

How PriviaNT and VillageMD Reduced Referral Leakage, Specialty, & Admin Cost

August 9 at 1pm EST



Who is ReferralPoint?



Harris, Robert

Administration

Analytics

Dashboard

Care Management

ReferralPoint

Tasking

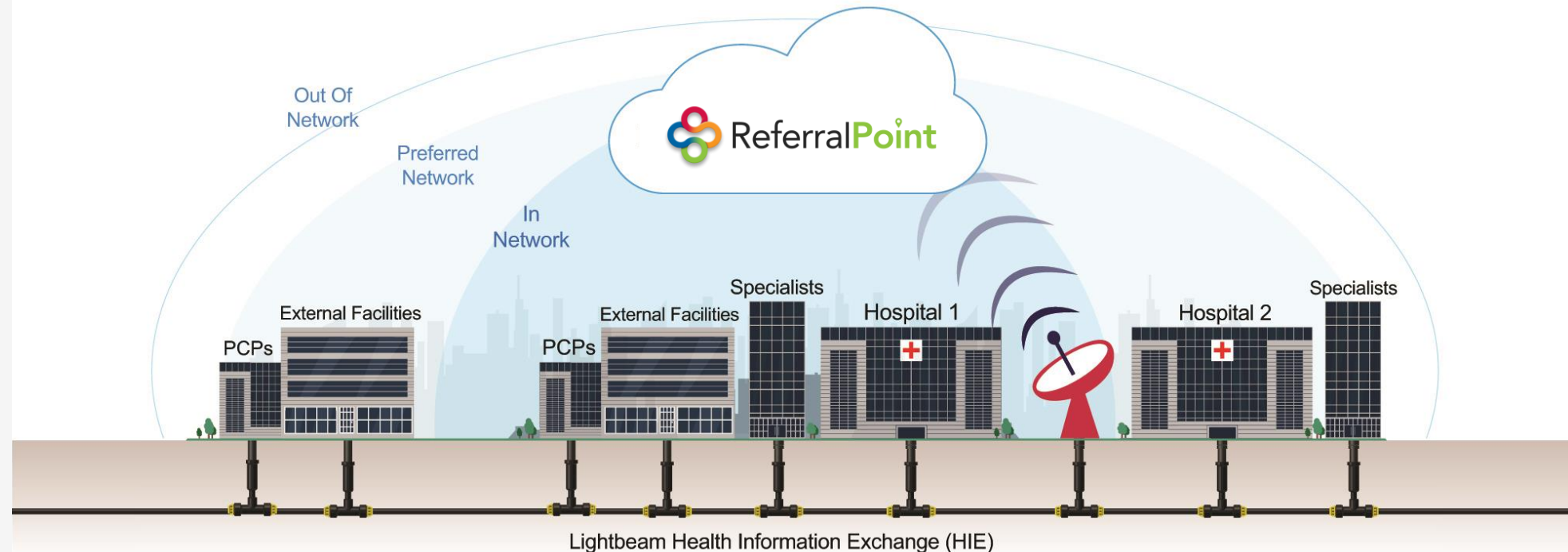
Resource Center

GPRO

Reports

Performance

Data Driven, Fully Automated, Closed Loop Referral Management Strategy



Questions we ask each Leadership Team

- 1 What is your **Vision**?
- 2 What are your **Referral Problems**?
- 3 What is this **Costing** you?
- 4 What is your **Ideal Solution**?
- 5 What **Results do you want**?



Robert Harris
CEO



Matt Cheatham
VP, Client Success

Think about these questions for you, as we walk through the Case Studies.

1

What is
your Vision?

Who is PMG - NTX?

Privia Medical Group (North Texas), a 370-provider multi-specialty group, is dedicated to prioritizing quality patient care and is successfully serving **45,000** attributed patients. In 2019, Privia NT generated nearly **\$3 million in shared savings** through its MSSP.



370 PROVIDERS

99% QUALITY SCORE

45,000+ ATTRIBUTED PATIENTS



Why we started discussing our vision?

While exploring how best to serve our patients and reduce costs through ongoing improvement, we uncovered uniformity issues in referral processes and a lack of data and automation across multiple offices.



In order to achieve our Vision, we need...

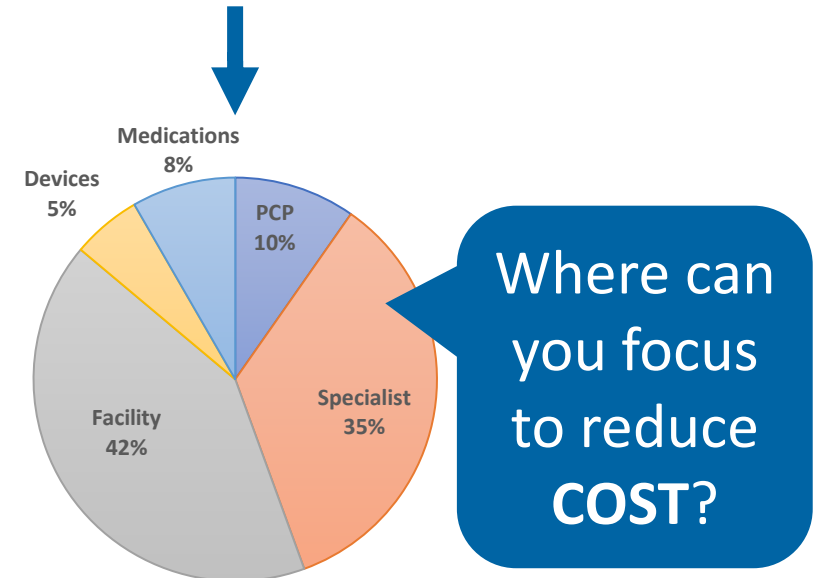
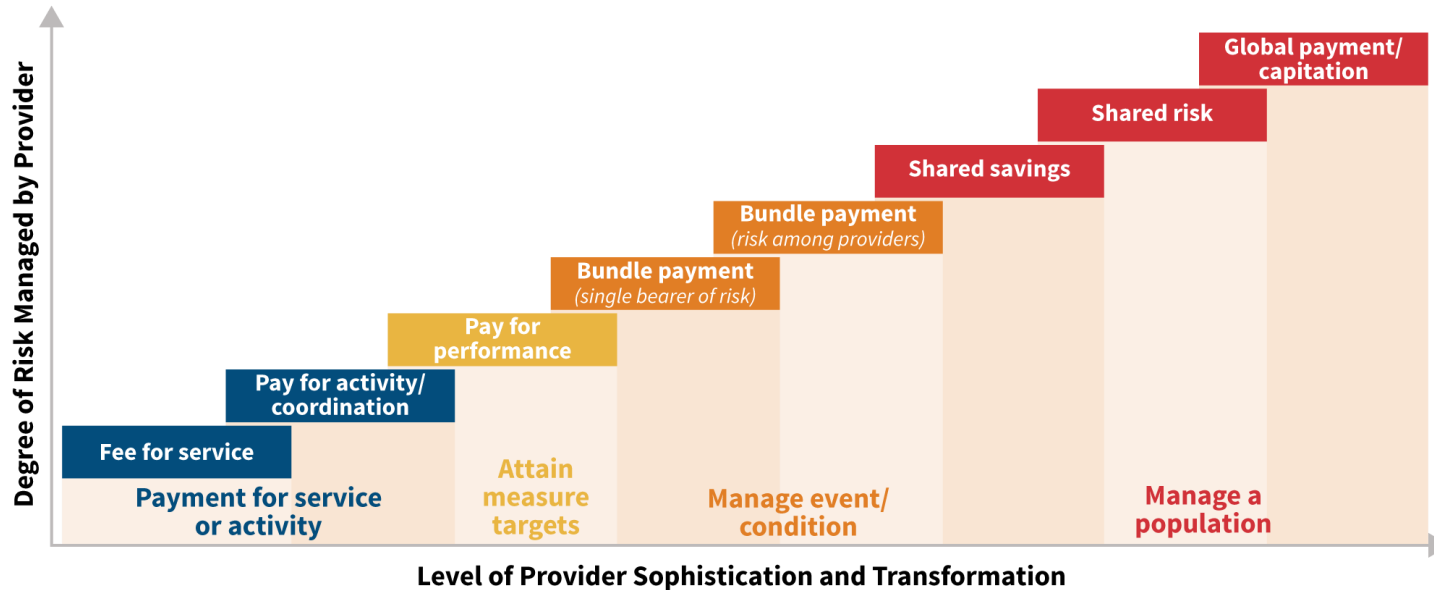
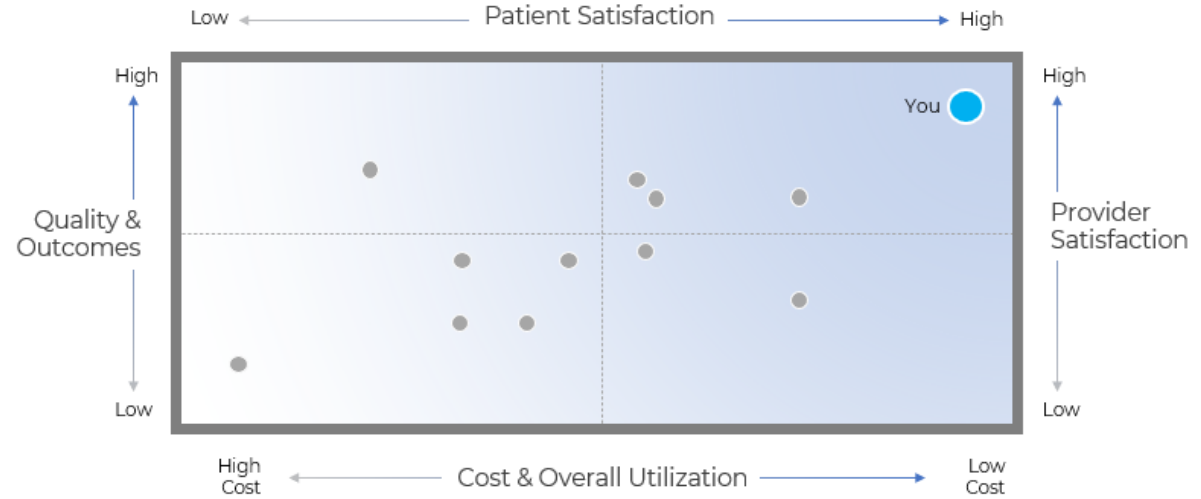
1. A partner that not only has CMS Data but 5 yrs. Commercial Data to build Cost by Episode
2. A platform that can help us Lower Cost – by referring to low cost/high quality specialist
3. A partner with the software and experience to help build our Centralized Referral Desk
4. A partner that can help us get things in order to expand into MSSPs, ACOs, MSO, etc.

What do you want to look like in 5+ years?



Confidential and Proprietary. Do Not Copy or Forward.

What do you need to have in place to increase **SAVINGS %**?



What kind of Partner to achieve your Vision?



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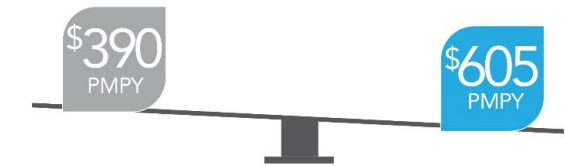
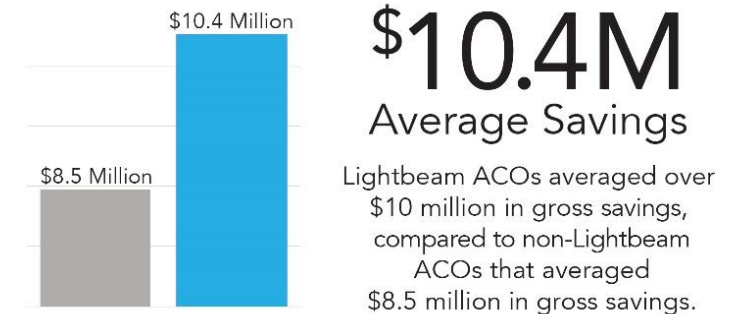
Reports

Performance

Since ReferralPoint was built within the Lightbeam Pop Health Platform, you get the benefit of all Lightbeam *capabilities and proven track record* to help you move into more risk within VBC.



Lightbeam clients have generated over \$1.5 billion in savings throughout the program's history.

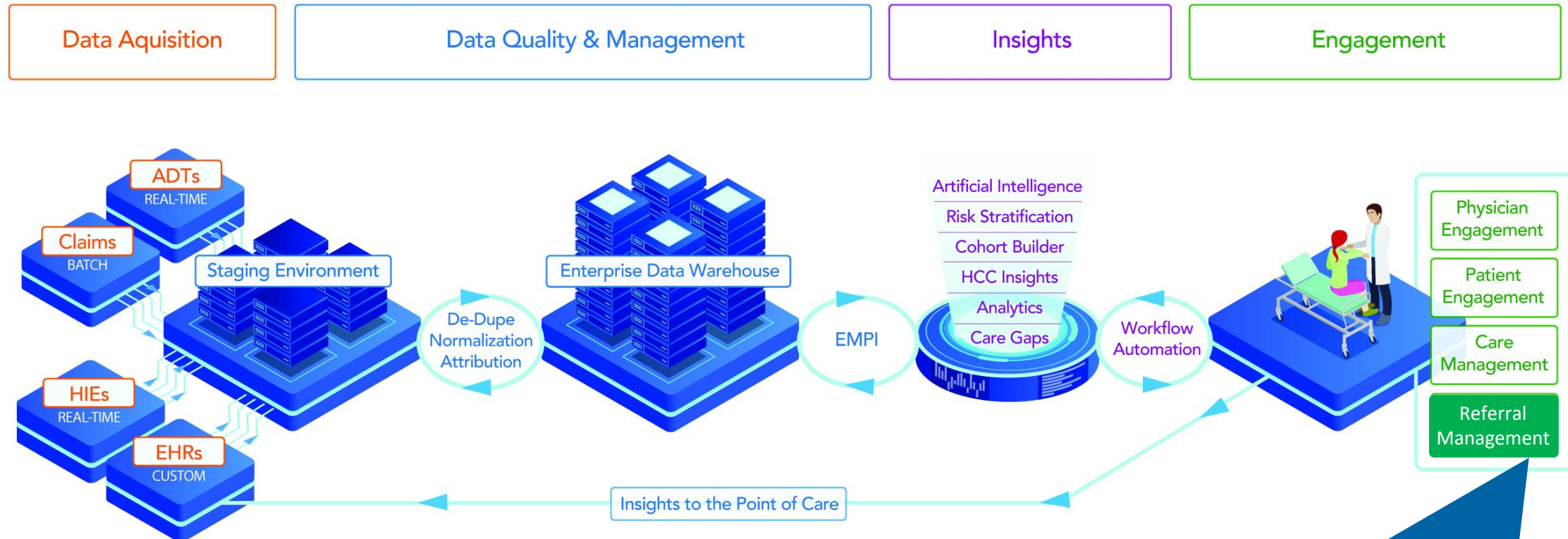


Lightbeam ACOs generated 56% higher net PMPY savings (\$605 on average) compared to non-Lightbeam ACOs (\$390 average).

