

How to Transform Your Patient Referrals with Data & Automation

Tuesday July 26 12-1pm CST

See how ReferralPoint, an Allscripts EHR Certified Partner, helps increase shared savings and fee-for-service revenue while improving staff efficiency and patient experience.



Developer Partner

Agenda & Housekeeping

- ① Allscripts Partnership
- ② Why We're Here
- ③ 3 Big Problems
- ④ What's the Business Impact?
- ⑤ Strategies & Areas to Focus
- ⑥ Success Stories

The webinar recording & information sources will be distributed via email.



Matt Cheatham
Director, Client Success



John Henson
Director, Marketing



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Who is ReferralPoint?

FEE-FOR-SERVICE & VALUE-BASED CARE STRATEGIES THAT USE
DATA & AUTOMATION TO TRANSFORM PATIENT REFERRALS

1 INCREASE REVENUE & SHARED SAVINGS

2 IMPROVE STAFF EFFICIENCY

3 ENHANCE PATIENT EXPERIENCE

 **ANSWER HEALTH**

 **PRIVIA**
HEALTH

 **Vanguard**
Medical
Group


PQA
Patient Quality Alliance

 **Penn Medicine**
Princeton Health


RGVHA
Rio Grande Valley Health Alliance, LLC.

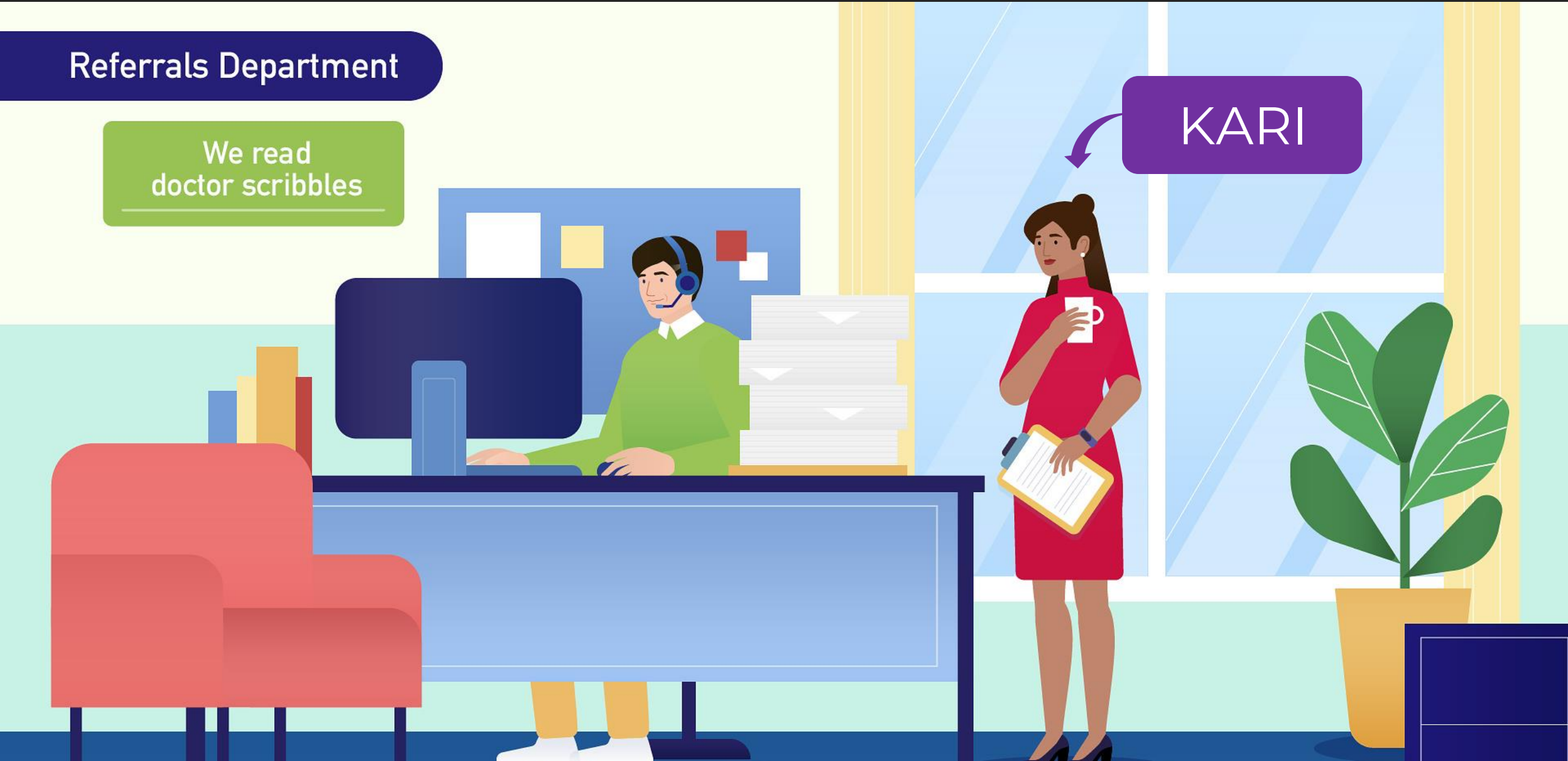
Health Systems | ACOs | Medical Groups | PCP Groups | FQHCs

Why We're Here...Meet Kari

Referrals Department

We read
doctor scribbles

KARI



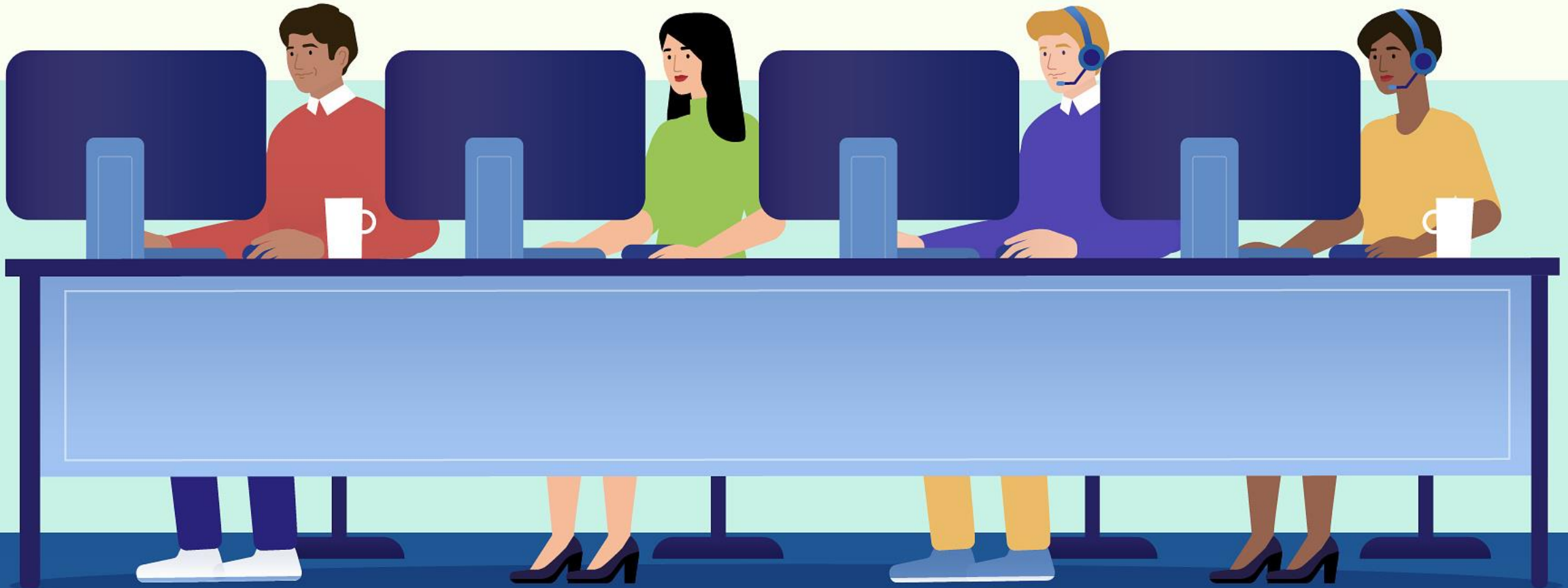
No Data. No Automation.

Prior Authorizations
Submitter

Referral Sender

Appointment
Scheduler

Loop Closer



PROBLEMS.
FINANCIAL IMPACT.
STRATEGIES.

