Parlance®

FOR CLINICS & INDEPENDENT PRACTICES

THE PATIENT ACCESS FIELD GUIDE

Why patients still can't reach your clinic

Revenue starts when patients can reach your organization. These five readiness pillars determine whether calls become appointments or missed opportunities.

85%+
Routine calls self-served

1 in 3
Calls go unanswered

2×
Call volume, no added staff

30 days
Typical time to ROI

1.9B+
Calls Parlance has handled

THE ACCESS GAP

Patients are ready to schedule care. The question is can they reach you?

For many clinics, the phone remains the first point of friction. Call volume peaks on Monday mornings and immediately after lunch, precisely when front-office teams are balancing incoming calls with patients standing at the check-in desk. Calls are placed on hold, routed to voicemail, or abandoned altogether. For patients, the experience is simple: if access feels difficult, they move on.

A missed call is rarely just a missed call. It may represent an unbooked appointment, a delayed prescription refill, an unresolved clinical question, or a prospective patient who ultimately seeks care elsewhere. The impact rarely appears on a traditional operational report, which is precisely why patient access challenges often persist for years before they are addressed.

The challenges your clinic faces

Peak Call Volume

Monday mornings and post-lunch periods create the highest call demand for most clinics.

Voicemail Black Holes

Calls route to voicemail but messages aren't returned consistently.

After-Hours Demand

A significant portion of patient calls occur outside normal business hours.

Staff Burnout

Calls about scheduling, refills, billing, and directions consume valuable staff time.

Every patient call represents potential revenue.

The impact isn't always visible, but it adds up quickly. Appointments go unbooked, schedules remain underutilized, and patient demand never converts into revenue.

THE FRAMEWORK

The 5 Readiness Pillars

Patient access is not one process—it's a system. When one part of that system fails, patients experience delays, staff experience pressure, and organizations lose opportunities. These five pillars define the foundation of a high-performing access operation.

01 CAPACITY — Answer every call, even at peak.

WHERE CLINICS FALL SHORT

A third of calls are lost to hold or voicemail when volume is highest.

READY LOOKS LIKE

Every inbound call is answered on the first ring, no matter how many arrive at once.

02 AVAILABILITY — Be reachable when patients call.

WHERE CLINICS FALL SHORT

Most clinics route to voicemail after 5 PM and on weekends — the very hours a quarter of patients try.

READY LOOKS LIKE

Patients can schedule, refill, and get answers 24/7, with no hold times and no after-hours dead ends.

03 UNDERSTANDING — Let patients say what they need.

WHERE CLINICS FALL SHORT

Press-1 phone trees force patients to guess which menu fits — so they smash 0 or hang up.

READY LOOKS LIKE

Patients speak naturally and are understood the first time, in their own words.

04 ROUTING — Right place, the first time.

WHERE CLINICS FALL SHORT

Calls bounce between departments, transfer to the wrong team, or drop mid-handoff.

READY LOOKS LIKE

Callers reach the right team or person automatically — by name, department, or need.

05 RESOLUTION — Close the loop, don’t just transfer.

WHERE CLINICS FALL SHORT

Answering the phone is only the first step. Without integration into scheduling and patient workflows, many requests remain unresolved after the initial call.

READY LOOKS LIKE

Routine requests are completed in the call — appointment booked, refill logged, question answered.

SELF-ASSESSMENT

How Accessible Is Your Organization?

Use this assessment to evaluate the strength of your access operation and identify areas for improvement.

01 · CAPACITY

Is every call answered within the first few rings — even at 9 AM on a Monday?

☐ YES ☐ NO

02 · AVAILABILITY

Can a patient reach you to book or refill at 8 PM or on a Saturday?

☐ YES ☐ NO

03 · UNDERSTANDING

Can patients say what they need in plain words instead of pressing 1, 2, or 3?

☐ YES ☐ NO

04 · ROUTING

Do calls reach the right team the first time, without repeated transfers?

☐ YES ☐ NO

05 · RESOLUTION

Can a routine request be fully resolved on the call, not just routed to staff?

☐ YES ☐ NO

How to read your score.

5 Yes answers — You're delivering the access experience patients expect.

3–4 Yes answers — Access gaps are creating friction and costing scheduling opportunities.

0–2 Yes answers — Patients are struggling to reach care. It's time to rethink how you're handling calls.

THE FIX ISN'T MORE STAFF

It's answering every call — automatically.

Parlance is healthcare voice AI that answers, understands, schedules, and routes routine calls in real time — during the rush, after hours, every time. It picks up where staffing can't, and it closes all five pillars at once because it's built for the phone, the way healthcare actually uses it.

PROVEN AT HEALTHCARE'S SCALE

1.9B+	400+	85%+	30 days
patient calls handled	health systems served	routine calls self-served	typical time to ROI

Virtua Health

Doubled annual call volume from 200K to 400K — with no added staff.

HCA Healthcare

70%+ of calls automated across 75+ hospitals.

See what Parlance would reclaim for your clinic.

Hear Parlance answer a live clinic call, or estimate your annual savings in two minutes.

Schedule a live demo →

Calculate your ROI →