What Capabilities to achieve your Vision?



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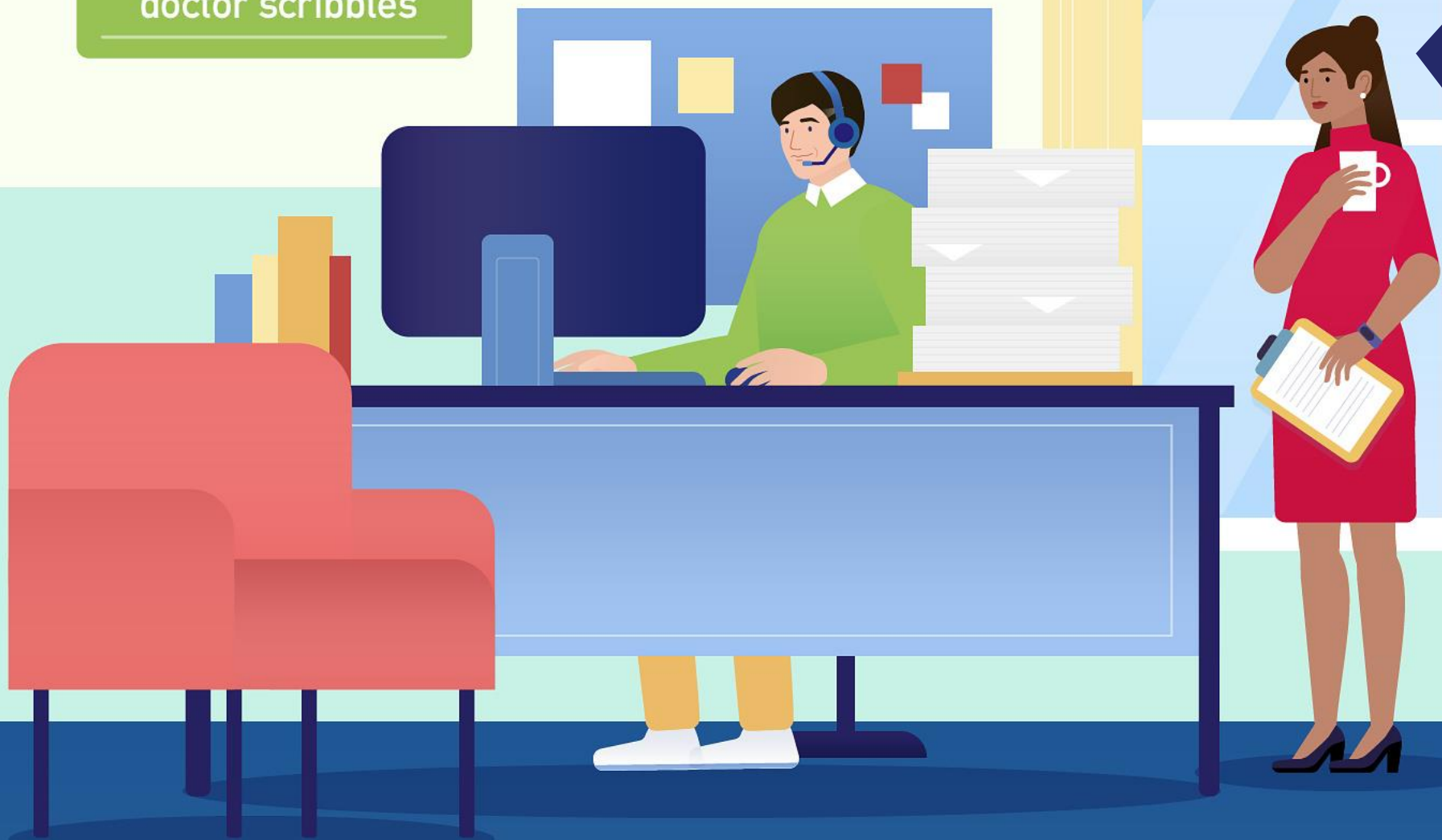
**Pop Health + Referrals
in one platform!**

2

What are your
Referral Problems?

Referrals Department

We read
doctor scribbles



Meet Kari

She's
responsible for
all Referrals and
the backlog is
piling up!

Referrals based on WHO the Provider knows

Patient Referral Form

Referring PCP:

Dr. Turner

Specialist:

Dr. Dolan

Gastroenterologist

Patient:



Mr. Fletch

Details:

Frank



Tennis Partners

...or an outdated Spreadsheet?

1	<i>Dr. Johnson</i>	_____	_____	_____	_____	_____
2	<i>Dr. Patel</i>	_____	_____	_____	_____	_____
3	<i>Dr. Ericson</i>	_____	_____	_____	_____	_____
4	<i>Dr. Morrison</i>	_____	_____	_____	_____	_____
5	<i>Dr. Dolan</i>	_____	_____	_____	_____	_____
6	<i>Dr. Philips</i>	_____	_____	_____	_____	_____
7	<i>Dr. Weiss</i>	_____	_____	_____	_____	_____
8	<i>Dr. Richardson</i>	_____	_____	_____	_____	_____
9	<i>Dr. Getler</i>	_____	_____	_____	_____	_____
10	<i>Dr. Fleming</i>	_____	_____	_____	_____	_____
11	<i>Dr. Rossini</i>	_____	_____	_____	_____	_____

Retired?

Out-of-Network?

Lowest Cost?

Highest Quality?

Closes the Loop?

Patients Insurance?

+ takes extra time
+ can't measure
+ can't control

Prior Authorizations
Submitter

Referral Sender

Appointment
Scheduler

Loop Closer



**ALL. DONE.
MANUALLY.**

Are your processes for Patient Experience old?



1. NETWORK LEAKAGE & COST

- X No access to cost data to score & rank specialists or build preferred networks
- X Unable to see PCP referral trends or leakage by network, cost, or location

2. MANUAL WORKFLOW

- X Using outdated spreadsheets and memorization when making a referral
- X No control to ensure referrals are made to in-network, highest quality, lowest cost specialists and facilities
- X Using manual processes to complete referral selection, scheduling, authorizations, and closing the loop

3. LOW PATIENT EXPERIENCE

- X Manual, time-consuming steps increasing gaps and errors
- X Manual communication with patients causing long wait times to schedule and missed appointments

4. LACK OF VISIBILITY & ACCOUNTABILITY

- X No ability to track each step of the referral through to a closed loop
- X No ability to compare PCPs' or specialists' performance

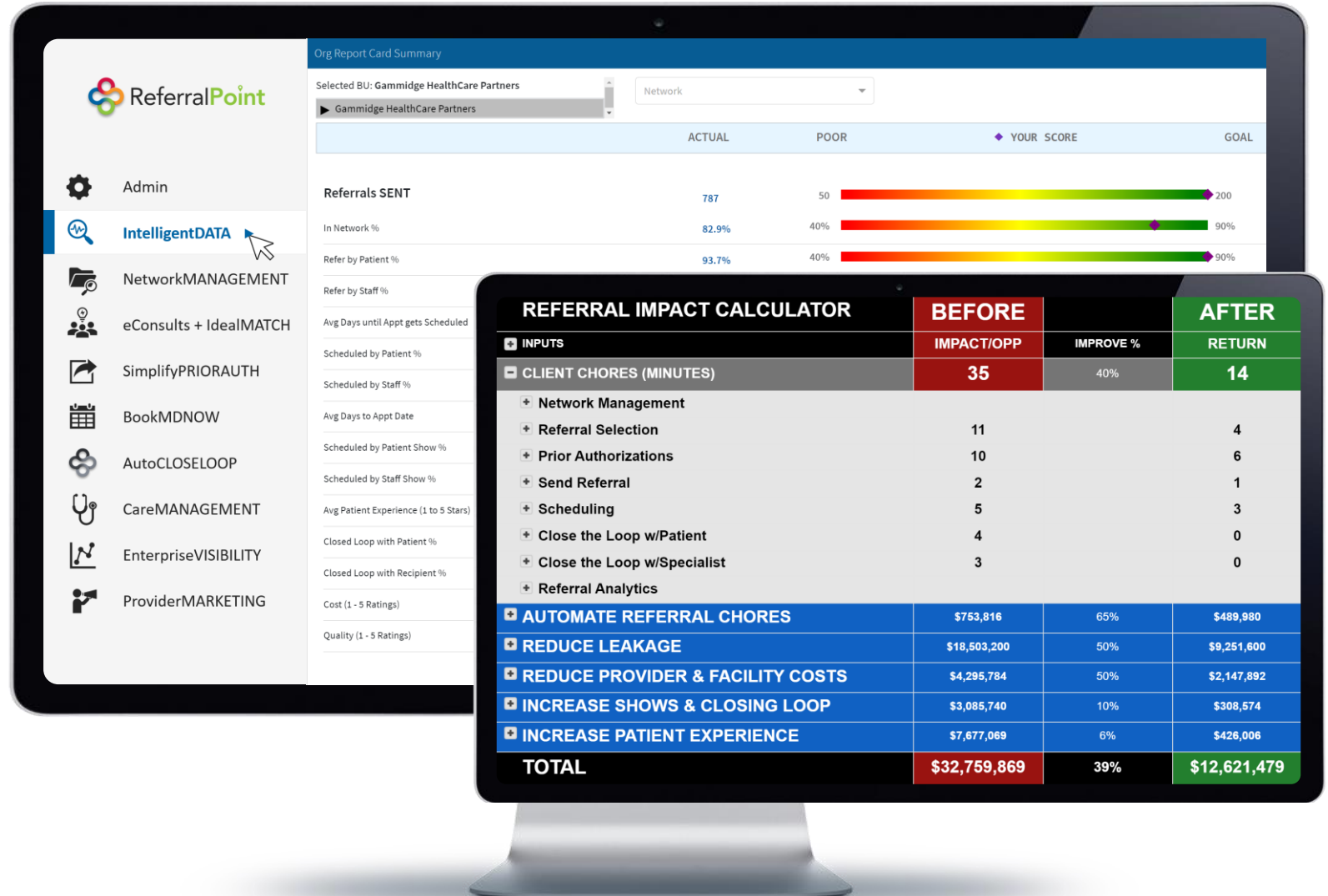
5. STAFFING CHALLENGES & ERRORS

- X No ability to maintain referral volumes with limited MA staff
- X Difficulty qualifying for MIPS quality standards due to referral errors (30-40%)



Before Privia NT signed up, we built a custom **BLUEPRINT and ROI Calculator**, tailored to Privia NT's vision.

This helped the executives and managers see the bigger picture and get into alignment with the plan.



3

What is this
Costing you?

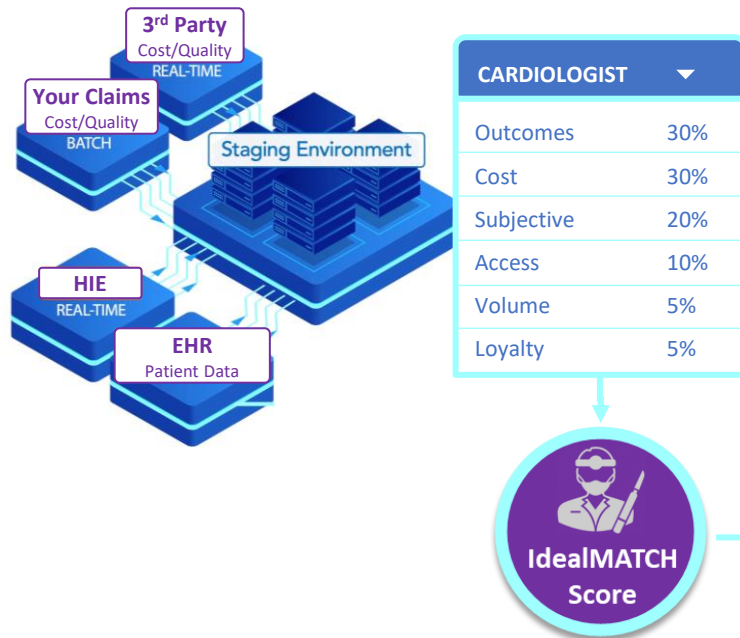
Leakage = \$___ Lost Revenue?
High-Cost Specialist = \$___ Lost Savings?
Manual Chores = \$___ Unnecessary FTE Cost?
No Shows = \$___ Lost Revenue?
Low Close Loop % = \$___ ER Admits?
Low Patient Sat = \$___ Patients Leaving * LTV

Are you
able to
measure
to know
for sure?