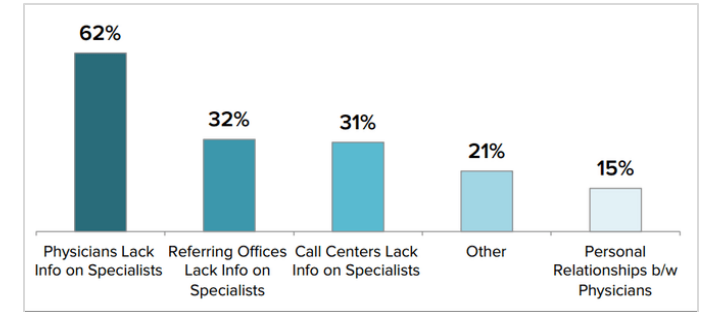
Referral Stats

Closing the Referral Loop: an Analysis of Primary Care Referrals to Specialists in a Large Health System

[Malhar P. Patel](#), BSPH,¹ [Priscille Schettini](#), BS,¹ [Colin P. O'Leary](#), BA,¹ [Hayden B. Bosworth](#), PhD,^{1,2,3}
[John B. Anderson](#), MD, MPH,⁴ and [Kevin P. Shah](#), MD, MBA⁴

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35%
Leakage Rate



Health Reform and Physician-Led Accountable Care The Paradox of Primary Care Physician Leadership

Farzad Mostashari, MD, MPH¹; Darshak Sanghavi, MD¹; Mark McClellan, MD, PhD¹

► [Author Affiliations](#) | [Article Information](#)

JAMA. 2014;311(18):1855-1856. doi:10.1001/jama.2014.4086

\$5,000
Lost Revenue
per OON Referral

7.8%
Referrals are
Clinically
Unnecessary

Estimating the cost of no-shows and evaluating the effects of mitigation strategies

[Bjorn P Berg](#)¹, [Michael Murr](#)², [David Chermak](#)³, [Jonathan Woodall](#)³, [Michael Pignone](#)⁴,
[Robert S Sandler](#)⁵, [Brian T Denton](#)⁶

18%
No Show Rate

37
Minutes to Manage
a Single Referral

Kari's World

Kari's Referral Metrics

- Number of Patients	100,000
FFS Patients	60,000
VBC Patients	40,000
Number of PCPs	50
EHR	Allscripts
Centralized Referral Desk	No
Number of Referral Coordinators	20
+ Referrals per Month	14,000
- Time Spent on a Single Referral	37.5
Time Spent on Referral Selection	13
Time Spent on Prior Authorizations	10
Time Spent on Sending Referral, Scheduling, & Closing the Loop	14.5
- Current Referral Metrics	
Leakage Percentage	30%
Average Revenue Lost per Out-of-Network Referral	\$4,000
Percent of Clinically Unnecessary Referrals	7.8%
Average Referral Appointment Wait Times	21
Closed Loop Percentage	34%
Average Revenue per PCP Visit	\$106
Average Cost per Specialty Visit	\$310
No Show Percentage	18%
Annual Patient Attrition	13%

Referral Team Step-by-Step Process

- CLIENT CHORES (MINUTES)	38
+ Network Management	
- Referral Selection	13
eConsult - Consult w/Specialist to reduce unnecessary routine referrals	0
Take Referral Order to Create Referral Doc/Update EHR	1
Prioritize Referrals Orders - By Assigned, Priority, Days Left	1
Verify Patients Insurance	2
Check Preferred Specialist Spreadsheet	3
Check Specialist takes Insurance Spreadsheet	2
If Needed Research Subspecialty	1
Distance - Google Maps if within ____ miles of patient home	1
Language - Match Patient/Specialist	1
Distribution Balance to Specialists	
Include Patient Preferences	1
+ Prior Authorizations	10
+ Send Referral	2
- Scheduling	6
By STAFF - Call/Email Specialist to Schedule Appt	1.5
By STAFF - Call/Email Patient the Date/Time of Appt	1.5
By PATIENT - Get Patient the Specialist info to Schedule appt	1
By PATIENT - If Specialist not available...re-issue another Specialist	1
Text/Email/Call to Confirm with Patient if Scheduled	1
+ Close the Loop w/Patient	4
+ Close the Loop w/Specialist	2.5

6 Problems

LEAKAGE

HIGH-COST
PROVIDERS & FACILITIES

REFERRAL CHORES

OPEN QUALITY &
HCC GAPS

MANUAL CARE
COORDINATION

POOR PATIENT
EXPERIENCE

**KEEP PATIENTS
IN-NETWORK**

**PRIORITIZE REFERRALS
BY CONDITION**

**GET PRIOR
AUTHS APPROVED**

**DON'T LET PATIENTS FALL
THROUGH THE CRACKS**

**BUILD TRUST
WITH PATIENTS**

**BUILD RELATIONSHIPS
WITH SPECIALISTS**

**SEND DETAILS TO
THE SPECIALIST**

**GET APPOINTMENTS
SCHEDULED**

**KEEP THE
EHR UPDATED**

**CLOSE THE
LOOP**



Out-of-Network Referrals or Rendered Services

LEAKAGE

HIGH-COST
PROVIDERS & FACILITIES

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HCC GAPS

MANUAL CARE
COORDINATION

POOR PATIENT
EXPERIENCE

“We have no method to control outmigration. I want to know where utilization is occurring whether it’s inside or outside our network of physicians.”
– **Health System, Operations Manager**

- **Out of network referrals**
- **PCP service leakage**

- **Patients unaware of services**
- **Not using data at the time of referral**
- **Not analyzing current referrals trends**
- **Not analyzing rendering providers/services**

Out-of-Network Referrals or Rendered Services

LEAKAGE
HIGH-COST PROVIDERS & FACILITIES
REFERRAL CHORES
OPEN QUALITY & HCC GAPS
MANUAL CARE COORDINATION
POOR PATIENT EXPERIENCE

▣ REDUCE LEAKAGE	\$203,326,400
+ REDUCE OUT OF NETWORK REFERRALS (LEAKAGE)	\$201,600,000
+ REDUCE PCP SERVICE LEAKAGE	\$1,726,400



▣ REDUCE OUT OF NETWORK REFERRALS (LEAKAGE)	\$201,600,000
Referrals Per Month	14,000
Leakage Percentage	30%
Referrals Leaked Out of Network	4,200
Lost Revenue Per Referral	\$4,000
Monthly Lost Revenue	\$16,800,000

Out-of-network primary care is associated with higher per beneficiary spending in medicare ACOs

Sunny C. Lin, Phyllis L. Yan, Nicholas M. Moloci, Emily J. Lawton, Andrew M. Ryan, Julia Adler-Milstein, John M. Hollingsworth

Savings per Month	\$143,867
Total Cost of Leaked PCP Services Per Year	\$1,726,400

Strategies to Reduce Leakage

LEAKAGE

Gain Visibility into Existing Referral Patterns

- Look at Claims – Identify referral relationship (30, 60, 90 day) patterns
- Pinpoint PCP Leakage
- Analyze CPT codes
- Analyze location of service
 - Urgent care
 - ER
 - Competition

Engage Providers

- Use reports to discuss referral patterns, identify barriers/roadblocks

Engage Patients

- Use patient engagement technology to reach out and educate patients on your services and drive them into the PCP office

HIGH-COST
PROVIDERS & FACILITIES

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Strategies to Reduce Leakage

LEAKAGE

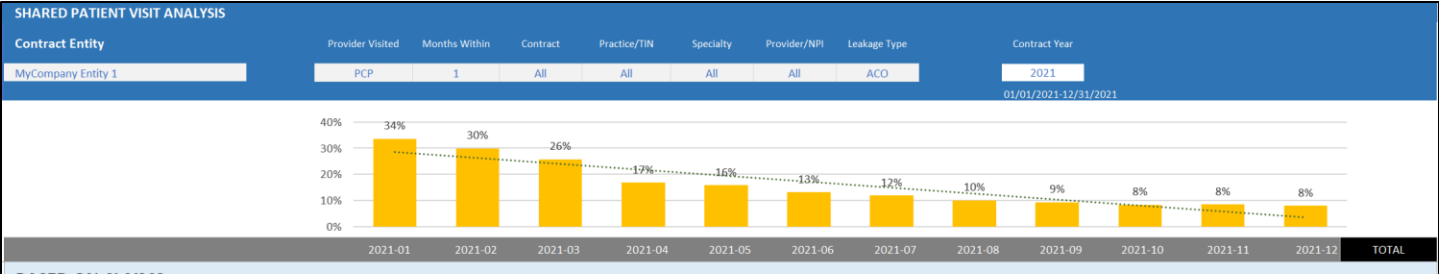
HIGH-COST PROVIDERS & FACILITIES

REFERRAL CHORES

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MANUAL CARE COORDINATION

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BASED ON CLAIMS

# Primary Care Providers	125	126	130
Attributed Patients Overall	16,660	16,652	16,690
Patients Seen Each Month	3,586	2,993	2,910

PATIENT SEEN 1 MONTH(S) RANGE

% E&M Visits resulting in Specialist Visit	31%	29%	25%
# E&M (PCP) Claims	4,483	3,741	3,637
# Total PCP to Specialist/Facility Visits	1,815	1,500	1,215
# PCP to Specialist Visits	1,390	1,085	909
# PCP to Facility Visits	425	415	306
% Total Out of [ACO/Network] Visits	94%	90%	27%
# PCP To Out of [ACO/Network] Specialist Visits	437	302	225
# PCP To Out of [ACO/Facility] Facility Visits	171	154	101
# Total Out of [ACO/Network] Visits	608	456	326

Specialty \$ Leakage %

	34%	30%	26%
# of Specialist Claims	32,098	28,341	20,754
Total Paid - Specialist	\$ 4,547,643	\$ 3,857,624	\$ 6,847,343
Out of Specialty [ACO/Network] Spend	\$ 1,529,786	\$ 1,152,754	\$ 1,767,890

