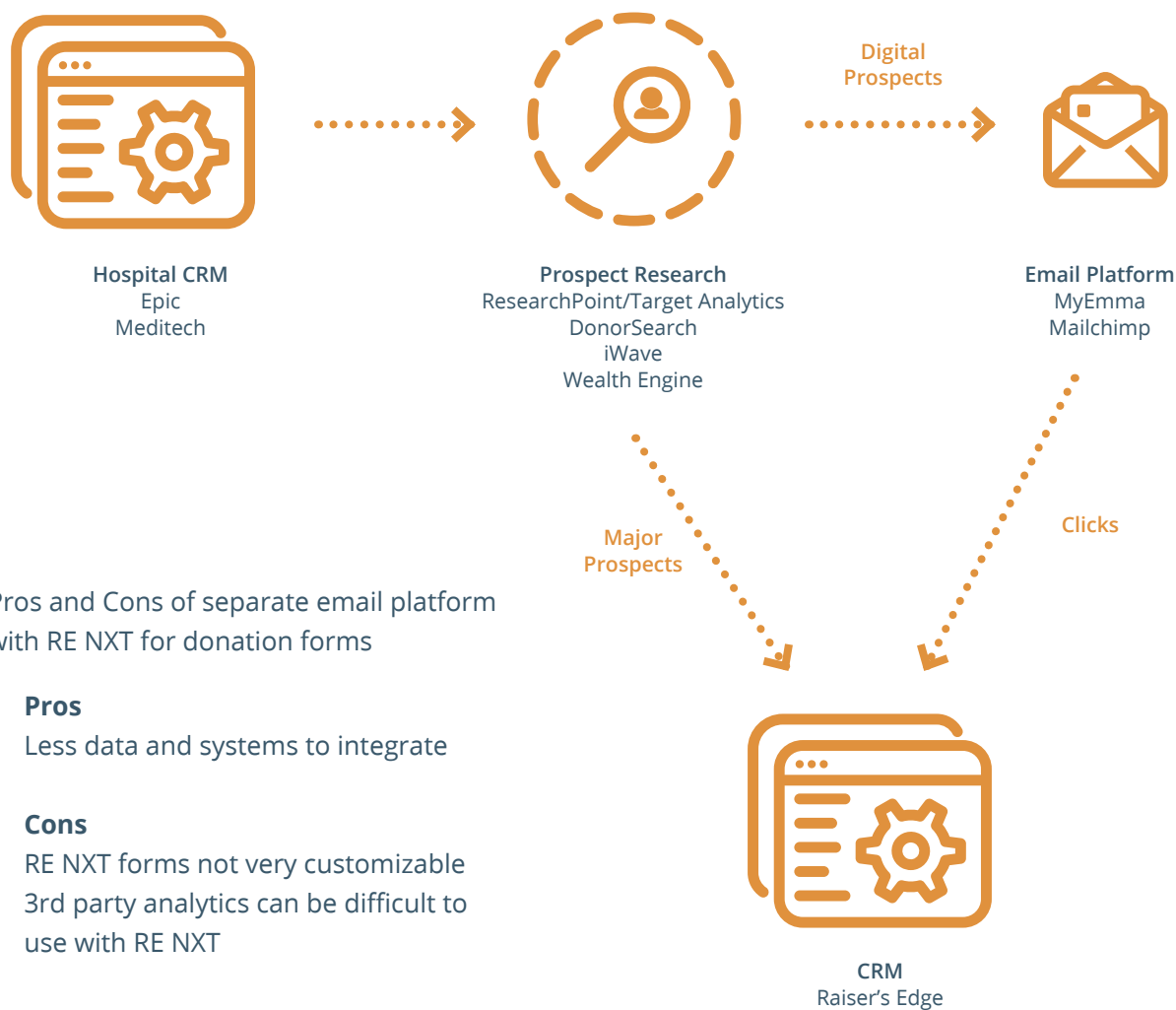# Technology Integrations and Considerations