PHASE 1 – Network & Referral Insights

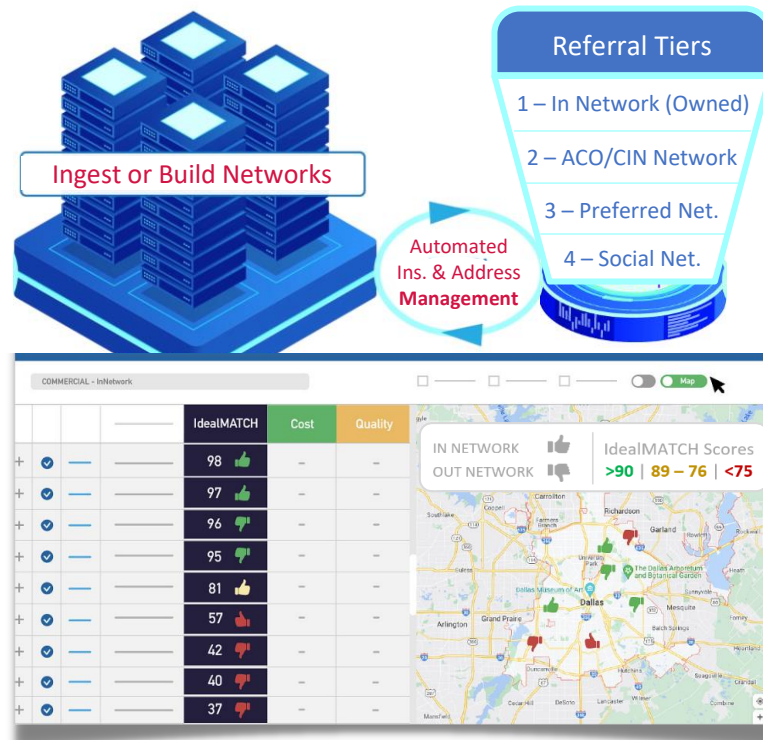
1 Intelligent DATA™

We ingest your patients, claims and 3rd party data, then you weight each data source to customize your **IdealMATCH Scores for each Specialty**.



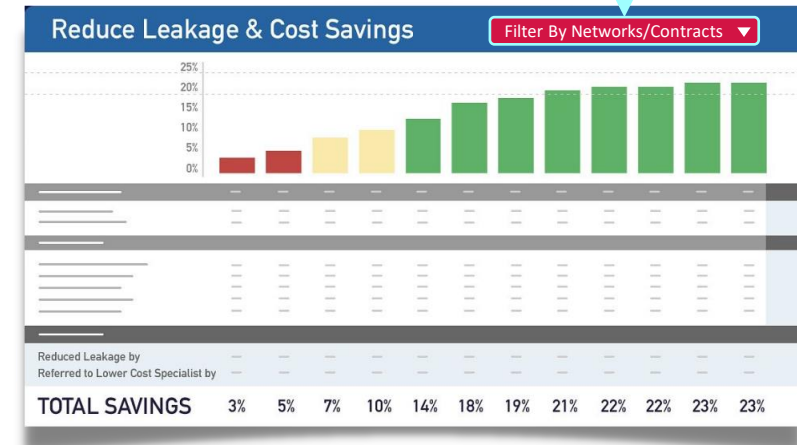
2 Network MANAGEMENT™

Ingest or build your Networks, then use the scores and map to add or remove Providers and Facilities within tiered **Preferred Networks or VBC Contracts**.



3 Referral INSIGHTS™

Now you can analyze referral trends over the last 3 years to identify areas to reduce leakage and costs by each **Preferred Network and VBC Contract**.



1. Leakage

What would you do if you could Drill down to see who is referring **Out of Network** to which Specialist and Facilities?

Lightbeam
Health Solutions

Harris, Robert

- Administration
- Analytics
- Dashboard
- Care Management
- Referrals
- Tasking
- Resource Center
- GPRO
- Reports
- Performance

Match Criteria

Search Filters

- Build Network
- Provider Network
- Facility Network
- ORG Rank Providers
- PCP Rank Providers
- Specialty Mapping
- Insurance Management
- Organization Providers
- REFERRAL COORDINATOR
- Patient Search IdealMATCH
- Referral Tracking
- Fax Management
- REPORT CARD
- Report Card Criteria
- Org Report Card
- Providers Report Card

NETWORK VISIBILITY

- Leakage by PCP
- Leakage by Specialty
- Leakage by Contract
- Professional Claims Analysis
- Leakage by Procedure Group
- Shared Patient Visit Analysis

Shared Patient Visit Analysis

Contract Entity: Advocate Health System | Contract: PRIMARY CARE ACO | Provider Visited: Contract-PCP | Months Within: 1 | Practice / TIN: Practice TIN | Specialty: All | Provider / NPI: | Leakage Type: Contract | Contract Year: 2022 | 1/2022-12/2022 | [Export to Excel](#)

BASED ON CLAIMS	Jan-2022	Feb-2022	Mar-2022	Apr-2022	May-2022	Jun-2022	Jul-2022	Aug-2022	Sep-2022	Oct-2022	Nov-2022	Dec-2022	TOTAL	
Attributed Patients Overall	275,051	271,243	269,632	270,191	271,730	276,295	279,063	279,821	279,197	279,982	281,248	281,881	3,315,334	
Patients Seen Each Month	153,738	138,766	138,888	144,518	145,721	150,350	150,196	155,799	157,040	158,865	165,242	160,733	1,819,856	
PATIENTS SEEN 1 MONTH(S) RANGE														
+ % E&M Visits resulting in Specialists Visit	64.5%	66.8%	68.9%	67.0%	63.6%	66.3%	69.1%	70.8%	70.4%	66.8%	64.8%	64.0%	66.9%	
+ # Total PCP to Specialist/Facility Visits	32,959	30,019	31,621	33,851	32,056	32,695	30,393	31,133	33,645	34,323	35,643	34,202	392,540	
+ % Total Out of Contract Visits	71.3%	70.3%	70.0%	70.0%	70.3%	70.2%	69.8%	69.3%	69.5%	70.1%	70.5%	70.0%	70.1%	
+ Specialty \$ Leakage %	61.8%	61.5%	61.3%	61.3%	60.5%	60.0%	59.4%	57.9%	59.0%	61.1%	61.4%	60.5%	60.5%	
+ Facility \$ Leakage %	84.0%	84.5%	84.2%	84.3%	84.9%	83.5%	84.9%	84.0%	83.5%	84.0%	84.6%	83.6%	84.2%	
- Potential Redirection/Reduced Spend													13.21%	\$92,703,203
Redirection Spend if Reduced Leakage by 10%	\$4,659,484	\$4,418,533	\$4,855,044	\$5,318,819	\$4,805,198	\$4,511,615	\$4,536,071	\$4,483,867	\$4,818,680	\$4,911,169	\$5,152,463	\$5,134,267	\$57,605,211	
Reduced Spend if Referred to Lowest Cost by 5%	\$2,842,037	\$2,678,598	\$2,950,106	\$3,228,707	\$2,901,903	\$2,776,652	\$2,743,881	\$2,744,202	\$2,965,086	\$2,998,262	\$3,122,571	\$3,145,987	\$35,097,993	

Finally know what you could save if you had IdealMATCH

1. Leakage

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[Export to Excel](#)

Out of Speciality Contract Spend

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 %	TOTAL
1699034462	999888777	SMITH, RONDELL	Internal Medicine	9,543	2,348	2,433	5.51	54	31	85	\$ 1,659,894	\$ 1,085,176	\$ 2,745,070	40%	24%	3,315,334
1770734030	999888777	BIEN, ELIZABETH	Pediatric Medicine	272	54	55	0.03	22	11	33	\$ 383,843	\$ 191,922	\$ 575,765	29%	2%	
1508843442	999888777	LEWIS, DANTE	Pediatric Medicine	372	74	76	1.11	13	12	25	\$ 243,261	\$ 130,986	\$ 374,247	12%	1%	
1467439968	999888777	RICHBOURG, HENRY	Family Practice	1,010	202	206	3.03	17	14	31	\$ 201,518	\$ 115,153	\$ 316,671	15%	1%	
1902856925	999888777	KUHLMAN, GEOFREY	Family Practice	589	118	120	1.75	11	11	22	\$ 152,866	\$ 106,229	\$ 259,094	30%	30%	1,819,856
18513	17008															66.9%

SPECIALTY VIEW : FEB-2021

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

#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 %
193	204	213	222	5.76	164	6	3	9	\$ 185,835	\$ 274,125	\$ 459,960	33%
124	130	132	134	4.99	99	1	1	2	\$ 87,465	\$ 207,375	\$ 294,840	27%
106	110	126	142	7.60	98	12	4	16	\$ 316,800	\$ 180,500	\$ 497,300	21%
179	188	194	200	1.75	170	4	2	6	\$ 83,510	\$ 139,685	\$ 223,195	33%
194	204	207	210	1.06	189	2	1	3	\$ 109,968	\$ 62,160	\$ 172,128	36%

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	JHA, SANJAYA	Cardiovascular Disease	9	9	10	11	\$ 76,950	OUT	0.64	4.60	14
1689679888	999888777	SANGHA, SUMANDEEP	Cardiovascular Disease	8	8	9	10	\$ 60,800	OUT	4.00	4.56	23
1912964073	999888777	LEONARDIS, JEFFREY	Cardiovascular Disease	6	6	7	8	\$ 34,200	OUT	7.00	4.57	10
1962436444	999888777	PHILLIPS, STEPHEN	Cardiovascular Disease	3	3	4	5	\$ 8,550	OUT	6.00	4.59	13
1811561167	999888777	STEPHEN, SCHMIDT	Cardiovascular Disease	12	13	14	15	\$ 70,200	IN	5.48	4.63	16
1164674651	999888777	LEANORD, N	Cardiovascular Disease	11	12	13	14	\$ 59,400	IN	5.48	4.62	21
1548557697	999888777	PATEL, PRITESH	Cardiovascular Disease	11	12	13	14	\$ 59,400	IN	3.51	4.65	16
1376773317	999888777	BALAT, ISAM	Cardiovascular Disease	10	11	12	13	\$ 49,500	IN	0.64	4.65	18
1982620811	999888777	MERCADO, ADA	Cardiovascular Disease	6	6	7	8	\$ 16,200	IN	1.30	4.54	17
1902801905	999888777	ELLIS, ELLIOT	Cardiovascular Disease	6	6	7	8	\$ 16,200	IN	7.19	4.57	11
1154385177	999888777	SHATNER, JAMES	Cardiovascular Disease	5	5	6	7	\$ 11,250	IN	7.19	4.59	16
1740242726	999888777	CHAAABRA, SUMIT	Cardiovascular Disease	5	5	6	7	\$ 11,250	IN	0.64	4.07	12
1780618272	999888777	HABIB, NICOLAS	Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	12.00	4.53	16
1760640734	999888777	BRINN, JANET	Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	5.48	4.60	15
1376654376	999888777	VOLOSCHIN, ALFREDO	Cardiovascular Disease	4	4	5	6	\$ 7,200	IN	1.99	4.63	16
1255357489	999888777	ADA, JOE	Cardiovascular Disease	2	2	3	4	\$ 1,800	IN	10.50	4.56	16

PATIENTS SEEN 1 MONTH(S) RANGE

- + % E&M Visits resulting in Special
- + # Total PCP to Specialist/Facility
- + % Total Out of Contract Visits
- + Specialty \$ Leakage %
- + Facility \$ Leakage %

Potential Redirection/Reduced Spend

Redirected Spend if Reduced Leakage by

Reduced Spend if Referred to Lowest Cost by

Finally know what you could save if you had IdealMATCH

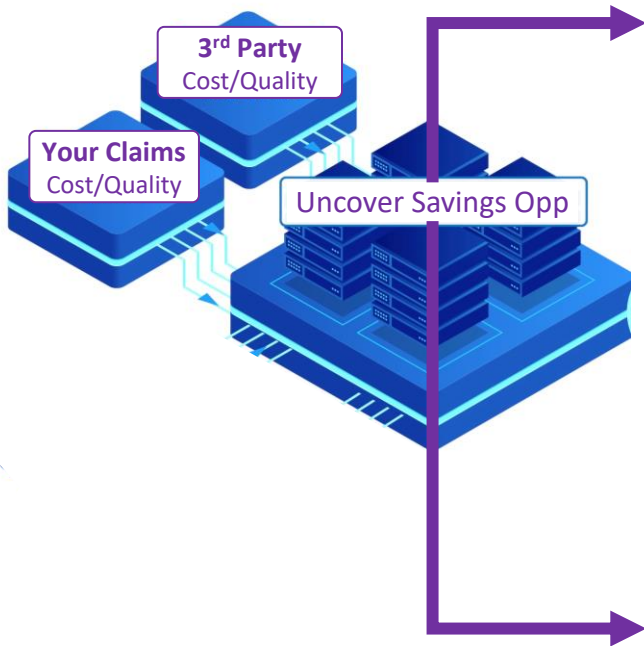
TOTAL

392,540

70.1%

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2. Referring to High-Cost Facilities & Specialist



Top 10 DRG by Spend (Previous 12 Months)

DRG - Description - Rendering	Claims	LOS	Days	Avg Day Amt	Total Claim Amt	ACA	Total Claim Amt	TCA
871 SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS W MCC	82	6.2	512	\$3,470	\$21,667	4	\$1,776,681	
177 RESPIRATORY INFECTIONS & INFLAMMATIONS W MCC	45	5.8	260	\$3,937	\$22,749	2	\$1,023,706	
807 No Code Given	77	2.4	185	\$4,844	\$11,637	5	\$896,050	