Facility \$ Leakage %

	17%	19%	20%
# Facility Claims	2,832	2,745	2,040
Total Paid - Facility	\$ 7,110,282	\$ 6,677,255	\$ 5,773,272
Out of Facility [ACO/Network] Spend	\$ 1,222,954	\$ 1,301,894	\$ 1,150,248

Avg PEAQ Score - All Referrals

	75	76	81	75
Avg IdealMATCH Score - In [ACO/Network]	91	95	96	94
Avg IdealMATCH Score - Out of [ACO/Network]	59	56	67	55

Potential Savings

Savings If Reduced Leakage by 10%	\$ 275,274	\$ 245,465	\$ 291,814	\$ 212,656
Savings If Referred to Lowest Cost by 10%	\$ 1,165,793	\$ 1,053,488	\$ 1,262,062	\$ 1,164,450

PCP VIEW : FEB-2021

MyCompany Entity 1|PCP|VISITS WITHIN 1 MONTH(S)|Contract 1|ACO

NPI	TIN	SPECIALIST	SPECIALTY	#PATIENT	ASSUMED REFERRAL	RP REFERRAL	AVG RISK SCORE	SPECIALIST IN	SPECIALIST OUT	TOTAL SPECIALIST	SPECIALIST \$ IN	SPECIALIST \$ OUT	SPECIALIST \$ TOTAL	SPECIALIST LEAKAGE	FACILITY LEAKAGE
1699034462	999888777	SMITH, RONDEL	Internal Medicine	9,543	2,348	2,433	5.51	54	31	85	\$ 1,659,894	\$ 1,085,176	\$ 2,745,070	40%	24%
1770793			Pediatric Medicine	272	54	55	0.03	22	11	33	\$ 383,843	\$ 191,922	\$ 575,765	33%	2%
150869			Pediatric Medicine	372	76	76	1.11	13	12	25	\$ 243,261	\$ 130,986	\$ 374,247	35%	12%
14674			Family Practice	1,010	202	206	3.03	17	14	31	\$ 201,518	\$ 115,153	\$ 316,671	36%	15%
19028			Family Practice	589	118	120	1.75	11	11	22	\$ 152,866	\$ 106,229	\$ 259,094	41%	30%
18513			Pediatric Medicine	350	70	71	1.04	14	12	26	\$ 134,345	\$ 67,173	\$ 201,518	33%	12%
17008			Pediatric Medicine	566	113	115	1.68	25	24	49	\$ 99,652	\$ 44,290	\$ 143,941	31%	16%
16290			Internal Medicine	2,400	480	490	7.19	25	11	36	\$ 89,168	\$ 35,985	\$ 125,153	29%	8%
14977			Family Practice	1,018	204	208	3.21	12	20	32	\$ 63,285	\$ 42,387	\$ 105,672	40%	15%
16896			Family Practice	495	99	101	1.48	14	18	32	\$ 72,213	\$ 29,940	\$ 102,153	29%	11%
11848			Internal Medicine	1,171	234	239	3.48	22	19	41	\$ 57,576	\$ 28,788	\$ 86,365	33%	9%
18513			Pediatric Medicine	1,020	204	208	3.03	9	10	19	\$ 36,273	\$ 21,303	\$ 57,576	37%	8%
14472			Internal Medicine	802	160	164	2.62	7	6	13	\$ 39,403	\$ 17,256	\$ 56,659	30%	18%

SPECIALTY VIEW : FEB-2021

MyCompany Entity 1|PCP|VISITS WITHIN 1 MONTH(S)|Contract 1|ACO

SPECIALTY	#PATIENTS	# CLAIMS	ASSUMED REFERRALS	RP REFERRALS	AVG RISK SCORE	TOTAL VISITS	SPECIALIST IN	SPECIALIST OUT	TOTAL SPECIALIST	SPECIALIST \$ IN	SPECIALIST \$ OUT	SPECIALIST \$ TOTAL	SPECIALIST LEAKAGE
General Surgery	193	204	213	222	5.76	164	6	3	9	\$ 185,835	\$ 274,125	\$ 459,960	33%
Gyn	124	130	132	134	4.99	99	1	1	2	\$ 87,465	\$ 207,375	\$ 294,840	27%
Card	106	110	126	142	7.60	98	12	4	16	\$ 316,800	\$ 180,500	\$ 497,300	21%
Card	179	188	194	200	1.75	170	4	2	6	\$ 63,510	\$ 139,685	\$ 223,195	33%
Card	194	204	207	210	1.06	189	2	1	3	\$ 109,968	\$ 62,160	\$ 172,128	33%
Card	248	262	269	276	1.04	243	4	3	7	\$ 35,805	\$ 47,985	\$ 83,790	26%
Card	143	150	155	160	2.37	131	3	2	5	\$ 45,460	\$ 44,980	\$ 90,440	35%
Card	94	99	101	103	4.12	73	1	1	2	\$ 432,900	\$ 31,500	\$ 464,400	45%
Card	193	204	215	226	3.86	174	7	4	11	\$ 113,575	\$ 28,840	\$ 142,415	36%
Card	124	131	133	135	1.03	119	1	1	2	\$ 26,625	\$ 14,840	\$ 41,465	35%
Card	34	36	38	40	19.19	33	1	1	2	\$ 8,400	\$ 13,300	\$ 21,700	39%
Card	58	61	64	67	6.52	51	2	1	3	\$ 53,900	\$ 13,200	\$ 67,100	33%
Card	124	131	135	139	1.68	116	3	1	4	\$ 32,980	\$ 11,550	\$ 44,530	25%
Card	79	83	86	89	3.24	63	2	1	3	\$ 101,205	\$ 10,800	\$ 112,005	33%
Card	37	39	41	43	8.43	82	1	1	2	\$ 3,864	\$ 1,470	\$ 5,334	37%

SPECIALIST VIEW : FEB-2021

MyCompany Entity 1|PCP|VISITS WITHIN 1 MONTH(S)|Contract 1|ACO

NPI	TIN	SPECIALIST	SPECIALTY	#PATIENT	CLAIMS	ASSUMED REFERRAL	RP REFERRAL	\$ TOTAL	NETWORK	AVG RISK SCORE	AVG PATIENT	AVG TTPS
1114990033	999888777	IHA SANJAYA	Cardiovascular Disease	9	9	10	11	\$ 76,950	OUT	0.64	4.60	14
1689679		DEEPA	Cardiovascular Disease	8	8	9	10	\$ 60,800	OUT	4.00	4.56	21
19129		KEY	Cardiovascular Disease	6	6	7	8	\$ 34,200	OUT	7.00	4.57	10
19624			Cardiovascular Disease	3	3	4	5	\$ 8,550	OUT	6.00	4.59	13
18715		OT	Cardiovascular Disease	12	13	14	15	\$ 70,200	IN	5.48	4.63	16
11646			Cardiovascular Disease	11	12	13	14	\$ 59,400	IN	5.48	4.62	21
15485			Cardiovascular Disease	11	12	13	14	\$ 59,400	IN	3.51	4.65	16
13767			Cardiovascular Disease	10	11	12	13	\$ 49,500	IN	0.64	4.65	18
19826			Cardiovascular Disease	6	6	7	8	\$ 16,200	IN	1.30	4.54	17
19028			Cardiovascular Disease	6	6	7	8	\$ 16,200	IN	7.19	4.57	11
11543			Cardiovascular Disease	5	5	6	7	\$ 11,250	IN	7.19	4.59	16
17402			Cardiovascular Disease	5	5	6	7	\$ 11,250	IN	0.64	4.07	12
17806			Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	12.00	4.53	16
17606			Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	5.48	4.60	15
13766		EDO	Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	1.99	4.63	16
125535			Cardiovascular Disease	2	2	3	4	\$ 1,800	IN	10.50	4.56	10

High-Cost, Low-Quality Providers & Facilities

LEAKAGE

HIGH-COST
PROVIDERS & FACILITIES

REFERRAL CHORES

OPEN QUALITY &
HCC GAPS

MANUAL CARE
COORDINATION

POOR PATIENT
EXPERIENCE

“We are struggling to keep our list of preferred specialists updated and shared with our participating practices.”