Data Flow Option 3

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

Hospital CRM
Epic
Meditech

Prospect Research
ResearchPoint/Target Analytics
DonorSearch
iWave
Wealth Engine

Digital Prospects

Email Platform
MyEmma
Mailchimp

Major Prospects

Clicks

CRM
Raiser's Edge

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.**

KEY INSIGHT 2025

Hospitals and foundations need to extend the length of their digital patient acquisition strategy in order to increase response rates
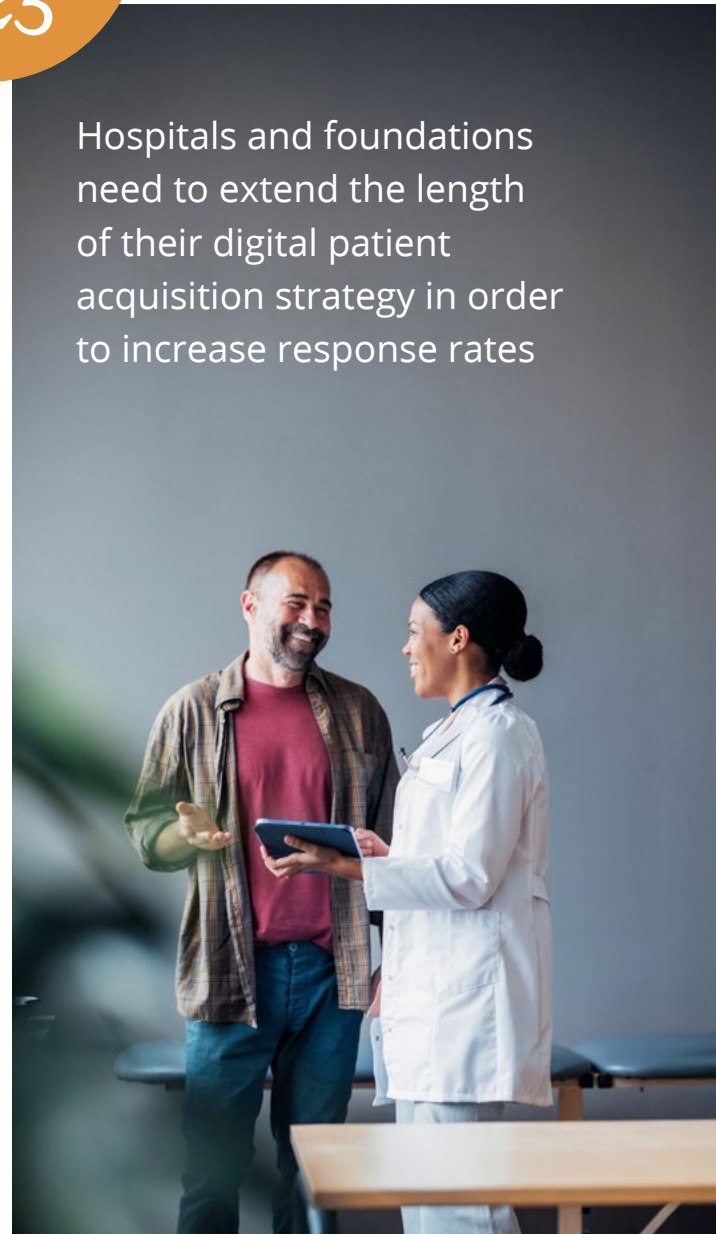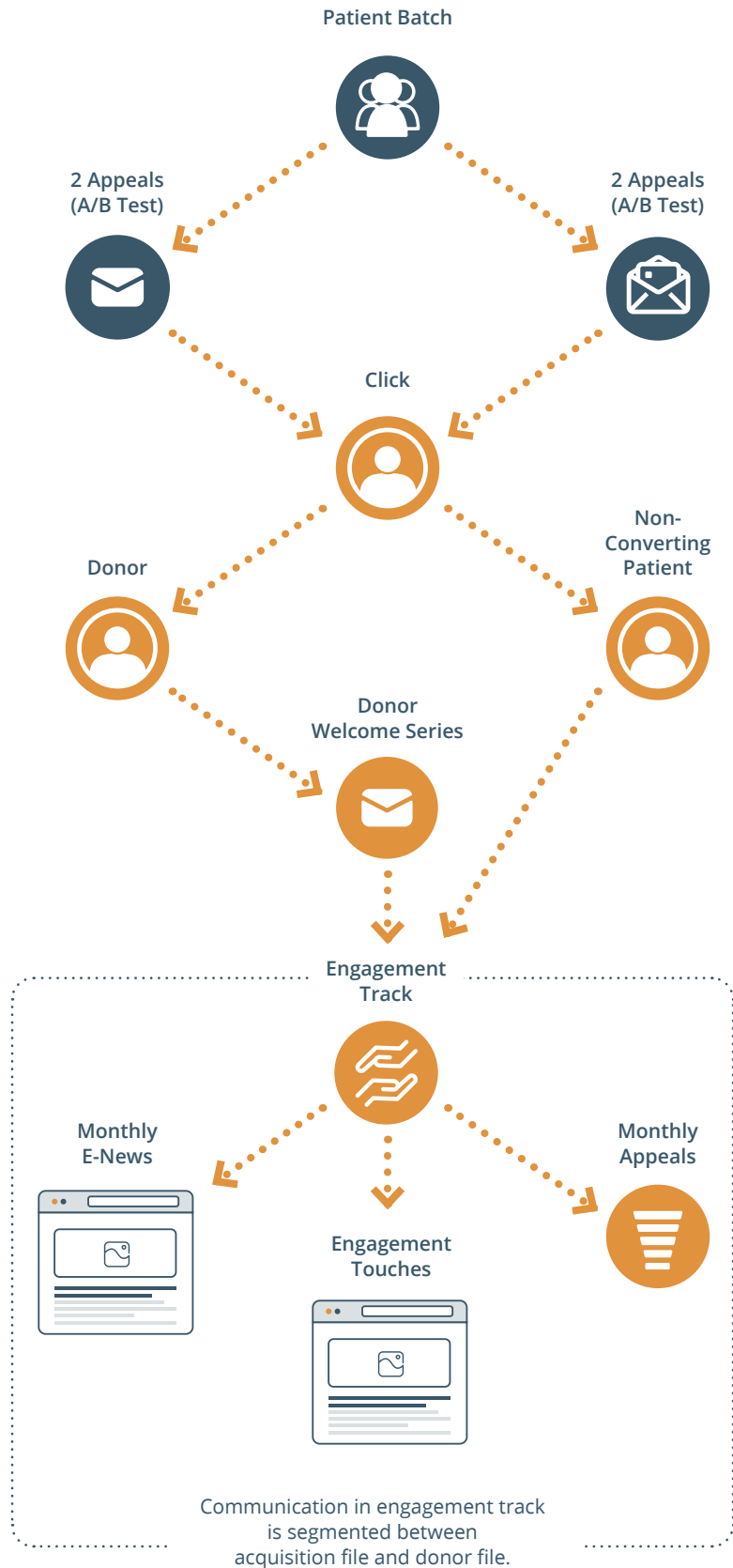
Map the Patient Journey