Savings Opportunities if Referred to Lowest Avg Cost

Summary →	Total Spend	Spend Opp	Savings Opp	Savings %
	\$7,347,105	\$5,643,924	\$1,703,182	23.2%

Claims	Lowest Avg Cost	Spend if Lowest Avg Cost Used	Savings Opportunity	Potential Savings %
82	\$16,598	\$1,361,057	\$415,623	23.4%
45	\$19,566	\$880,488	\$143,218	14.0%
77	\$10,392	\$800,153	\$95,897	10.7%

by Rendering Facility

Rendering Facility	Spend if Lowest Avg Cost Used	Savings Opportunity	Potential Savings %
MONTCLAIR HOSPITAL LLC	\$464,751	\$170,635	26.9%
HMH HOSPITALS CORPORATION	\$365,162	\$184,266	33.5%
AHS HOSPITAL CORP.	\$248,974	\$59,847	19.4%
COOPERMAN BARNABAS MEDICAL CENTER INC	\$199,179	\$0	0.0%
ST JOSEPHS UNIVERSITY MEDICAL CENTER INC.	\$82,991	\$875	1.0%

Top 5 Zips by Top 10 Specialty - Opps & Gaps

Zip Codes sorted in descending order by Total Referrals
Specialty sorted in descending order by Out of Network

Zip	IN	OUT	Total
76104	927	834	1,761
76132	291	1,185	1,476

Top 5 Specialty by Top 10 Zips - Opps & Gaps

Specialty sorted in descending order by Total Referrals
Zip Codes sorted in descending order by Out of Network

Specialty	IN	OUT	Total
GASTROENTEROLOGY	176	1,583	1,759
ORTHOPEDIC SURGERY	302	683	985

Opp - In Network Specialist Available but Leakage Occuring
Gap - 100% Leakage or NO In Network Specialist Available
Win - 100% Referrals in Network

IDENTIFIED SAVING OPPORTUNITIES

- ✓ Ability to view 3rd party cost/quality data (by episode) to identify low cost, high-performing specialists
- ✓ Ability to identify geographic gaps in networks to strategically place network specialists by location
- ✓ **Leakage Lost Revenue Reports** identified **\$4.8M/year**
- ✓ **IdealMATCH Cost Savings Report** comparing specialist costs of PCPs' referral choice vs IdealMATCH

SPECIALITY	Avg RECIPIENT CHOSEN	Avg BEST AVAILABLE	DELTA	% SAVINGS	# OF CLAIMS
AVG	\$1,553	\$993	\$560	36%	7,924
NEUROLOGY	\$3,400	\$310	\$3,089	91%	376
PODIATRY	\$2,426	\$235	\$2,190	90%	289
GASTROENTEROLOGY	\$1,684	\$232	\$1,452	86%	1,285
CHIROPRACTIC	\$401	\$79	\$322	80%	33
RHEUMATOLOGY	\$1,378	\$296	\$1,082	78%	153
ALLERGY/IMMUNOLOGY	\$941	\$217	\$724	77%	84
PULMONARY DISEASE	\$1,425	\$354	\$1,071	75%	177
PSYCHIATRY	\$433	\$111	\$322	74%	72
ADVANCED HEART FAILURE AND	\$1,019	\$270	\$749	73%	1
INTERVENTIONAL PAIN MEDICIN	\$1,989	\$583	\$1,406	71%	138
OBSTETRICS & GYNECOLOGY	\$1,033	\$344	\$688	67%	266
ORTHOPAEDIC SURGERY	\$1,521	\$589	\$932	61%	751
GENERAL SURGERY	\$2,087	\$831	\$1,257	60%	247
DERMATOLOGY	\$582	\$259	\$323	55%	481
INTERVENTIONAL CARDIOLOGY	\$944	\$455	\$489	52%	7
HEMATOLOGY-ONCOLOGY	\$1,212	\$598	\$614	51%	58
OTOLARYNGOLOGY	\$1,932	\$1,002	\$930	48%	412
ORTHOPAEDIC SURGERY OF THE	\$1,527	\$830	\$697	46%	26
CARDIOVASCULAR DISEASE	\$1,014	\$552	\$462	46%	676
ANESTHESIOLOGY	\$1,498	\$818	\$681	45%	16



*“We 1st needed the **ReferralPoint data and reports** to show PCPs, in order for them to see how important it is to allow IdealMATCH to help determine who to refer to”*

Dr. Crudup, General Surgery, Medical Director

3. Manual Chores

➤ How long **each chore** is taking?

➤ Which chores you could **automate**?

REFERRAL IMPACT CALCULATOR		BEFORE	IF ONLY IMPROVED BY	AFTER	
INPUTS		PROBLEM OR OPP		ROI	ROI %
CLIENT CHORES (MINUTES)		34		12	
Network Management					
Ingest Claims to see leakage, referral trends, and savings opportunities			NO		YES
Customize/Rank Specialist Scores on Cost, Outcomes, Loyalty and Access			NO		YES
Customize/Prioritize Networks – In Network, Preferred, VBC, Social			NO		YES
Referral Selection	13			3	
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	4		Manual	1	Auto
Check Preferred Specialist Spreadsheet	2		Manual	0	Auto
Check Specialist takes Insurance Spreadsheet	1		Manual	0	Auto
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	1		Manual	0	Auto
IdealMATCH - Includes Patient Preferences	0		NO	1	Auto
Prior Authorizations	10			5	
Referral Notification – Put Patient/Provider info into Availity	2		Manual	1	Auto
PriorAuth - Put Patient/Provider info into Availity	2		Manual	1	Auto
ALL - Login Availity/CarePlus Download PDF Approval + Upload in EHR	2		Manual	1	Auto
PriorAuth - Login Check Status update EHR (Avg 3 days * 5 min/day to look)	2		Manual	1	Auto
PriorAuth - Finish outstanding info (20% of the time?)	2		Manual	1	Outsource to us
Send Referral	3			1	
Attach Clinical Documentation to Referral in EHR	1		Manual	1	Outsource to us
Fax Referral & Clinical Documents to Specialist	2		Manual	0	Auto
Cost Per Fax Page (Min 5 Pages)	\$0.25				\$0.10
Scheduling	5			3	
By STAFF – Call/Email Specialist to Schedule Appt	1		Manual	1	Outsource to us
By STAFF – Call/Email Patient the Date/Time of Appt	1		Manual	1	Outsource to us
By PATIENT – Get Patient the Specialist info to Schedule appt	1		Manual	0	Auto
By PATIENT – If Specialist not available...re-issue another Specialist	1		Manual	1	Auto
Text/Email/Call to Confirm with Patient if Scheduled	1		Manual	0	Auto
Close the Loop w/Patient	1			0	
Text/Email/Call to confirm if Showed and rate their Experience	1		NO	0	Auto
Condition specific text/emails/calls to ensure Patient is ok and back to PCP	0		NO	0	Auto
Close the Loop w/Specialist	2			0	
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 %)	1		Manual		Outsource to us
Put Consult Note into Patient Chart in EHR (What %?)	1		Manual		Outsource to us
ADT/CCDA HIE Feeds - Updates if Patient Showed, Diagnosis, Procedure, Re-Admits	0		NO	0	Auto
Using your claims – Updates if Patient Showed, Diagnosis, Procedure, Re-Admits	0		NO	0	Auto
Referral Analytics					
Referral Trends – Measure each step Referral to Close Loop regardless of EHR			NO		YES
Include all Referral Data from your EHR into our Referral Trend Reports			NO		YES
Compare/Rank PCP, Specialist, Referral Coordinator Performance for each step			NO		YES
Leakage Dashboard – Drill down from PCP to Specialty to Specialist			NO		YES

3. Reduce Manual Time Savings



- Referrals Per Month	25,000				
Referral Coordinators (FTE)	75				
Referrals Per FTE/mo	333				
Labor Rate/Hour (+ Benefits)	\$19.43				
- FTE Hours/Mo (Minutes/Mo)	173	10,400			
	BEFORE	AFTER	ESTIMATED	REDUCE	INCREASE
	ReferralPoint	ReferralPoint	Savings	FTE	CAPACITY
	Minutes	Minutes	Minutes		
+ PHASE 1	31.2	26.2	5	12.0	19%
+ per Month	\$252,590	\$212,111	\$40,479		
+ PHASE 2	31.2	21.2	10	24.0	47%
+ per Month	\$252,590	\$171,632	\$80,958		
+ PHASE 3.1	31.2	16.2	15	36.1	93%
+ per Month	\$252,590	\$131,153	\$121,438		
+ PHASE 3.3	31.2	6.2	25	60.1	403%
+ per Month	\$252,590	\$50,194	\$202,396		

Put Insurances in RP so RC doesn't have to call
 Stopped using SP Spreadsheet
 Stopped using Google Maps

Added SSO
 Automated some Verify Patient Ins
 Automate some Authorizations

Phase 3.1 = Auto populate IdealMATCH when Specialist field is empty
Phase 3.2 = Auto populate IdealMATCH but give PCP ability to override it with easy Reason Code
Phase 3.3 = Auto populate IdealMATCH plus Auto Verify Patient Ins + Auth without using RC at all

- ✓ Integrated IdealMATCH within EHR workflow, improving ability to refer in-network, low cost, high quality
- ✓ Automated manual tasks and decreased time required to refer, schedule, and close loop with patient
- ✓ Automation to verify patient insurance and prior auth, **saving an additional 10 minutes**
- ✓ Automation to remind specialists to send back consult note and close the loop



“Another benefit is RP automated forwarding of clinical documentation from the PCP’s EHR to the specialist. It’s a big time-saver and crowd pleaser in our group”

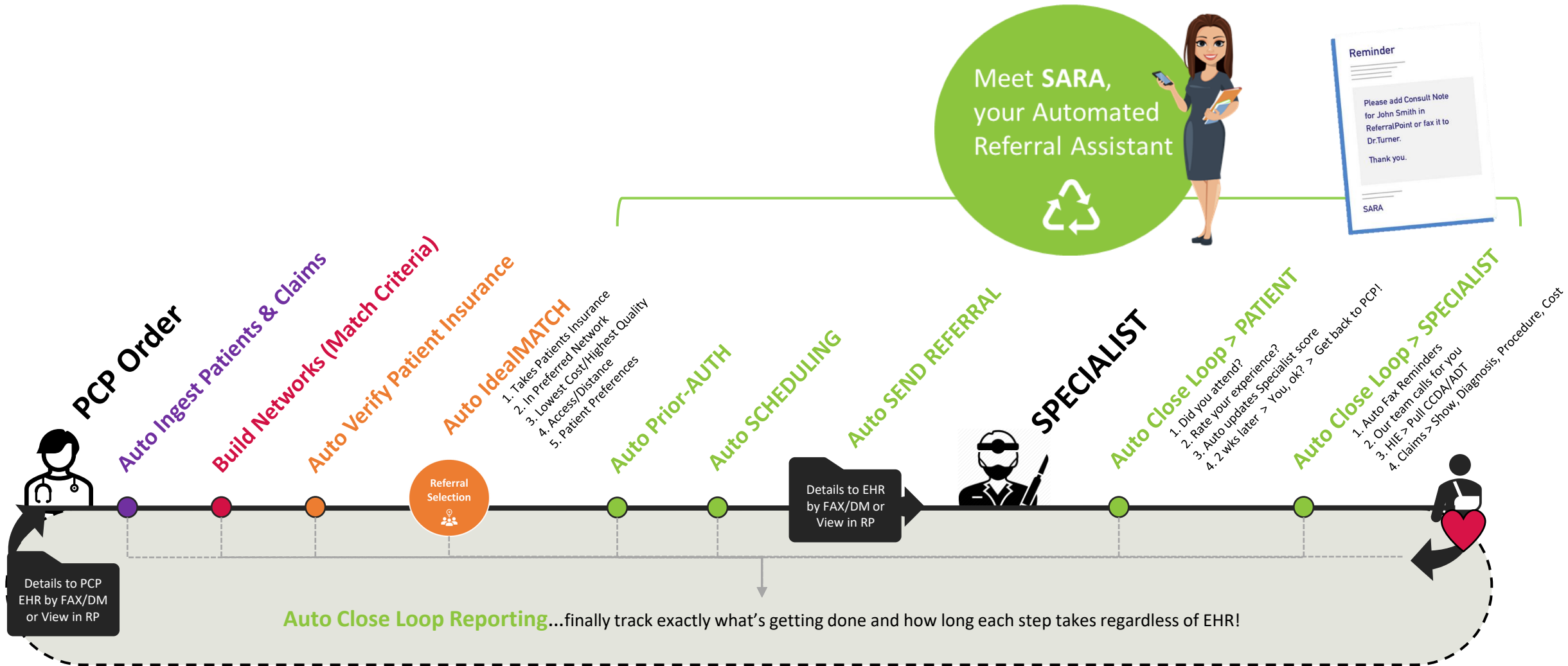
Dr. Crudup, General Surgery, Medical Director

4

What is your
Ideal Solution?