– PCP Group, Operations Director

- Referring to high-cost specialists
- Referring to high-cost facilities

- Not building preferred narrow networks
- Not using data at the time of referral
- Not analyzing current referrals trends
- Not analyzing rendering providers/services

Out-of-Network Referrals or Rendered Services

LEAKAGE

HIGH-COST PROVIDERS & FACILITIES

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MANUAL CARE COORDINATION

POOR PATIENT EXPERIENCE

REDUCE PROVIDER & FACILITY COSTS	\$15,035,244
+ REFER TO LOWER COST SPECIALISTS (PART B)	\$8,591,568
+ REFER TO LOWER COST HOME HEALTH	\$301,309
+ REFER TO LOWER COST SNF	\$198,674
+ REFER TO LOWER COST REMAINING FACILITIES (PART A)	\$5,943,694

- REFER TO LOWER COST SPECIALISTS (PART B)	\$8,591,568
Number of VBC Patients	40,000
Estimated Medicare % Part B	
- REFER TO LOWER COST REMAINING FACILITIES (PART A)	\$5,943,694
Number of VBC Patients	40,000

Lightbeam Client Amarillo Legacy Medical ACO Lowers Skilled Nursing Facility, Home Health Utilization by Over 15% in Single Quarter

The Texas-based ACO also decreased their SNF utilization by \$8 PMPM and their HHA utilization by \$12 PMPM in one year

IRVING, TX – December 1, 2020 – Lightbeam Health Solutions, the leader in end-to-end population health management solutions and services, is pleased to announce the incredible success of Amarillo Legacy Medical ACO (ALMA) in their substantial reduction of skilled nursing facility (SNF) and home health agency (HHA) utilization by 15% in one quarter. Through the Lightbeam platform, ALMA found a

- REF	
VE	
Pe	
SN	
PM	
LE	
Ne	
SNF Expenditure Savings PMPY	\$120.26
Annual Savings Opportunity	\$198,674

\$895
60%
\$537
\$257,747,040
2.5%
\$5,943,694
\$301,309
\$198,674
\$301,309

Strategies to Reduce Provider & Facility Costs

LEAKAGE

Identify the Goals of Your Organization & Contracts

- FFS revenue
- Reducing total cost of care
- Focusing on behavioral health

HIGH-COST
PROVIDERS & FACILITIES

Use Existing and/or 3rd Party Data to Rank Providers by Specialty/Facility

- Use available data to start
 - DRG analysis by facility
 - Rendering Part B by CPT codes
- Assign weights based on goals to create overall score

REFERRAL CHORES

Build Specific Referral Networks

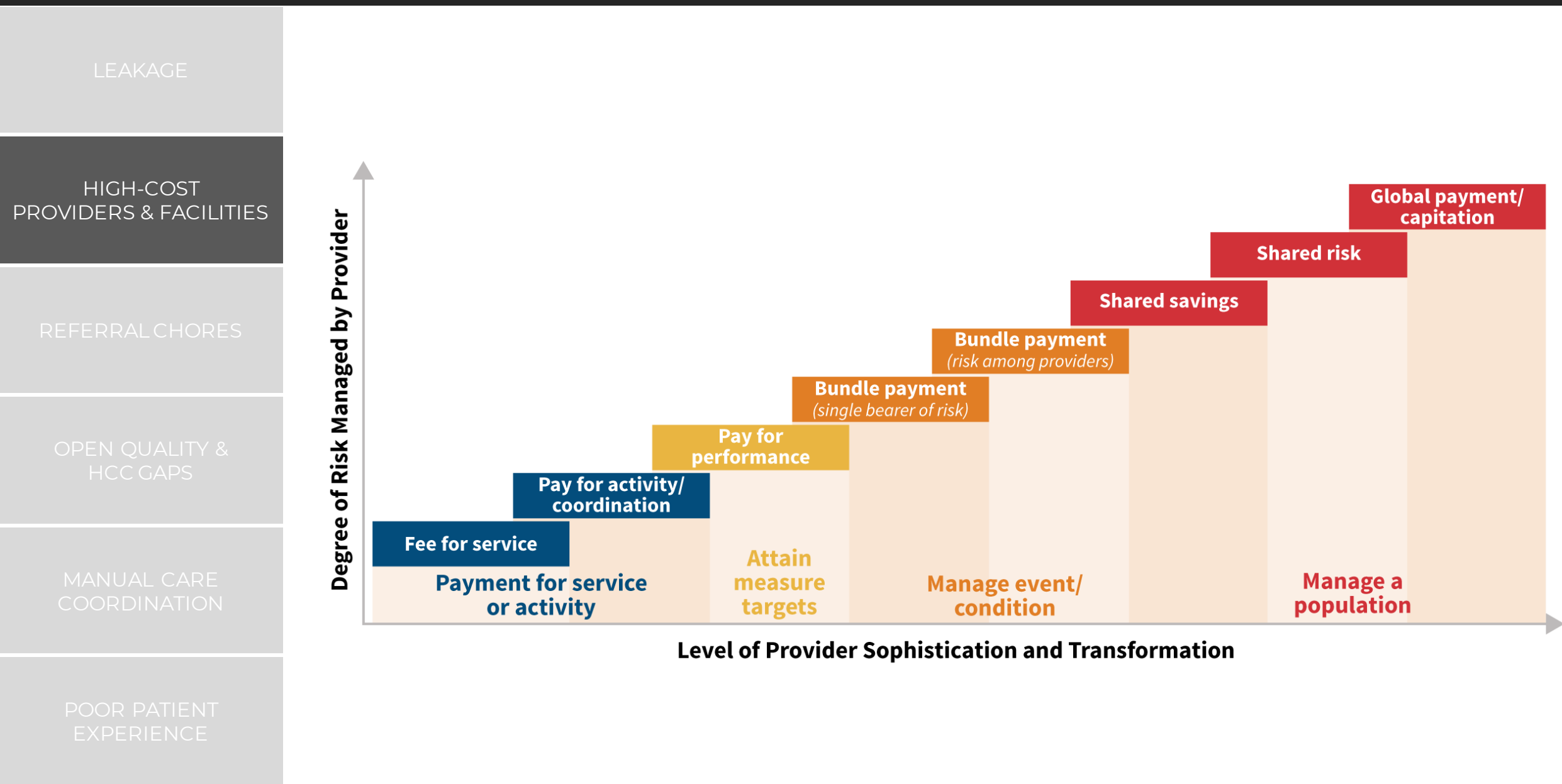
- Employed & Affiliated
- VBC Networks: MSSP ACO, Medicare Advantage
- Behavioral Health Program
- High-Value Commercial
- By Geography

OPEN QUALITY &
HCC GAPS

MANUAL CARE
COORDINATION

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EXPERIENCE

Strategies to Reduce Provider & Facility Costs



Strategies to Reduce Provider & Facility Costs

LEAKAGE

HIGH-COST PROVIDERS & FACILITIES

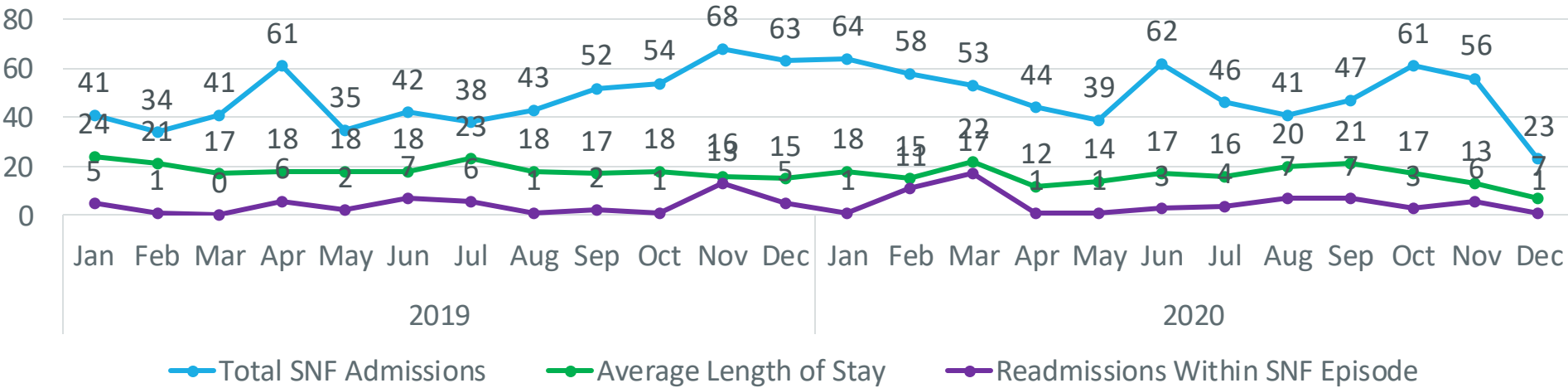
REFERRAL CHORES

OPEN QUALITY & HCC GAPS

MANUAL CARE COORDINATION

POOR PATIENT EXPERIENCE

SNF Overview



SNF Utilization by Facility

Facility Name	Total SNF Admissions	Total Patients	Average Length of Stay	Average Cost Per Patient	Average Cost Per Episode	Inpatient Readmission Rate During Episode
*Facility must have at least 10 SNF admissions to be included						
NULL	399	95	11	\$ 6,928	\$ 1,650	0%
BANK OF AMERICA	251	216	22	\$ 11,367	\$ 9,782	12%
LEARN	119	104	19	\$ 11,201	\$ 9,789	20%
HEALTH	82	67	20	\$ 10,862	\$ 8,875	7%
AMERICAN	74	61	21	\$ 11,348	\$ 9,354	19%
ST. LOUIS	58	47	20	\$ 10,748	\$ 8,710	19%
AMERICAN	55	47	18	\$ 10,945	\$ 9,353	7%
CHRYSLER	24	21	27	\$ 13,883	\$ 12,148	38%
HEALTH	24	22	29	\$ 15,072	\$ 13,816	4%
BORGERT ENTERPRISES, LLC	13	10	18	\$ 10,845	\$ 8,342	8%