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.

Patient Batch

2 Appeals (A/B Test)

2 Appeals (A/B Test)

Click

Donor

Non-Converting Patient

Donor Welcome Series

Engagement Track

Monthly E-News

Engagement Touches

Monthly Appeals

Communication in engagement track is segmented between acquisition file and donor file.
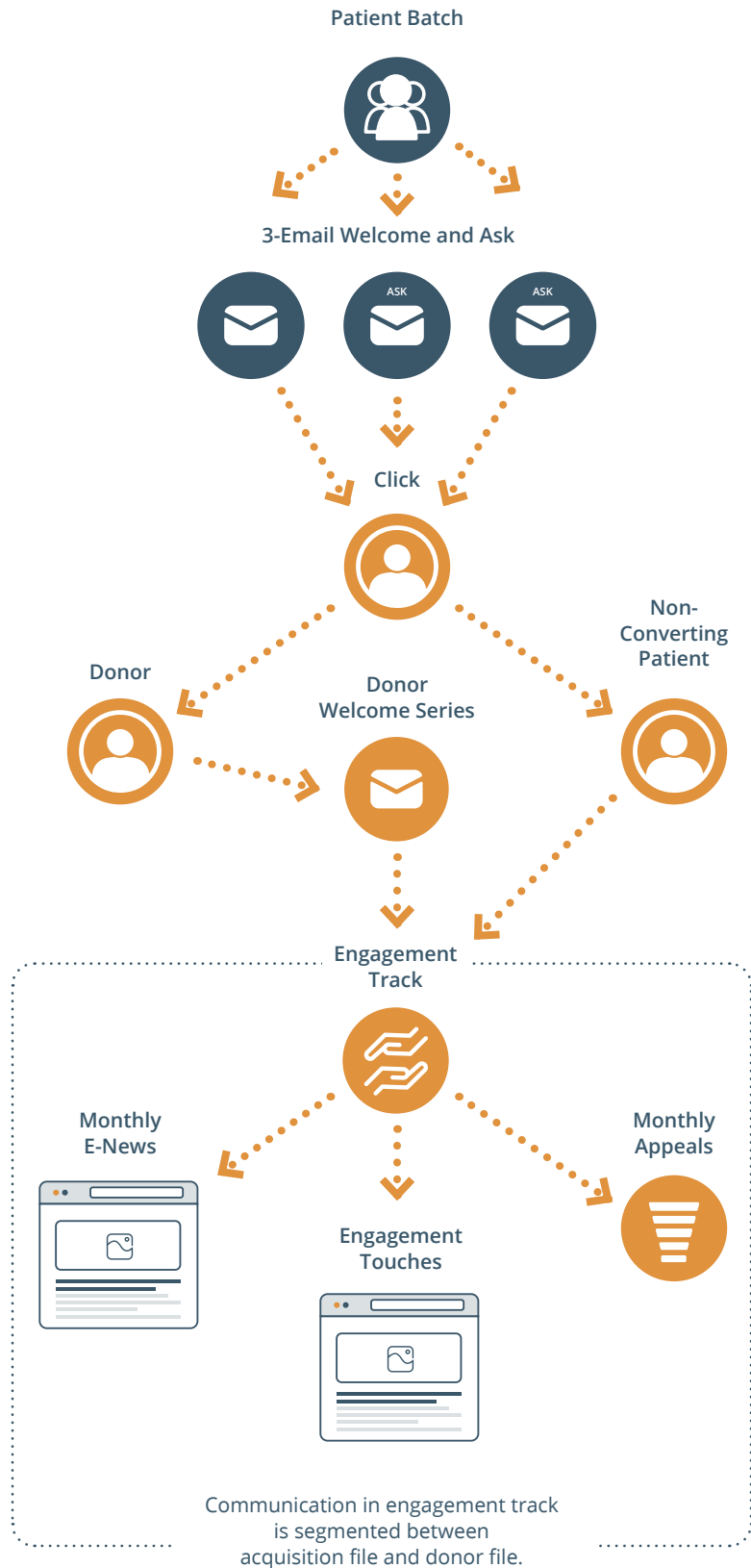
Map the Patient Journey

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.

Patient Batch

3-Email Welcome and Ask

ASK · ASK

Click

Donor · **Donor Welcome Series** · **Non-Converting Patient**

Engagement Track

Monthly E-News · **Engagement Touches** · **Monthly Appeals**

Communication in engagement track is segmented between acquisition file and donor file.