Data Driven, Fully Automated, Close Loop

SEE HOW IT WORKS >





REFERRAL SELECTION



No More Spreadsheets

1 Intelligent DATA™

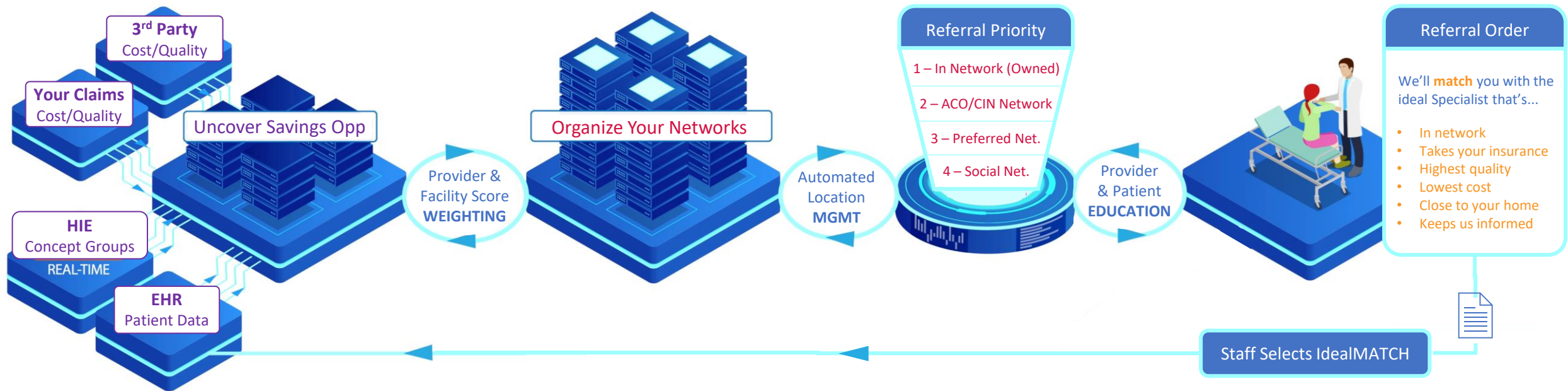
2 Network MANAGEMENT™

3 Ideal MATCH™

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

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

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%

STEP 1

Intelligent DATA™

Objective Cost and Quality Data: We utilize your data or our access to 100% CMS and 70% commercial claims to create weighted IdealMATCH scores for specialists, PCPs, and facilities.



- REFERRALS
- NETWORK BUILDER
- Match Criteria
- Build Network
- Provider Network
- Facility Network
- ORG Rank Providers
- PCP Rank Providers
- Specialty Mapping
- Insurance Management
- REFERRAL COORDINATOR
- Patient Search IdealMATCH
- Referral Tracking
- Fax Management

Matching Criteria

Specialty or Facility: **CARDIOLOGIST**

- SUBJECTIVE** : Combining your Patient's, your PCP's, and your own scores for each Provider and Facility. Score Weight: 10
- ACCESS** : Access to schedule in Provider/Facility calendar increases show rate = higher score. Score Weight: 10
- VOLUME** : Combine claims, existing, and new patients' trends to determine volume Patients & Visits = higher score. Score Weight: 10
- LOYALTY** : Large downstream lost per OutNetwork referral so Higher % patients refer InNetwork = higher score. Score Weight: 20
- OUTCOMES** : Increase quality outcomes using local or state comparatives. Score Weight: 25
- (S) MORTALITY - Comparative score based on your mortality rate average in comparison to Local or State comparatives. Score Weight: 40
- (S) COMPLICATIONS - Comparative score based on your complication rate average in comparison to Local or State comparatives. Score Weight: 30
- (S) DACS - Comparative score based on your days in acute care, combined with return to acute care average in comparison to Local or State comparatives. Score Weight: 30
- COST** : Lower Part A, Part B, and Commercial cost using local or state comparatives. Score Weight: 25



IdealMATCH Score

Example Cost Scores

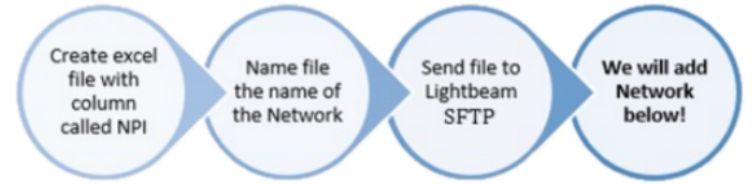
LAST NAME	FIRST NAME	CBSA	ST	CLAIM	PATIENT	MIN	MEAN	MAX	NAT MEAN	NAT RATIO	STATE MEAN	STATE RATIO	LOCAL MEAN	LOCAL RATIO	EFFICIENCY COST SCORE
Kent	Clark	19100	TX	5,959	4,423	\$ 28	\$ 28	\$ 28	\$ 136	0.21	\$ 162	0.17	\$ 180	0.16	91
Wayne	Bruce	19100	TX	13	6	\$ 34	\$ 126	\$ 217	\$ 136	0.92	\$ 162	0.78	\$ 180	0.70	77
Stark	Tony	19100	TX	112	54	\$ 18	\$ 149	\$ 400	\$ 136	1.09	\$ 162	0.92	\$ 180	0.83	72
Rogers	Steve	19100	TX	13	10	\$ 39	\$ 154	\$ 228	\$ 136	1.13	\$ 162	0.95	\$ 180	0.85	70
Parker	Peter	19100	TX	71	7	\$ 35	\$ 185	\$ 580	\$ 136	1.35	\$ 162	1.14	\$ 180	1.03	60
Banner	David	19100	TX	13	4	\$ 55	\$ 189	\$ 271	\$ 136	1.38	\$ 162	1.17	\$ 180	1.05	55

NPI	LAST NAME	FIRST NAME	SPECIALTY TYPE	SPEC IALTY	# PATIENTS	CITY DEM	SUBJECTIVE	ACCESS	VOLUME	LOYALTY	OUTCOMES	COST	IDEALMATCH
PROVIDERS													
1679537...	HENDERSON	EUGENE	Primary...	C...	0	PLANO	80		50	82	60	82	91
1932390...	VIQAR SYED	MARIA	Primary...	I...	0	PLANO	69		50	71	85	71	79
1073567...	TSENG	ANGELA	Primary...	C...	0	MCKIN...	68		66	70	96	70	78
1881629...	KLEIN	MORDECAI	Primary...	C...	0	PLANO	67		50	69	97	69	76
1265468...	PETTUJOHN	TRENT	Primary...	C...	0	PLANO	66		50	67	96	67	75
1154318...	WOOLBERT	SAMUEL	Primary...	C...	0	PLANO	64		50	65	96	65	73

- Referral
- REFERRALS
- NETWORK BUILDER**
- Match Criteria
- Build Network
- Provider Network
- Facility Network
- ORG Rank Providers
- PCP Rank Providers
- Specialty Mapping
- Insurance Management
- REFERRAL COORDINATOR
- Patient Search IdealMATCH
- Referral Tracking
- Fax Management
- REPORT CARD
- Report Card Criteria
- Org Report Card
- Providers Report Card
- NETWORK VISIBILITY
- Leakage by Specialty
- Leakage by Contract
- Leakage by Facility
- Leakage by PCP
- Leakage by Procedure Group
- Professional Claims Analysis

Provider Network
A list of the doctors, other health care providers, and hospitals that a plan has contracted with to provide medical care to its members. These providers are called "network providers" or "in-network providers." A provider that hasn't contracted with the plan is called an "out-of-network provider."

Preferred Network
One example would be to have an agreement with the Specialist to provide services at a lower cost and to not refer our patients to another PCP or Specialist without permission



[Create New Network](#) Show all networks

Rank	Network	Providers	Facilities	Active
1	COMMERCIAL - InNetwork	647	48	<input checked="" type="checkbox"/>
1	MEDICAID - InNetwork	66	9	<input checked="" type="checkbox"/>
1	MEDICARE - InNetwork	296		
2	ACO/CIN Network	112		
3	Preferred Network	147		
4	Social Network (For SDOH)	11		
5	----> Sub Provider Group - Affiliated	399		
5	----> Sub Provider Group - Owned	200		

Provider Network Edit

Display Value: Our ACO Rank: 1 Disabled: Excluded: Map:

Network: Cardiovascular Disease (Card... X Search Name or NPI... X State: New York-Newark-Jer... X Middlesex, NJ X

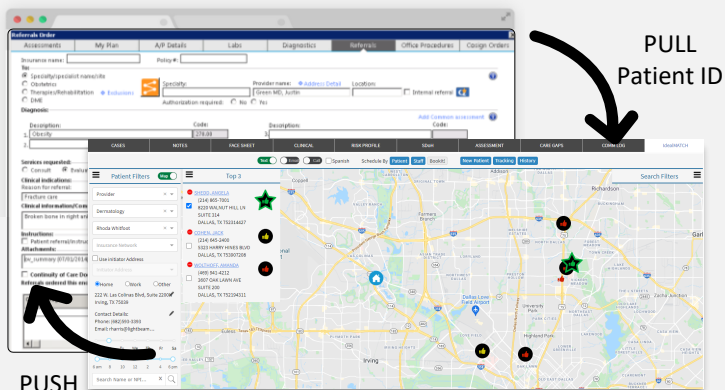
BPI	LAST NAME	SELECTIVE	ACCESS	VOLUME	LOYALTY	OUTCOMES	COST	IDEALMATCH
<input type="checkbox"/>	197258...PLAIN Puddif...	100			0		17	96
<input checked="" type="checkbox"/>	Hayw...	60			0		17	58
<input type="checkbox"/>	...PLAIN KARL	70			0		15	68
<input type="checkbox"/>	106381...	0			0		80	4
<input type="checkbox"/>	113408...PERT	0			0		80	4
<input type="checkbox"/>	121501...	0			0		80	4
<input type="checkbox"/>	138805...EAST	0			0		80	4
<input type="checkbox"/>	143742...	0			0		80	4
<input type="checkbox"/>	144740...METL	0			0		80	4
<input type="checkbox"/>	144765...	0			0		80	4
<input type="checkbox"/>	147776...EAST	0			0		80	4
<input type="checkbox"/>	168978...EDISC	0			0		80	4

STEP 3

Ideal MATCH™

3 ways to access IdealMATCH

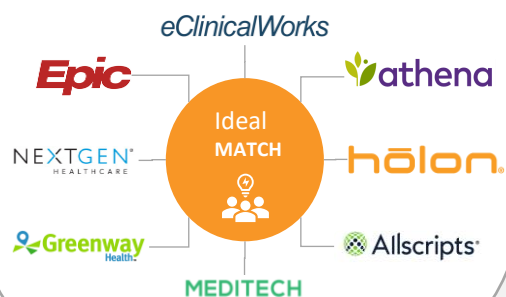
1 SSO from EHR



PUSH Details

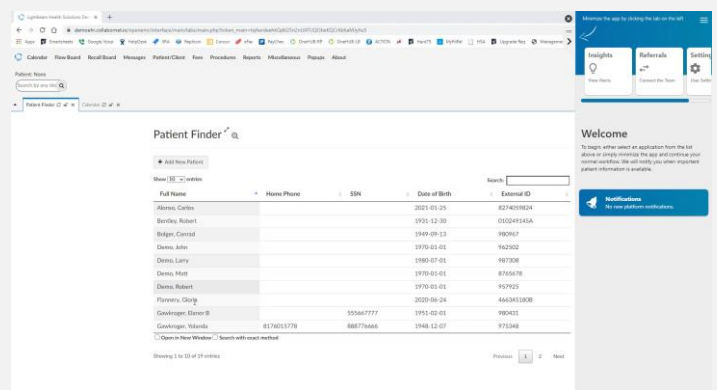
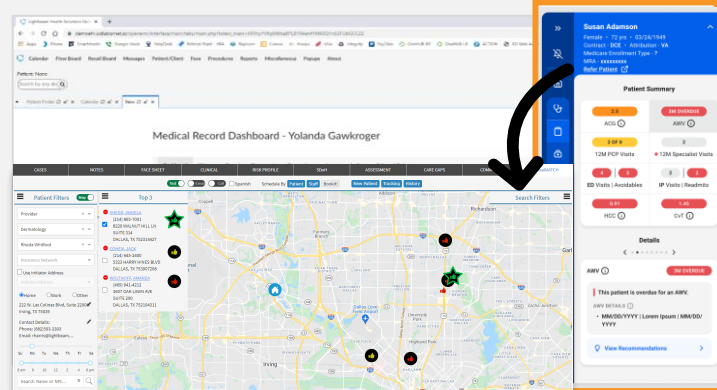


CAN INTEGRATE WITH MOST EHRs +



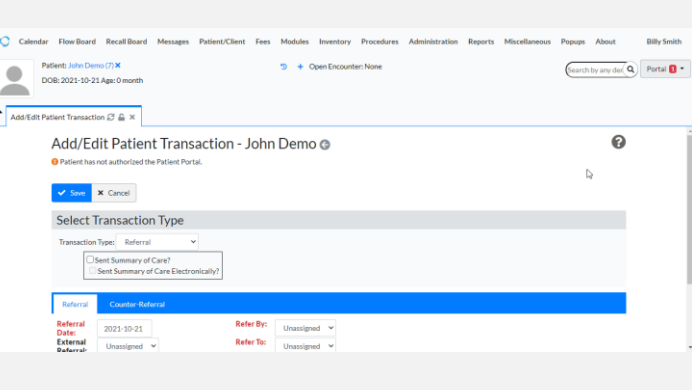
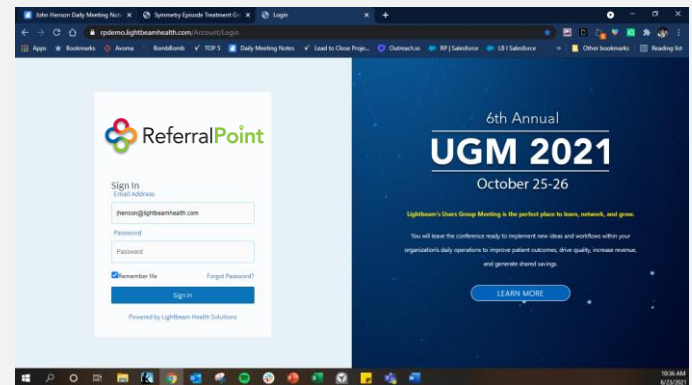
<https://marketplace.athenahealth.com/product/lightbeam-care-insights>

2 SSO from Ribbon



<https://expo.allscripts.com/Apps/Details/ReferralPoint>

3 Web Browser



<https://expo.allscripts.com/Apps/Details/ReferralPoint>

STEP
3

Ideal
MATCH™

Help providers staff get out of spreadsheets to make data-driven decisions in just **seconds** to in-network high quality, low-cost providers and facilities including personalizing patient desires.