Manual Referral Chores

LEAKAGE

HIGH-COST
PROVIDERS & FACILITIES

REFERRAL CHORES

OPEN QUALITY &
HCC GAPS

MANUAL CARE
COORDINATION

POOR PATIENT
EXPERIENCE

"In general, it takes too much time. We constantly have a backlog of referrals and prior authorizations. Our staff is spending too much time chasing patients."
– **Regional Referral Specialist, FQHC**

- **Multiple apps for a referral** (Excel, Google Maps, Smartsheets)
- **Referral & prior authorization backlogs**
- **Chasing patients & specialists**
- **Patient no shows**

- **No automation**
- **No integration of referral systems**
- **No connection to referred to MDs EHR**
- **No team dedicated to care coordination**



Manual Referral Chores

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AUTOMATE REFERRAL CHORES		\$8,204,322
- MANUAL REFERRAL MANAGEMENT	- REFERRAL SELECTION	\$699,972
+ REFERRAL SELECTION	Time Spent on a Single Referral Selection	13
+ PRIOR AUTHORIZATIONS	Labor Rate	\$19.23
+ CLOSING THE LOOP (Send/Schedule/Close w	Cost Per Referral	\$4.17
+ REDUCE PATIENT NO SHOWS	Referrals Per Month	14,000
+ CLOSING THE LOOP	Cost Per Month	\$58,331
		\$699,972
- CLOSING THE LOOP	110,880	\$161,532
Referrals Per Month	14,000	10
Estimated Closed Loop Percentage	34%	\$19.23
Open Referrals per Month	9,240	\$3.21
Open Referrals per Year	110,880	4,200
Referrals Per Month	14,000	\$13,461
Leakage Percent	30%	\$161,532
Referrals In Network	9,800	
Revenue per Visit	\$310	
Patient No Show Percentage	18%	
No Shows per Month	1,764	
Lost Revenue per Month	\$546,840	
Lost Revenue per Year	\$6,562,080	
	Cost Per Month	\$65,062
	Cost Per Year	\$780,738

Strategies to Automate Referral Chores

LEAKAGE

HIGH-COST
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MANUAL CARE
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Automate!

- Integrate provider directory with referral workflow
 - Allscripts
 - Eliminate spreadsheets
- Evaluate prior-authorization assistance
- Integrate patient engagement into the referral workflow
 - Schedule by staff
 - Schedule by patient

Consider Staff Extension Services

- Outsource some or all referral chores

Tips on Reducing No Shows

- Automate appointment reminders
- Use the patient's preferred contact method
- Reduce time between the referral & appointment
- Share pre-appointment information with the patient and specialist
- Automatically schedule follow up appointment with PCP

Strategies to Automate Referral Chores

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FAX COVER – PATIENT REFERRAL



Dr Angela Shod,

I am referring one of my patients to see you. Please see the following page for the patient's contact information and other details of the referral.

Our practice would like to focus our referrals on those specialists who are good communicators not only with patients but with us, the primary care provider. It is also helpful to us if we know a little more about your practice and which insurances you accept. We also ask our patients to give us feedback about their experience with you and are happy to provide that back to you.

If you would like to continue to receive referrals from us, please go to www.referralpoint.com/specialistinfo and enter your invitation code: **1234567**

Update
Insurances you
take, Schedule,
and Referrals
you can Receive

CRM to track
status and patient
experience for all
your Referrals,
plus easily update
PCP to close the
loop.

The information you provide will help us make better referrals to you and then track those referrals as well as patient experience.

I look forward continuing to work with you.

Dr. Mc Carrick



REFERRAL: SCHEDULE BY PATIENT

REFERRAL ID: 1140
PROCESSED BY: System Admin

Vanguard Medical Group

PATIENT: ROBERT DEMO

INITIATOR/REFER FROM: ROWAN CLAYHANGER

DOB: 1/1/1970 Age: 51 Address: , ,
Phone: (682) 593-3393 Gender: Male Phone: 855-REFER-ME
Insurance: No Contract (855-733-3763) Urgency: **Within 7 Days**
Valid Through: Expires:
NPI: 1669544003 Auth#:
Visits: Specialty: Dermatology

RECIPIENT INSTRUCTIONS - Authorized by ROWAN CLAYHANGER on TBD at TBD

I appreciate your evaluation and recommendations.
To help us close the loop please ...

1. Call the Patient to ensure they get Scheduled
2. Determine insurance eligibility prior to visit
3. Confer with us if secondary referrals are needed
4. Fax items below back to

REFERRAL REASON:

DIAGNOSIS CODES:

CPT CODES:

TRANSITION OF CARE:

WE WILL ALSO PROVIDE:

- What is Appt Date _____ Time _____ ?
- If something is missing _____ ?
- Patient: [] Cancelled, [] No Show
- Consult Note within 72 hours of office visit.

PATIENT INSTRUCTIONS

RECIPIENT/SPECIALTY: Dermatology

Since we know you and the specialist, we're able to
match you with the right one that ...

1. Accepts your insurance
2. Saves you time and money
3. Is close to your home or work
4. Keeps us informed about your care
5. Provides the best patient experience

First, call the RECIPIENT to schedule your Appt.

Then, our auto-referral coordinator will follow up with
Texts, Emails, or Calls to ensure you were able to schedule
your appt and receive the care you need.

NOTE: If assistance needed, please call 855-REFER-ME
(855-733-3763)

PATIENT CONFIRMATION -I hereby authorize the release of medical information related to the services described herein.