Map the Patient Journey

Option 3
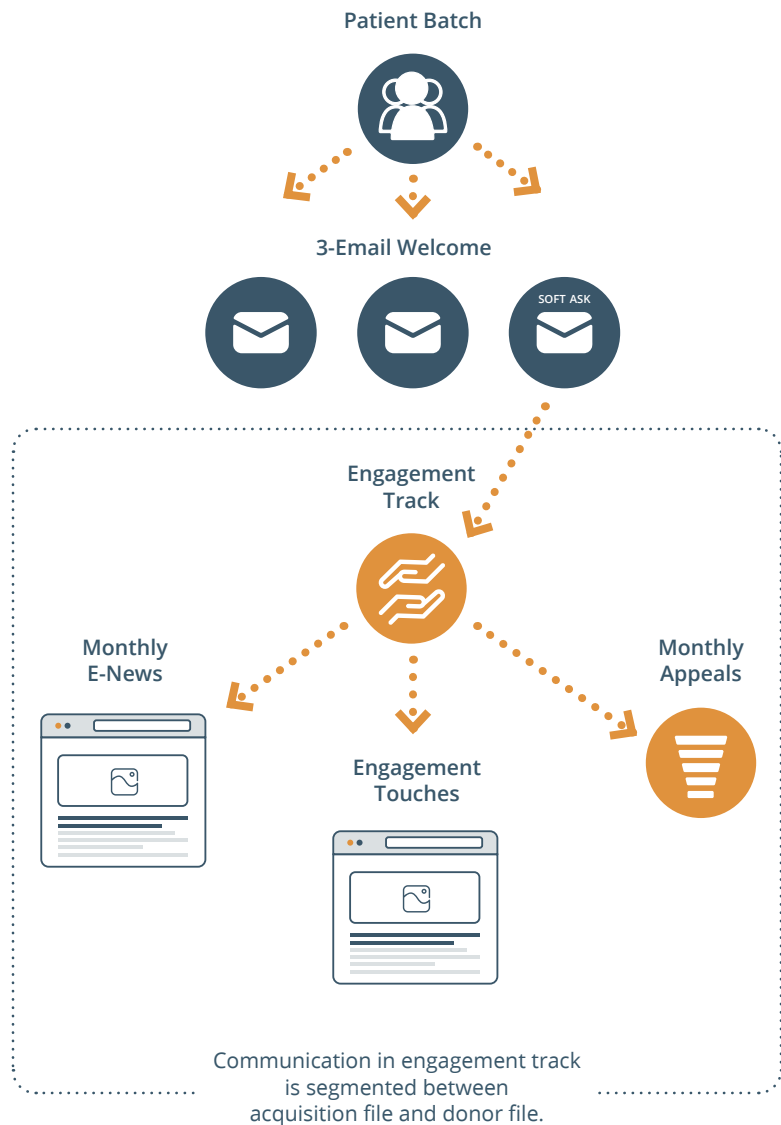## Engagement Focused

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.

Patient Batch

3-Email Welcome

SOFT ASK

Engagement Track

Monthly E-News

Engagement Touches

Monthly Appeals

Communication in engagement track is segmented between acquisition file and donor file.

Content

Once you've mapped out your grateful patient journey, the next step is to develop content that resonates with your audience—especially in your first 2–3 emails and throughout the stewardship cycle. Aim to offer a variety of content types and calls-to-action (CTAs), such as:

- Honor a Caregiver
- Patient stories and testimonial videos
- Impact stats, infographics, and updates
- Medical breakthroughs or innovation spotlights
- Share your story
- Peer-to-peer fundraising opportunities
- Special invites to patient-only events
- Birthday or milestone fundraising appeals
- Interactive quizzes
- Engagement or feedback surveys
- Profile-building forms or polls
- Content downloads (e.g., caregiver guides or wellness tips)

Be sure to align your content strategy with your goals—whether it's acquiring a first gift, deepening engagement, or identifying mid-level potential. The right mix of storytelling and interaction can lead to higher conversion and long-term value.

Early Results

Longer Journeys Drive Greater Impact

KEY INSIGHT 2025

In 2025, we're seeing strong performance from grateful patient journeys that extend beyond a single welcome or three-part series. Programs that layer in 6–8 touchpoints—starting with storytelling and ending with a clear solicitation pathway—are outperforming shorter journeys in both engagement and revenue.

These longer, educational series warm up prospects over time and often result in indirect giving—patients who first interact through surveys, caregiver tributes, or downloadable content and then return later to donate via your website, direct mail, or even peer-to-peer.

This approach also improves first-gift quality and gift retention, making longer journeys a smart investment for pipeline development and future annual giving growth.

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.

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.

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.

Conclusion

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

hello@doinggoodagency.com