PATIENT: IRWIN FLETCH

[IdealMATCH](#) ☰

1

PATIENT: IRWIN FLETCH No: 1234567

- CASES
- NOTES
- FACE SHEET
- CLINICAL
- RISK PROFILE
- SDoH
- ASSESSMENT
- CARE GAPS
- COMM LOG
- IdealMATCH

Text Email Call Spanish Schedule By **Patient** Staff BookIt! **New Patient** Tracking History

Print barcode labels for order results:

Department: NTX_BFAM_Ennis Office*

Description: NEUROLOGIST REFERRAL

Diagnosis: Secondary peripheral neu...

ICD-10: G63 Polyneuropathy in dis...

Decline:

Clinical Provider: **Shedd, Angela**

CC results: SHAHRAM KHALID MD
201 AMANDA LN, WAXAHA
RECIPIENT

Ordering Provider: RAYMOND BLAIR JR, MD N...

From Patient Case: referral request #5513828

From Order Group: RAYMOND BLAIR JR, MD, O...

Patient Filters Map Top 3

Referral

PCP: Dr Turner

Specialty: Neurologist

Insurance: Cigna HMO

Use initiator Address

Initiator Address:

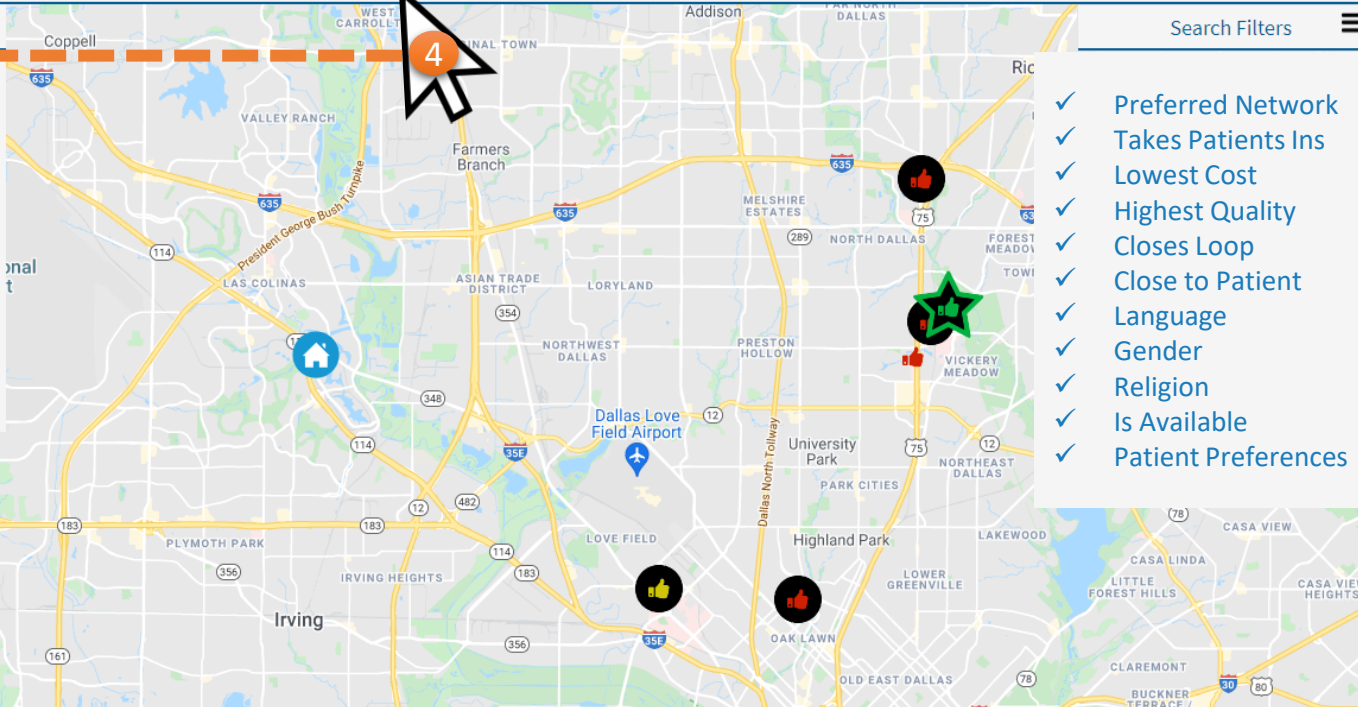
Home Work Other

Contact Details: Phone: (682)593-3393 Email: rharris@lightbeam...

Su Mo Tu We Th Fr Sa
6 am 8 10 12 2 4 6 pm

Search Name or NPI... 🔍

- 3** **2**
- 4** **SHEDD, ANGELA**
(214) 865-7001
8220 WALNUT HILL LN SUITE 314
DALLAS, TX 752314427
 - 3** **WOLTHOFF, AMANDA**
(469) 941-4212
3607 OAK LAWN AVE SUITE 200
DALLAS, TX 752194311



- ✓ Preferred Network
- ✓ Takes Patients Ins
- ✓ Lowest Cost
- ✓ Highest Quality
- ✓ Closes Loop
- ✓ Close to Patient
- ✓ Language
- ✓ Gender
- ✓ Religion
- ✓ Is Available
- ✓ Patient Preferences

Order Submitted

Failed Submission Attempt

Submit by Athena Fax

HIDE ACTIONS | MORE A...

Save Save and Next Save and Add Orders Save and Schedule Cancel

STEP
3

Ideal
MATCH™

Push referral details into



Lacey JASKOLSKI
106yo F 03-03-1917 #4143 E#4143

Apps

ReferralPoint - IdealMATCH

cardiologist referral in SUBMIT to 7 HILLS DEPARTMENT STAFF (created 04-29-2023 12:55 PM by p-jmoore3) #204872

Authorization and Insurance Referrals

of requested visits

Procedure code X

X +

Insurances Primary: *SELF PAY* [0]
EDIT AUTHORIZATION Add auth to Quickview one time as

Date of service

Urgency

Reason for Referral

Appointment Time

Notes to Patient

Prior CT, MRI or X-ray Studies?

History

Date / Time	Action	Action By	Status	Priority	Assigned To	Action Note
04-29-2023 12:55 PM	Create	p-jmoore3	REVIEW		cbulkley	
04-29-2023 12:55 PM	Approve	p-jmoore3	SUBMIT		7 HILLS DEPARTMENT STAFF	Order Signed (pin to top)
04-29-2023 12:57 PM		API-27653	SUBMIT		7 HILLS DEPARTMENT STAFF	ReferralPoint: Assigned Clinical Provider 1336128909 (pin to top)
04-29-2023 12:57 PM		API-27653	SUBMIT		7 HILLS DEPARTMENT STAFF	ReferralPoint: Referral for JAIN, TULIKA MD Approved:3123912837122 Effective 05/01/2023-05/31/2023 for 5 VSTS (pin to top)
04-29-2023 12:57 PM		API-27653	SUBMIT		7 HILLS DEPARTMENT STAFF	ReferralPoint: Insurance Verified Successfully (pin to top)

cardiologist referral in SUBMIT to 7 HILLS DEPARTMENT STAFF #204872 VIEW ACTIONS

Save Cancel

[Audit History](#)

We PUSH into
Action Notes

Or Auto PUSH Ideal Provider without going to IdealMATCH pop up

Auto API IdealMATCH™ into Athena

- ✓ Preferred Network
- ✓ Takes Patients Ins
- ✓ Lowest Cost
- ✓ Highest Quality
- ✓ Closes Loop
- ✓ Close to Patient
- ✓ Language
- ✓ Gender
- ✓ Religion
- ✓ Is Available
- ✓ Patient Preferences



Phase 1 = Auto populate IdealMATCH when Specialist field is empty

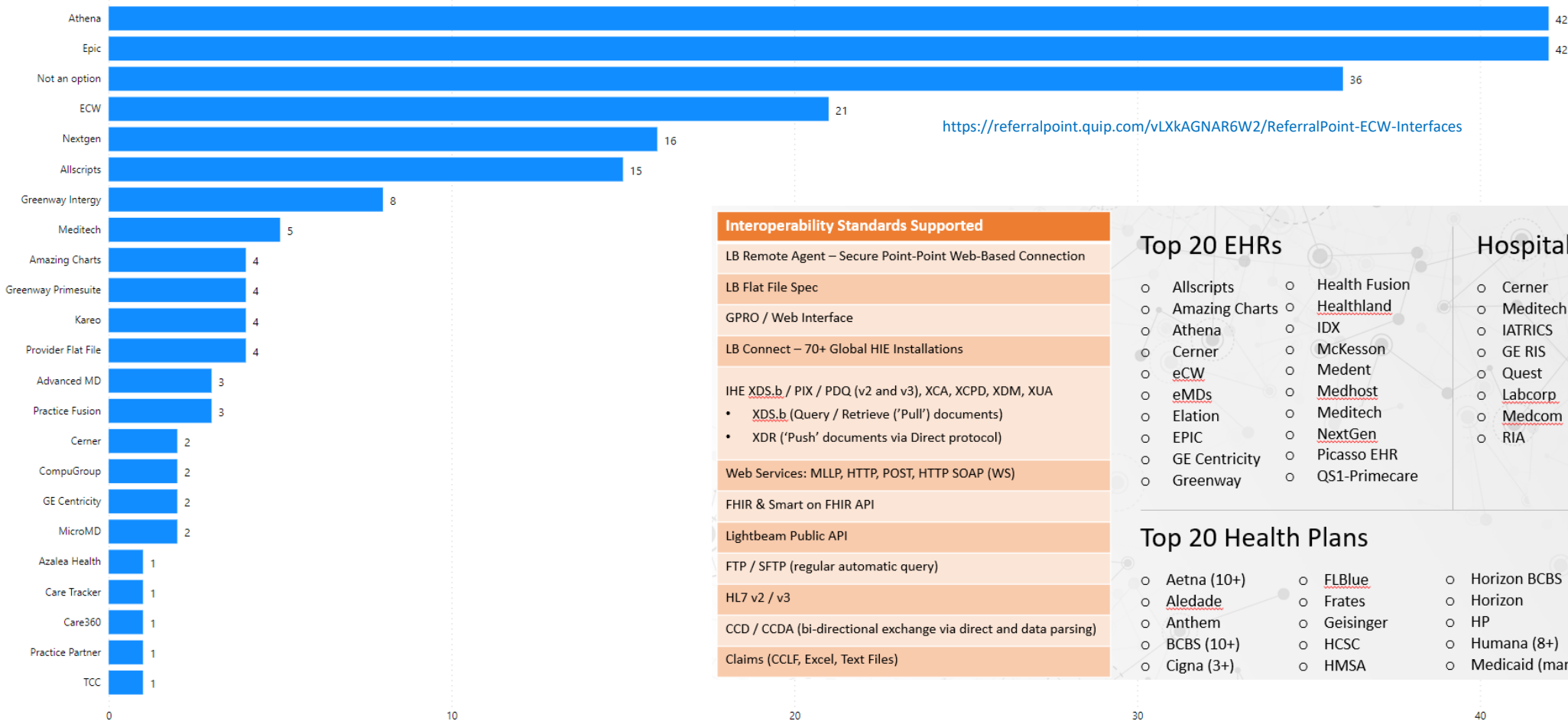
Phase 2 = Auto populate IdealMATCH but give PCP ability to override it with easy Reason Code

Phase 3 = Auto populate IdealMATCH plus Auto Verify Patient Ins + Auth without using RC at all

Date / Time	Action	Action By	Status	Priority	Assigned To	Action Note
05-01-2023 2:20 PM	Create	p-jmoore3	REVIEW		cbulkley	
05-01-2023 2:20 PM	Approve	p-jmoore3	SUBMIT		7 HILLS DEPARTMENT STAFF	Order Signed (pin to top)
05-02-2023 2:20 PM		API-27653	SUBMIT		7 HILLS DEPARTMENT STAFF	ReferralPoint: Assigned Clinical Provider 1336128909 (pin to top)

< Back to report

Represents only 20% when the admin remembers to select which EHR when creating the ticket.