Patient Signature: _____ Date: _____

Strategies to Automate Referral Chores

LEAKAGE

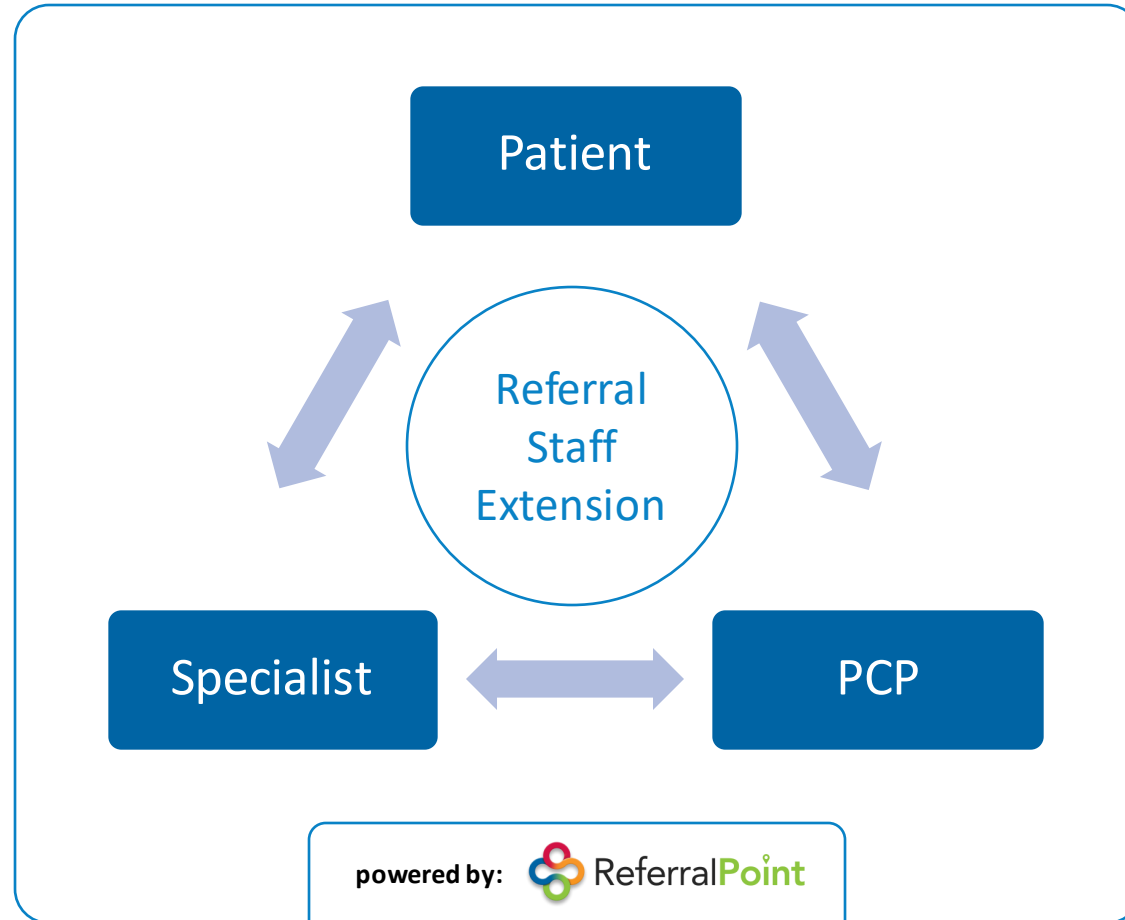
HIGH-COST
PROVIDERS & FACILITIES

REFERRAL CHORES

OPEN QUALITY &
HCC GAPS

MANUAL CARE
COORDINATION

POOR PATIENT
EXPERIENCE



ReferralPoint



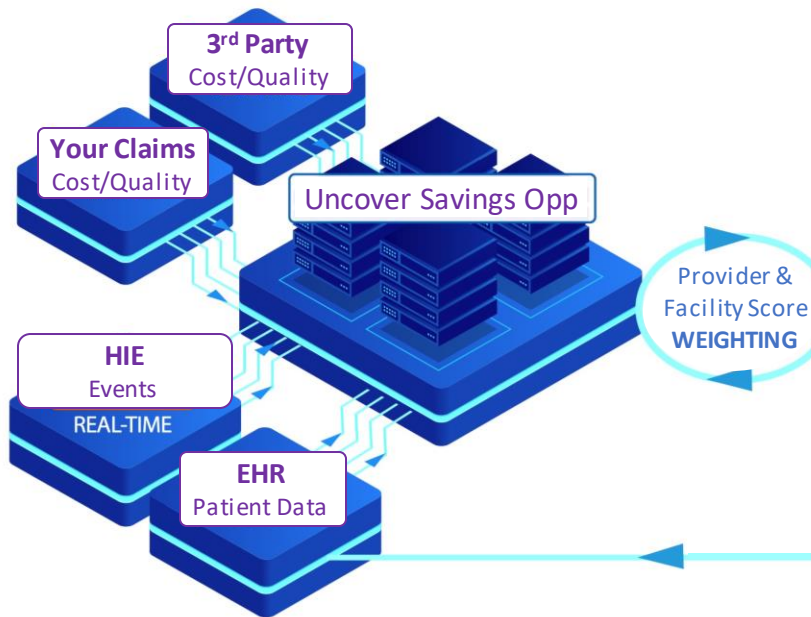
Referral Selection



No More
Spreadsheets

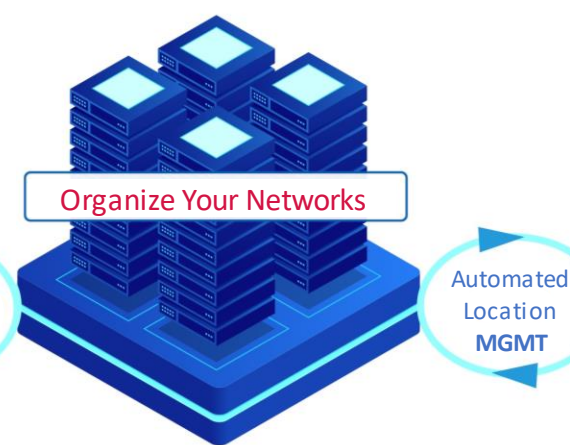
1 Intelligent DATA™

We ingest your patients, claims and even 3rd party claims to create weighted Providers and Facilities Scores and then match them to your Patients.



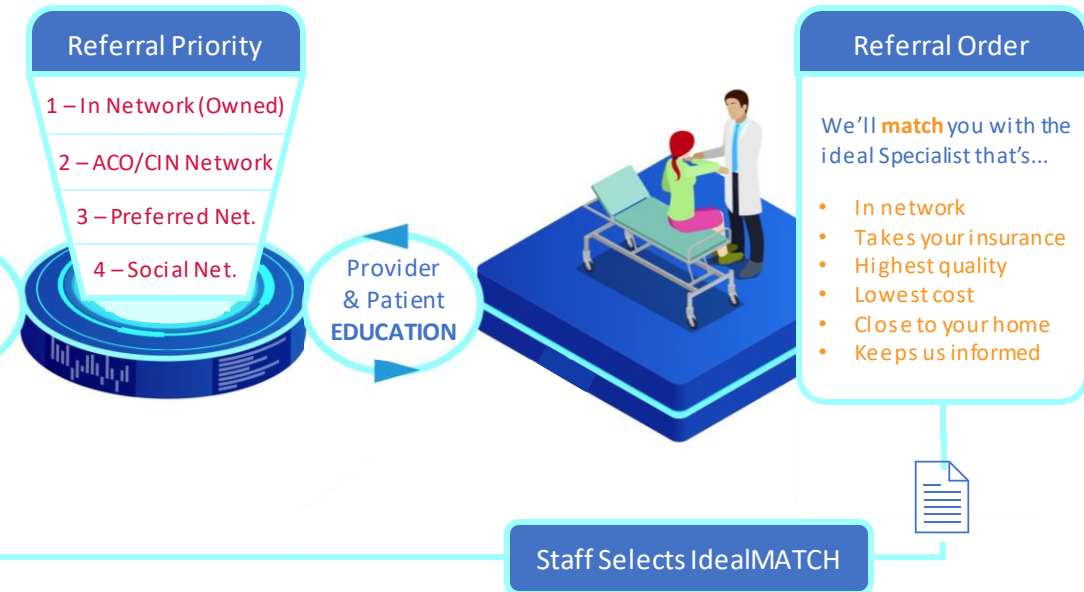
2 Network MANAGEMENT™

Then you can custom build, add, and remove Providers/Facilities within Preferred Networks for fee for service, value-based contracts or social networks.



3 Ideal MATCH™

Then you can help providers staff **automate** selecting the IdealMATCH in just **seconds** to in-network, high quality, low-cost providers/facilities.



REDUCE COST
10%

+ REDUCE LEAKAGE
80%

+ REDUCE ADMIN TIME
90%

The screenshot displays the Allscripts IdealMATCH interface. At the top, the Allscripts logo is on the left, and a "SUBMIT" button is on the right. Below the logo, a patient profile for "John Smith" is shown. A "REFER TO:" field is present, followed by an orange "IdealMATCH" button. A large blue arrow points from this button to a map of the Dallas area. On the left side, there are "Patient Filters" and a "Top3" list of providers. The "Top3" list includes:

- ☒ Clark Kent (marked with a green star icon)
- ☐ Lee Cooper (marked with a yellow thumbs up icon)
- ☐ Amy Fletcher (marked with a red thumbs down icon)

A black callout box with green text highlights the following benefits for Clark Kent:

- ✓ In Network
- ✓ Lowest Cost
- ✓ Highest Quality
- ✓ Closes the Loop

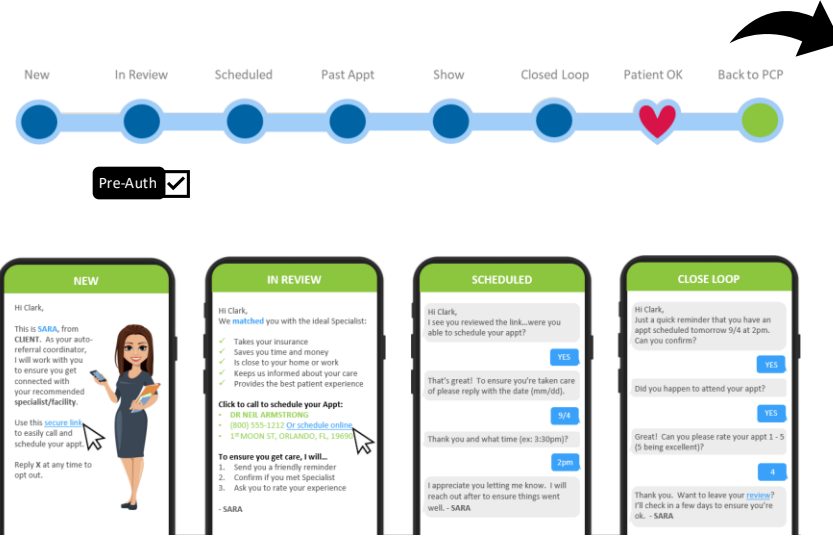
The map shows various locations around Dallas, including Coppell, Richardson, Garland, Rowlett, Rockwall, University Park, The Dallas Arboretum and Botanical Garden, Mesquite, Balch Springs, Fort Worth, Arlington, Grand Prairie, and Heartland. Several locations are marked with icons: a green star for Clark Kent, a yellow thumbs up for Lee Cooper, and a red thumbs down for Amy Fletcher.



Referral Management

4 AutoSchedule CLOSELOOP™

Automate English or Spanish texts/emails to schedule quicker, reduce no shows, close the loop, and ensure patient gets back to PCP **regardless of EHR**.



5 AutoUpdate STAFFTOOLS™

Automate pre-auth, two-way text with patients, and a CRM to track patients from referral order through closing the loop to increase productivity.