<https://referralpoint.quip.com/vLXkAGNAR6W2/ReferralPoint-ECW-Interfaces>

Interoperability Standards Supported	Top 20 EHRs	Hospital Lab Radiology		
LB Remote Agent – Secure Point-Point Web-Based Connection	<ul style="list-style-type: none"> Allscripts Amazing Charts Athena Cerner eCW eMDs Elation EPIC GE Centricity Greenway Health Fusion Healthland IDX McKesson Medent Medhost Meditech NextGen Picasso EHR QS1-Primecare 	<ul style="list-style-type: none"> Cerner Meditech IATRIS GE RIS Quest Labcorp Medcom RIA McKesson ISys Lifespan Radiology RIMI Lab Results Cerner Radnet Cerner Pathnet Siemens Soarian IDX 		
LB Flat File Spec				
GPRO / Web Interface				
LB Connect – 70+ Global HIE Installations				
IHE XDS.b / PIX / PDQ (v2 and v3), XCA, XCPD, XDM, XUA				
• XDS.b (Query / Retrieve ('Pull') documents)				
• XDR ('Push' documents via Direct protocol)				
Web Services: MLLP, HTTP, POST, HTTP SOAP (WS)				
FHIR & Smart on FHIR API				
Lightbeam Public API				
FTP / SFTP (regular automatic query)				
HL7 v2 / v3				
CCD / CCDA (bi-directional exchange via direct and data parsing)				
Claims (CCLF, Excel, Text Files)				
			Top 20 Health Plans	
			<ul style="list-style-type: none"> Aetna (10+) Aledade Anthem BCBS (10+) Cigna (3+) FLBlue Frates Geisinger HCSC HMSA Horizon BCBS Horizon HP Humana (8+) Medicaid (many) MSSP (5+) Optum Premier United Wellmed 	

Verify Patient Insurance without logging into Payer sites

The screenshot shows a patient record for Jonathan D. Moore. At the top, there are navigation buttons for 'Edit', 'PREV', and 'NEXT'. Below this, patient details include 'Sex: Male', 'DOB: 3/8/1982', '40 years', and 'ID: 0003074241'. There are also buttons for 'Attach', 'Social Services', 'Start Timer', and 'Time Spent: 0 Min'. A menu bar includes 'Demographics', 'Contact', 'Automation', 'Physician', 'Contract / Insurance', and 'Other'. A secondary menu bar contains 'CASES', 'NOTES', 'FACE SHEET', 'CLINICAL', 'RISK PROFILE', 'SDoH', 'ASSESSMENT', 'CARE GAPS', 'CARESIGNAL', 'COMM LOG', and 'IdealMATCH'. A toolbar features a 'Verified Insurance' button, toggle switches for 'Text', 'Email', and 'Call', a 'Spanish' checkbox, and 'Schedule By' options for 'Patient', 'Staff', and 'BookIt!'. There are also buttons for 'New Patient', 'Tracking', and 'History'. The main area is a map with a 'Search Filters' sidebar on the left. A 'Health Benefit Plan Details' modal is open, showing 'Patient Has Insurance' as 'Yes' with a toggle switch. It lists 'PRIMARY - AETNA' and 'SECONDARY - TRICARE'. Under 'PLAN 1', it shows 'Active Coverage', 'Coverage Start', 'Coverage End', and 'Last Verified: 1/19/2023 @ 12:28 pm' with a 'Reverify' button. Under 'PLAN 2', it shows 'Active Coverage', 'Limitations', 'No Network Individual', and 'Insurance Type: Supplemental Policy'. A 'Reverify All Insurances' button is at the bottom right of the modal. The sidebar includes filters for 'Referral', 'Esmeralda Baggins', 'Provider', 'Specialty', and 'Shoppable Services'. It also shows 'Patient Insurance(s)' with 'AETNA' selected and a weekly schedule at the bottom.

Automate Auth without logging into Payer sites

Other Required Information

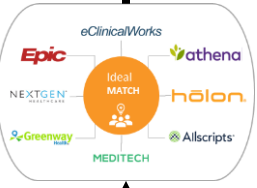
- Type of Service: Diagnostic X-Ray
- Place of Service: Tribal 638 Free-standing Facility
- ICD (Max of 3): A08.4 - Viral intestinal infection, unspecified

AUTO send API

PATIENT INFO
ORDERING PROVIDER
SERVICING PROVIDER
PLACE OF SERVICE
CPT CODES
DOCUMENTATION

Determine if auth required in real-time based on CPT/HCPCS code for patient's plan.

Auto Ingest Patients through EHR Clinical Interface



Auto updates EHR/PM

PROBLEM

1. Manual input 3-15 different logins
2. Different workflows for all 3-15 sites
3. Users go back 3-15 logins to check status

SOLUTION

1. Eliminate manual inputs + One login
2. SARA let's Patient know getting PA info
3. SARA asks if Patient show + experience

RESULTS

1. Reduces Cost per Auth 30-50%
2. Inc Productivity 30-50%
3. Inc Approval % (Denials = \$10K Surgery)
4. Inc Turn around Time = Reduce Cancels



Auto updates Approval Status + Auth info

Referral Tracking


AVG DAYS TO SCHEDULE: 0 | PATIENT TO SCHEDULE: 0 | STAFF TO SCHEDULE: 0 | PASSED APPT NOT CLOSED YET: 0 | OVERDUE IN A STATUS: 28

Download Excel Report

ID	Created	Unread	Patient	Initiator	Order	PriorAuth	PriorAuth #	Valid From	Expiration	Recommended Recipient	Scheduled Recipient	Appt	Specialty	Assigned	Stage	Status	Next Action	Priority	SMS	Email	Phone
3857	6/21/2021		Sural Demo	Elanor Baggir	PriorAuth	Submitted								Admin	New	Overdue 21 day(s)	Wait for recipient	5	Out	Out	Out
3858	6/21/2021		Sural Demo	Elanor Baggir	PriorAuth	Attention				JON BROWER			Cardiovascular Disease	System Admin	New	Overdue 21 day(s)	Wait for recipient	6	In	Out	Out
3859	6/21/2021		Sural Demo	Elanor Baggir	PriorAuth	Approved	1321635461	6/20/2021	6/24/2021	Ruby Aleman			Cardiovascular Disease	System Admin	New	Overdue 21 day(s)	Wait for recipient	7	In	Out	Out

One place to manage all Auths

Watch Video of SSO to IdealMATCH inside EHR + Verify Patients Insurance + Auto process the Auth

athenaOne[®] Calendar Patients Claims Financials Reports Quality Apps Support  4143 p-jmoore3 Log out

Clinical Inbox Recently Viewed

Assigned To	Encounters	Appointment Requests	Patient Cases	Orders / Rxs / Auths	Lab / Imaging	Clinical Documents	Admin / Phone Messages	Unknown Documents	Need Followup	Total
7 HILLS DEPARTMENT STAFF		187	705	105	112	158	48	8	46	1369
ATHENA			2	13	1	2				18
ATHENAFAX				37		5				42
INTERFACE						12				12
PORTAL		24	51	4	19	1			1	100
PRACTICE		71	65	85	12	68	1			302
abricker2 STAFF	6			9						15
Admincalls			2							2
Apptbucket		9			2					11
Babytasks			46		5	383				434
Billingquestions			1							1
Ccm	6		1			14				21
Ccbilling						1				1
dpato STAFF	1		2							3
dtester2 STAFF	19		31	35						85
Labreview								198		198
Officemanager			299			1				300
Jonathan Moore						1				1
Patientcaresummary						56				56
Patientcases			17							17
Portalapptrequest		3								3
Practicerole	1	313	1							315
Referrals					2					2
Stewardtest		365								365
tcds STAFF	1			13						14
Tcm			8							8
tdow3 STAFF	4		26	21						51
Triage						2				2
Walkin	14			5	1					20

athenaNetwork SCHEDULE

Messages

Fri Apr 28 2023
[\[Marketplace Webinar\] Improve your schedule with DOCPACE](#)

Wed Apr 26 2023
[Survey: How can we improve selecting and appropriately coding diagnoses?](#)


[Make sure your voice is heard — join the Research Council!](#)

Tue Apr 25 2023
[Join us on May 11 for a Product Roadmap webinar on revenue cycle](#)

Mon Apr 24 2023
[athenaCommunicator short links update](#)

[See more messages](#)

Training & Resources

 [Spring 2023 Clinical Release Center](#)




[Release Notes](#)

[aNet homepage screenshots](#)

[Podcast: Quality success in 2023 starts now](#)

[athenahealth podcast: Spring 2023 Release](#)

[athenahealth Learning Portal](#)

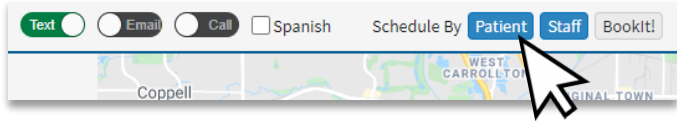
7 Hills Department   0  0 1 tasks

STEP 5

AutoSchedule CLOSELOOP™

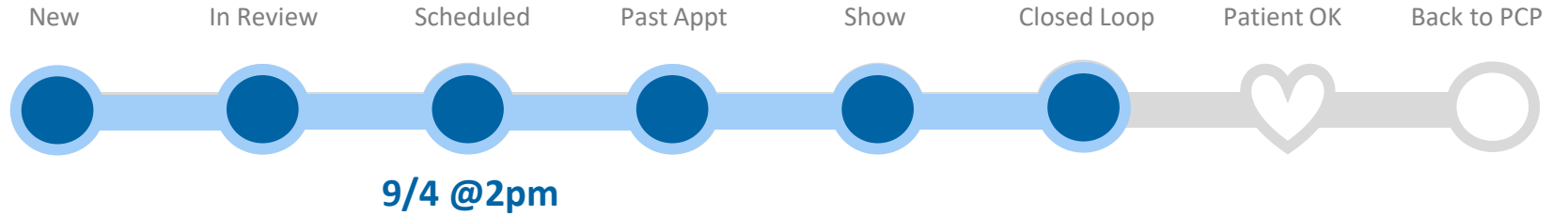
Automated texts, emails, or calls in English, Spanish or others creating higher contact rates to reduce No Shows while sharing data with Providers to close the loop regardless of EHR.

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Meet **SARA**, your Referral Coordinator.

- English
- Spanish
- Chinese
- Tagalog
- Russian
- Other



NEW

Hi Clark,
This is **SARA**, from **ABC Medical**. As your auto-referral coordinator, I will work with you to ensure you get connected with your recommended **specialist**.

Use this [secure link](#) to easily call and schedule your appt.

Reply **X** at any time to opt out.

Not to an App... but right to their normal text!

IN REVIEW

Hi Clark,
We **matched** you with the ideal Specialist:

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

Click to call to schedule your Appt:

- **DR NEIL ARMSTRONG**
- (800) 555-1212 [Or schedule online](#)
- 1st MOON ST, ORLANDO, FL, 19690

To ensure you get care, I will...

1. Send you a friendly reminder
2. Confirm if you met Specialist
3. Ask you to rate your experience

- SARA

SCHEDULED

Hi Clark,
I see you reviewed the link...were you able to schedule your appt?

YES

That's great! To ensure you're taken care of please reply with the date (mm/dd).

9/4

Thank you and what time (ex: 3:30pm)?

2pm

I appreciate you letting me know. I will reach out after to ensure things went well. - SARA

CLOSE LOOP

Hi Clark,
Just a quick reminder that you have an appt scheduled tomorrow 9/4 at 2pm. Can you confirm?

YES

Did you happen to attend your appt?

YES

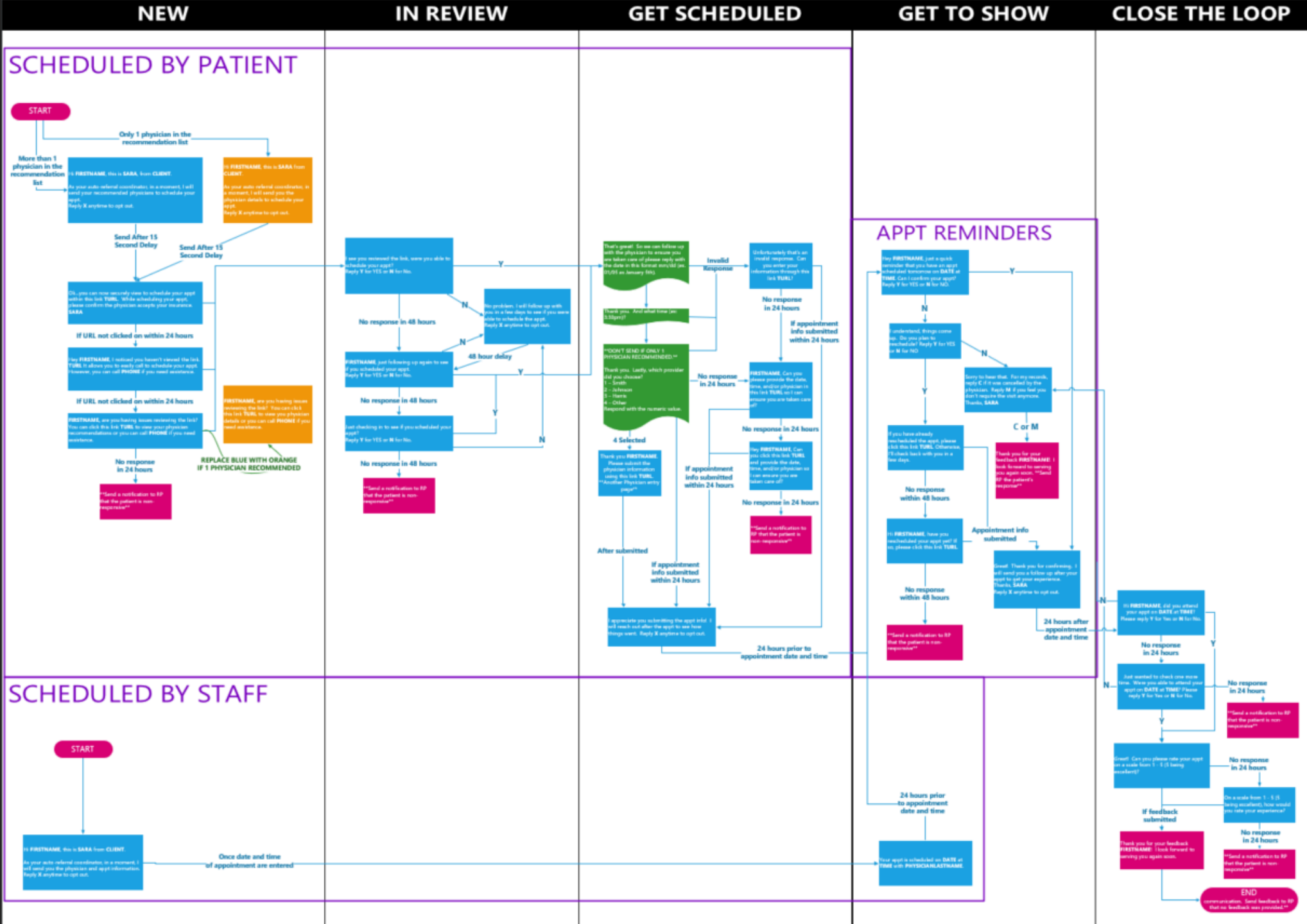
Great! Can you please rate your appt 1 - 5 (5 being excellent)?