Referral Tracking

PATIENT TO SCHEDULE: 15, START TO SCHEDULE: 15, PAUSED APPT NOT CLOSED YET: 15, OVERDUE or a Status: 15

Filter Rows: Filter to me, Show all, No Comm, Email, Text, Call, Date Range: From, To, Download Excel Report

ID	Created	Patient	Referral	Recommended Provider/Provider	Scheduled Background	Appt	Specialty	Assigned	Stage	Next Action	Notes
608	4/14/2020	Jack Brown	Maxine Whitford	RICHARD OLSTEN	WILLIAM GRAY	4/19/2020	Cardiovascular Disease	Larry Hill	In Review	Patient to Action	Review as Closed
609	4/16/2020	Larry Galtch	Dore Pudloff	MUHAMMAD KHAN	MUHAMMAD KHAN	4/25/2020	Cardiovascular Disease	Matt Cheatham	Closed Loop	Mark as Closed	Open
611	4/16/2020	Clark Kent	Ruby Pudloff	MUHAMMAD KHAN	MUHAMMAD KHAN	4/25/2020	Cardiovascular Disease	Matt Cheatham	Scheduled	Wait for appt date	Open
612	4/16/2020	Jack Brown	Peppy Whitford	MUHAMMAD KHAN	JONAS GARCIA	5/5/2020	Cardiovascular Disease	Matt Cheatham	Closed Loop	Mark as Closed	Open
613	4/16/2020	Jack Brown	Peppy Whitford	FRANK FEIGENBAUM	FRANK FEIGENBAUM	4/30/2020	Neurosurgery	Matt Cheatham	Closed Loop	Mark as Closed	Open

AUTO SENDS TO

- eviCore
- AIM SpecialtyHealth
- NantHealth | NaviNet
- Availity
- Glidian

2 WAY TEXT

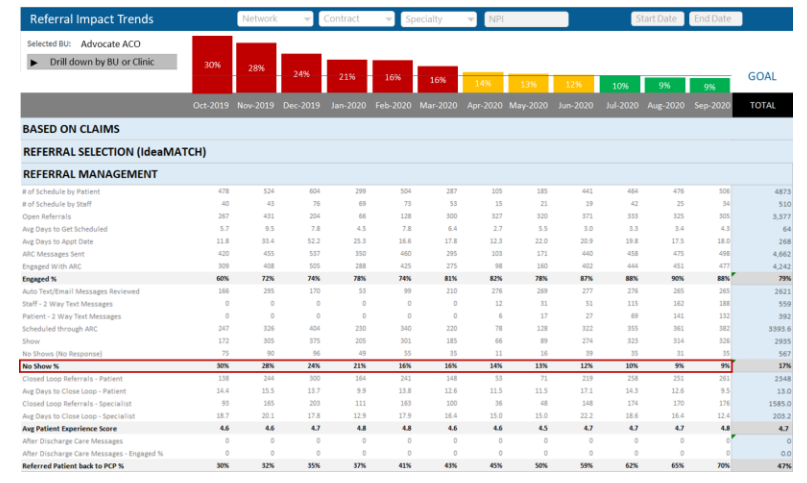
I had a follow-up question after my last visit. I answered the online questions and it was recommended to come back in

Yes I see that a follow up visit is the best option. Would you like me to go ahead and schedule that for you?

Approvals

6 360*Enterprise VISIBILITY™

Measure each step from referral order to closed loop **regardless of EHR** to reduce cost or leakage to capture lost revenue and shared savings.



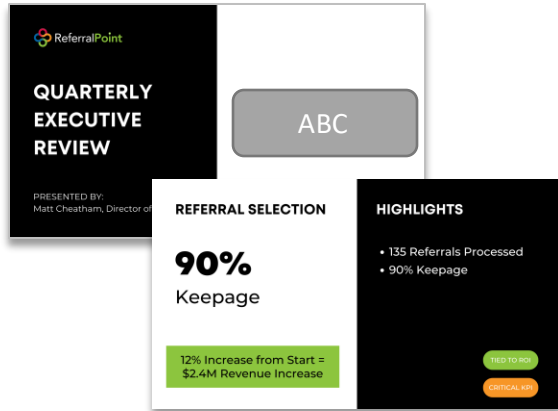
REDUCE NO SHOWS
50%

REDUCE RE-ADMITS
35%

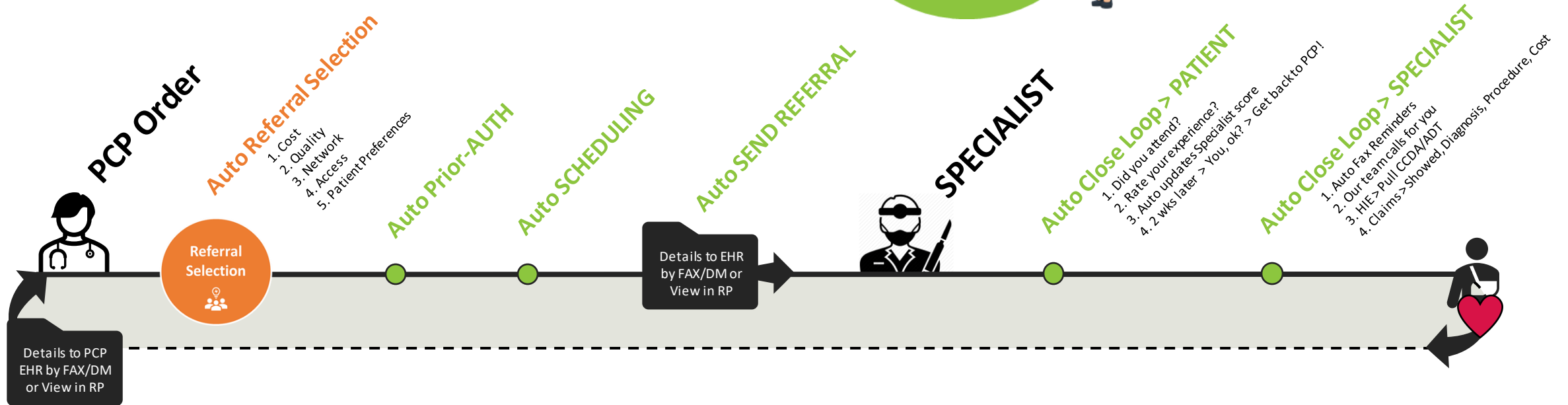
REDUCE ADMIN TIME
50%+

INCREASE VISIBILITY
100%

Data + Automation



Meet **SARA**,
your Automated
Referral Assistant



Before vs. After

LEAKAGE	CLIENT CHORES (MINUTES)	38	37%	14	
	<ul style="list-style-type: none"> Network Management Referral Selection 				
HIGH-COST PROVIDERS & FACILITIES	eConsult - Consult w/Specialist to reduce unnecessary routine referrals	0	NO		YES
	Take Referral Order to Create Referral Doc/Update EHR	1	Manual	1	Auto
	Prioritize Referrals Orders - By Assigned, Priority, Days Left	1	Manual	0	Auto
	Verify Patients Insurance	2	Manual	1	Auto
	Check Preferred Specialist Spreadsheet	3	Manual	0	Auto
	Check Specialist takes Insurance Spreadsheet	2	Manual	0	Auto
REFERRAL CHORES	If Needed Research Subspecialty	1	Manual	0	Auto
	Distance - Google Maps if within ____ miles of patient home	1	Manual	0	Auto
	Language - Match Patient/Specialist	1	Manual	0	Auto
	Distribution Balance to Specialists		Manual	0	Auto
	Include Patient Preferences	1	NO	2	Auto
OPEN QUALITY & HCC GAPS	<ul style="list-style-type: none"> Prior Authorizations Send Referral Scheduling Close the Loop w/Patient 	10 2 6 4		6 1 3 0	
	Text/Email/Call to confirm if Showed and rate their Experience	2	NO	0	Auto
	Condition specific text/emails/calls to ensure Patient is ok and back to f	2	NO	0	Auto
	Close the Loop w/Specialist	2.5		0	
MANUAL CARE COORDINATION	Fax reminders to Close Loop with Specialist if they want more referrals	0	NO	0	Auto
	Manually Call Specialist to get Consult Note back (What %)	2	Manual		
	Put Consult Note into Patient Chart in EHR (What %?)	0.5	Manual		
POOR PATIENT EXPERIENCE	ADT/CCDA HIE Feeds - Updates if Patient Showed, Diagnosis, Proced	0	NO	0	Auto
	Using your claims – Updates if Patient Showed, Diagnosis, Procedure,	0	NO	0	Auto

Before vs. After

	REFERRAL IMPACT CALCULATOR	BEFORE		AFTER
LEAKAGE	+ INPUTS	IMPACT/OPP	IMPROVE %	RETURN
	+ CLIENT CHORES (MINUTES)	38	37%	14
HIGH-COST PROVIDERS & FACILITIES	- REDUCE LEAKAGE	\$203,326,400	10%	\$21,023,200
	+ REDUCE OUT OF NETWORK REFERRALS (LEAKAGE)	\$201,600,000	10%	\$20,160,000
	+ REDUCE PCP SERVICE LEAKAGE	\$1,726,400	50%	\$863,200
REFERRAL CHORES	- REDUCE PROVIDER & FACILITY COSTS	\$15,035,244	50%	\$7,517,622
	+ REFER TO LOWER COST SPECIALISTS (PART B)	\$8,591,568	50%	\$4,295,784
	+ REFER TO LOWER COST HOME HEALTH	\$301,309	50%	\$150,654
	+ REFER TO LOWER COST SNF	\$198,674	50%	\$99,337
	+ REFER TO LOWER COST REMAINING FACILITIES (PART A)	\$5,943,694	50%	\$2,971,847
OPEN QUALITY & HCC GAPS	- AUTOMATE REFERRAL CHORES	\$8,231,244	23%	\$1,928,942
	+ REDUCE MANUAL REFERRAL CHORES	\$1,669,164	68%	\$1,141,493
MANUAL CARE COORDINATION	+ REDUCE PATIENT NO SHOWS	\$6,562,080	12%	\$787,450
	+ REDUCE CLOSING THE LOOP (BACKLOG)	110,880	50%	55,440
	+ AUTOMATE QUALITY & HCC GAPS	\$18,297,600	28%	\$5,183,280
POOR PATIENT EXPERIENCE	+ AUTOMATE CARE COORDINATION	\$13,084,809	50%	\$6,542,405
	+ INCREASE PATIENT EXPERIENCE	\$23,385,123	8%	\$1,771,560
	TOTAL	\$281,360,420	16%	\$43,967,009

SUCCESS STORIES

Privia NT Results



MED GROUP
250 Providers



Dr. Parker
CMIO

- 40,000+** – Referrals we'll be processing per year...through outsourced referral desk
- 90%** - Routine referrals now scheduled by patient...via automation
- 20%** - Decrease FTE time...spent on Referral/Prior Authorization/Scheduling tasks
- 64%** - Patients Engaging...with auto text to schedule appts and close the loop
- 100%** - Increase in Visibility...knowing where patients are and metrics for each stage

"ReferralPoint has become a trusted partner helping us to gain visibility into total cost of care and to improve patient follow-through with recommended referrals. This improves patient satisfaction and helps us 'close the loop' in delivering patient care."

They provided us cost and quality data, which we could not get and with that they were able to give weights by specialty to score and rank all Specialist in our area. In addition, they used our own input along with their data to help us develop our own preferred network.

*Then they integrated their IdealMATCH link right into our EHR making it **quick and easy to ensure referrals are going to the in-network, lowest cost Specialist**. Their automated patient scheduling increased our patient satisfaction and visibility at every stage of the referral.*

This gave us confidence to try their Outsourced Referral Desk which has greatly reduced the burden on our staff. We are planning to roll this out to our entire organization in 2022, with an anticipation of more than 40,000 referrals per year.

Answer Health



CIN
1,200 Providers



Shannon Helton
Executive Director

Single Source of Truth...for referral networks built with data-driven provider analysis

Referral Trending Reports...increased understanding of where referrals are going

Patients Engaging...with auto text to schedule appts and close the loop

100% - Increase in Visibility...knowing where patients are and metrics for each stage

“As Answer Health began taking on more risk-based contracts (ACO), we recognized there was an opportunity to reduce the total cost of care through referrals. Michigan has had electronic referrals for over a decade but the beauty of ReferralPoint is that it connects to the MiHIN referral platform and Holon which most of the state uses.

We have over 40 EHRs across our provider locations and regardless of the instance we can use ReferralPoint at the time of care.

ReferralPoint provides valuable decision-making insights and a closed-loop process while allowing our organization to direct improvement efforts to specialists that perform lower than their peers.

Answer Health now guides providers to refer patients to the highest quality, lowest cost specialists which has improved network-wide cost, utilization, and quality performance on gainshare and risk-based contracts.”

Vanguard Results



Dr. McCarrick
CMO

*"What I like most about ReferralPoint is getting **100%** more control over our referrals. Before, we didn't know our out-of-network % but now that we can control and track it, we've seen it drop from **33%** down to **8%**.*

ReferralPoint has helped us market to our patients so they know not to do a Google search to see a specialist. Rather, to contact us so we can connect them with the right specialist."

100% - Vanguard PCP offices trained (8)

75% - Decrease out of network leakage...went from 33% down to 8%

10% - Lower Part B and Commercial Cost...especially PT, cardio, ortho, gastro

64% - Patients Engaging...with auto text to schedule appts and close the loop

100% - Increase in Visibility...knowing where patients are and metrics for each stage

Meet Vicki, your Specialist Navigator.

Since we already know you and the Specialists, we will **match** you with the **Ideal Specialist**.

Vicki will then text or email you a link you can **Click to CALL** to make it quick and easy to schedule your appointment and view the directions.

Then, **Vicki** will text or email to ensure you were able to schedule your appointment and received the care you need.



Hi Robert,

We were able to **match** you with the **Ideal Specialist** that...

- ✓ Saves you time and money
- ✓ Is close to your home or work
- ✓ Keeps us informed about your care
- ✓ Provides the best patient experience
- ✓ Takes your insurance (be sure to confirm)

Click to call to schedule your Appointment:

NEIL LEVIN
(215) 667-9112
51 N 39th ST, 4 PHL
PHILADELPHIA, PA, 19104

To ensure you get the care you need, I will...

1. Text/email you a friendly reminder
2. Confirm if you met with the Specialist
3. Ask you to Rate your experience 1-5 stars

Thank you,
Vicki



NEXT STEPS

IMPACT Process

STEP 1 STRATEGIC VISION

STEP 2 PROBLEM & IMPACT

STEP 3 IDEAL SOLUTION

STEP 4 INVESTMENT

STEP 5 IMPLEMENTATION

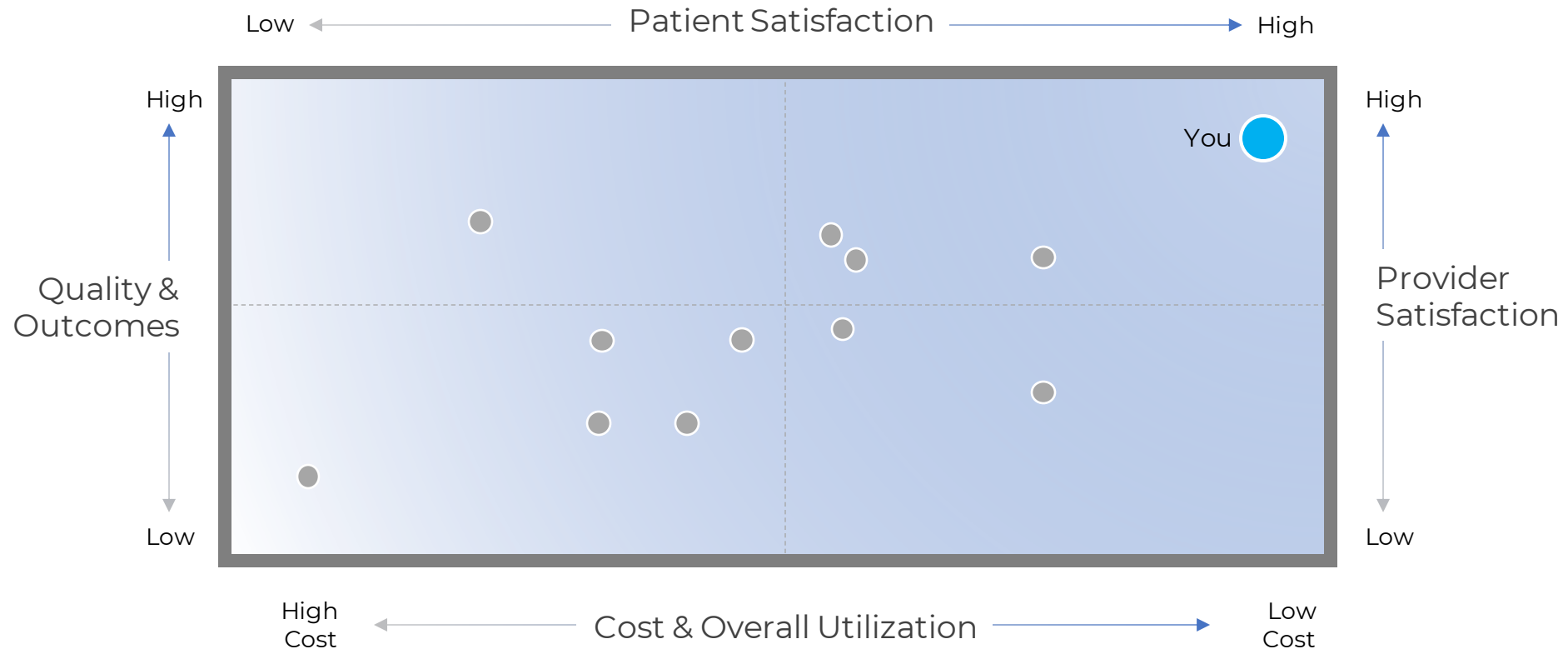
Whether or not you turn on our Referral Module, we will invest in delivering our **Customized BLUEPRINT** to share with your executives how much scheduling and referrals impact your bottom line with a step-by-step action plan to fix it.



STEP 1 Strategic Vision

“What do we **want** to look like 5 – 10 years into value-based care?”

“What do we **HAVE** to look like 5 – 10 years into value-based care?”



Everyone Benefits from Better Referrals

INITIATIVE	FFS	VBC	OWN SPECIALISTS	DON'T OWN SPECIALISTS
REDUCE LEAKAGE	✓	✓	✓	
REDUCE PROVIDER & FACILITY COSTS	✓	✓	✓	✓
AUTOMATE REFERRAL CHORES	✓	✓	✓	✓
AUTOMATE QUALITY & HCC GAPS	✓	✓	✓	✓
AUTOMATE CARE COORDINATION	✓	✓	✓	✓
INCREASE PATIENT EXPERIENCE	✓	✓	✓	✓

1 INCREASE REVENUE & SHARED SAVINGS

2 IMPROVE STAFF EFFICIENCY

3 ENHANCE PATIENT EXPERIENCE

THANK YOU!

CONFIDENTIAL INFORMATION

This communication contains confidential information governed by the written confidentiality provisions contained in our license agreement and/or NDA. It is intended only for the individuals or the entity to which it was originally sent.

Please do not copy or forward.

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www.Referralpoint.com