4

Thank you. Want to leave your [review](#)? I'll check in a few days to ensure you're ok. - SARA

Close Loop with PATIENT

Quicker and higher contact rates to Schedule and Close the Loop with the **PATIENT** regardless of EHR.



ENHANCED PATIENT EXPERIENCE

- ✓ Automated texts, emails, and calls in English and Spanish to increase contact rates and reduce no shows
- ✓ Automated patient scheduling to ensure connection with specialist, whether patient's or specialist's responsibility
- ✓ Automated closed loop with patient, including if patient scheduled, showed, and experience with the specialist
- ✓ To educate patients on SARA, we created a video and brochure

90%

routine referrals
now scheduled by
patients via SARA



FAX COVER – PATIENT REFERRAL



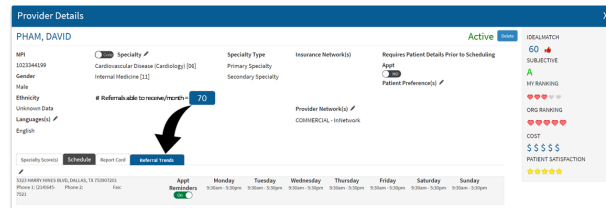
Dr Angela Shod,

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.

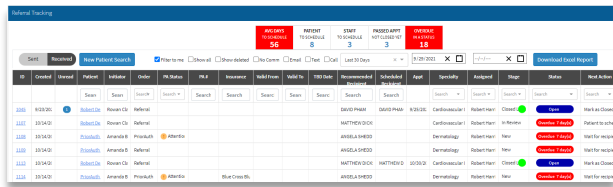
Our practice would like to focus our referrals on those specialists who are good communicators not only with patients but with us, the primary care provider. It is also helpful to us if we know a little more about your practice and which insurances you accept. We also ask our patients to give us feedback 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 855-REFER-ME (855-733-3763) Urgency: **Within 7 Days**
Insurance: No Contract 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. If Patient hasn't contacted you, call Patient to schedule
 2. Fax back **consult note** to xxx-xxx-xxxx within 72 hours
 3. Confer with us if secondary referrals are needed
 4. If you need further info write below and fax back
- REFERRAL REASON:
DIAGNOSIS CODES:
CPT CODES:
ANSITION OF CARE:
VILL ALSO PROVIDE:

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
- 1st ANGELA SHEDD**
(214) 865-7001
8220 WALNUT HILL LN, SUITE 314
DALLAS, TX, 75231

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 hereon.

Patient Signature: _____ Date: _____



Auto CLOSELOOP™

Tracking Referrals through Closing the Loop with the Patient, the Specialist, and because we can ingest your claims, we automatically know if Patient showed, diagnosis, procedure, and cost.

Referral 9755 Restart/Cancel Communication



Next: Staff Completed

New IdealMATCH New Patient Search Referral Tracking



Patient: [ROSALIA ALESSITest](#)

DOB: 12/23/1938

Insurance: MEDICARE PART A & B

Initiator: [Diamanda Galbassi](#)

Recipient: [JIGAR PATEL](#)

Specialty Group: ACUPUNCTURE

Communication Type: None

Communication Status: **Active**

Assigned To: System Admin

Time To Schedule: Within 7 Days

Reason For Referral:

Patient Instructions:

Authorization:

Diagnosis Code(s):

CPT Code(s):

Visits:

Valid From:

Valid Through:

Archive Referral

Save Changes

Wait for EHR New In Review Scheduled Passed Appt Show Closed Loop Closed



9/19/2022 12:00 am

Recipient
Patient
Claim

Appt Details Activity Referral History File(s) / Fax Fax History Messages **Claims**

Claim #	Claim From	Claim Thru	NPI	First Name	Last Name	Network	ICD Codes	CPT Codes	POS Code	Amount
<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>	<input type="text" value="Search"/>
0091695586258	2022-09-19	2022-09-19	1902018468	JIGAR	PATEL	In-Network	I10,E782,E7439	99213	11	64.37
0045179803840	2022-10-16	2022-10-16	1073519336	WOLF	ANDREAS	In-Network	2722,4011,27800	93000	11	14.64
0045179803840	2022-10-16	2022-10-16	1073519336	WOLF	ANDREAS	In-Network	2722,4011,27800	99213	11	61.55
0056815130534	2022-11-16	2022-11-16	1134366958	JUSTIN	KARL	Out-Network	I6529	93880	11	168.81

Row(s) Identified: 4

View PDF

Patient

Staff

Save PDF to Fax

Patient

Staff

Inbound Referral INBOX & Close Loop

Referral Tracking

Referral Inbox

AVG DAYS TO SCHEDULE	PATIENT TO SCHEDULE	STAFF TO SCHEDULE	PASSED APPT NOT CLOSED YET	OVERDUE IN A STATUS	SMS UNREAD	SMS SENT	SMS RECEIVED	SMS TOTAL
-1	1	0	1	0	0	0	0	0

Sent Received New Patient Search Filter to me Show all Show deleted No Comm Email Text Call Last 10 Days 11/20/2022 Download Excel Report

ID	Created	Alerts	EHR#	Patient	DOB	PA Status	Initiator	Insurance	Order	Auth #	TBD Date	Valid From	Valid To	Recommended Recipient	Scheduled Recipient	Appt	Specialty	Assigned	Stage	Status	Next Action
11953	11/29/2022		Add	Lacey Jasko	9/3/1917		Esmeralda	BCBS	REFERRAL					DR. EHR DEMO			CARDIOVASCULAR	System Admin	IN REVIEW	OPEN 7 day(s) left	PATIENT TO SCHE

INBOX 23124 - VILLAGE MD

Next In Review Auth Pending Auth Complete Schedule Send Intake Form Intake Form Complete No Show Show Closed Loop Closed

Patient: Larry Demo
 DOB: 7/1/1980
 Insurance: AETNA MC/EC POS
 Initiator: Eglantine Burrowes
 Recipient: SUMEET CHABRA, MD
 Specialty Group: CARDIOVASCULAR DISEASE (CARDIOLOGY)
 Communication Type: Text
 Communication Status: Active
 Out of Network Reason: None
 Assigned To: Larry Hill
 Time To Schedule: Within 7 Days
 Reason For Referral: PATIENT HAS BEEN EXPERIENCING CHEST PAIN AND HAS HAD HIGH BLOOD PRESSURE
 Patient Instructions: PATIENT HAS BEEN TOLD TO NOT EXERCISE UNTIL HIS CARDIOLOGY
 Authorization: Pre-authorization
 Diagnosis Code(s): D32.X
 CPT Code(s): CPT Code
 Visits: Visits
 Valid From: --/--/--- X
 Valid Through: --/--/--- X

Save Changes

PATIENT: LARRY DEMO INITIATOR/REFER FROM: EGLANTINE BURROWES

DOB: 7/1/1980 Age: 42 Address: 125 PATERSON ST, NEW BRUNSWICK, NJ 08901
 Phone: (405) 701-9757 Gender: Male Phone: 855-REFER-ME (855-733-3763) Urgency: WITHIN 7 DAYS
 Insurance: AetnaME Valid Through: NPI: 1689081945 Expires: Auth#: Specialty: CARDIOVASCULAR DISEASE (CARDIOLOGY)
 Visits: Visits

RECIPIENT INSTRUCTIONS - Authorized by EGLANTINE BURROWES on TBD at TBD

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

1. If Patient hasn't contacted you, call Patient to schedule
2. Determine insurance eligibility prior to visit
3. Fax back consult note to within 72 hours
4. Confer with us if secondary referrals are needed
5. If you need further info write below and fax back

REFERRAL REASON: PAIN AND HAS HAD HIGH BLOOD PRESSURE
 DIAGNOSIS CODES: D32.X
 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.

Demo, PriorAuth

Care Gaps: 0 Risk: 0.973 ATI: 7.810

Demographics Contact Automation Physician Contract / Insurance Other

CASES NOTES FACE SHEET CLINICAL RISK PROFILE SDOH ASSESSMENT CARE GAPS COMM LOG IdealMATCH

Search Filters Top 3

PriorAuth
 1. NEED CLAR... (214) 645-7018
 Amanda Baggins (853) HARRY HINES BLVD DALLAS, TX 753907201
 Provider
 AGUSHA, KASTIR (214) 645-7018
 8233 HARRY HINES BLVD DALLAS, TX 753909047
 JAN, VIKAS (817) 329-7870
 1643 LANCASTER DR SUITE 205 GRAPEVINE, TX 760513593

Map showing location of providers and patient.

Legend: Provider Score, Quality, Cost, Patient Satisfaction, Distance (mi), Accepts Medicare Payment, Language(s), Gender, Patient Preference(s)

Referral Tracking

AVG DAYS TO SCHEDULE 12 | PATIENT TO SCHEDULE 37 | STAFF TO SCHEDULE 20 | PASSED APPT NOT CLOSED YET 37 | OVERDUE IN A STATUS 217

Sent Received New Patient Search Filter to me Show all Show deleted No Comm Email Text Call Date Range Preset --/--/---- X --/--/---- X Download Excel Report

ID	Created	Unread	Patient	Initiator	Order	PA Status	PA #	Insurance	Valid From	Valid To	TBD Date	Recommended Recipient	Scheduled Recipient	Appt	Specialty	Assigned	Stage	Status	Next Action
1116	10/19/2021	1	PriorAuth	Amanda B	PriorAuth	Attention		Blue Cross E				ANGELA SHEDD			Dermatolog	Robert Harri	New	New 6 day(s) left	Wait for recipier
1115	10/19/2021	1	Robert De	Rowan Cle	Referral							ANGELA SHEDD			Dermatolog	Robert Harri	New	New 6 day(s) left	Wait for recipier
1114	10/14/2021	1	PriorAuth	Amanda B	PriorAuth	Attention		Blue Cross E				ANGELA SHEDD			Dermatolog	Robert Harri	New	New 1 day(s) left	Wait for recipier
1113	10/14/2021	1	Robert De	Rowan Cle	Referral							MATTHEW DICKSON	MATTHEW DICKSON	10/30/21	Cardiovascu	Robert Harri	Closed	Open	Mark as Closed
1112	10/14/2021	1	PriorAuth	Amanda B	PriorAuth	Approve	4423434343	Blue Cross E	1/1/2022	1/30/2022		ANGELA SHEDD			Dermatolog		In Review	Open 1 day(s) left	Patient to sched
1109	10/14/2021		PriorAuth	Amanda B	Referral							ANGELA SHEDD			Dermatolog	Robert Harri	New	New 1 day(s) left	Wait for recipier
1108	10/14/2021		PriorAuth	Amanda B	PriorAuth	Attention						ANGELA SHEDD			Dermatolog	Robert Harri	New	New 1 day(s) left	Wait for recipier
1107	10/14/2021		Robert De	Rowan Cle	Referral							MATTHEW DICKSON			Cardiovascu	Robert Harri	In Review	Open 1 day(s) left	Patient to sched
1106	10/12/2021		John Dem	Ruby Pudc	Referral							BLAIR ROSE			Physician As	Matt Cheath	In Review	Overdue 1 day(s)	Patient to sched
1105	10/12/2021		John Dem	Ruby Pudc	Referral							BLAIR ROSE			Physician As	Matt Cheath	In Review	Overdue 1 day(s)	Patient to sched
1102	10/5/2021		John Dem	Ruby Pudc	Referral							AMIL PATEL	AMIL PATEL	10/10/21	Gastroenter	Matt Cheath	Schedul	Open	Wait for appt da
1101	10/5/2021		John Dem	Ruby Pudc	Referral							ANGELA SHEDD	ANGELA SHEDD	10/10/21	Dermatolog	Matt Cheath	Show	Open	Close loop with
1100	10/5/2021		John Dem	Ruby Pudc	Referral							DAVID PHAM	DAVID PHAM	10/10/21	Cardiovascu	Matt Cheath	Schedul	Open	Wait for appt da
1095	10/4/2021		John Dem	Ruby Pudc	Referral							DAVID PHAM	DAVID PHAM	10/8/2021	Cardiovascu	Matt Cheath	Schedul	Open	Wait for appt da
1086	10/2/2021		John Dem	Ruby Pudc	Referral							DAVID PHAM			Cardiovascu	Matt Cheath	In Review	Overdue 11 day(s)	Patient to sched

Auto updates Approval Status

2 WAY TEXT INBOX

Text Message Today 1:06 PM

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?


Filter to you, assigned or whole team

Filter by stage

STEP 6

360 Enterprise VISIBILITY™

Free Specialist Account to see the referrals they receive, their report card, and update their schedule, languages, specialties, insurances they accept, as well as the status of the referral and upload the CCDA.



Referral Access

First Name* Last Name*

Email*

Job Title*

Organization (do not abbreviate)*

Organization Type
 Provider Non-Provider

NPI*

Invitation Code*

[See Enterprise Features](#)

I read the [Privacy Policy](#) and agree to the [Terms of Service and Business Associate Agreement](#).

Already have an account? [Sign in to your account](#)

Provider Details

PHAM, DAVID Active

NPI: 1023344199
 Gender: Male
 Ethnicity: Unknown Data
 Languages(s): English

Specialty: Code Specialty
 Cardiovascular Disease (Cardiology) [06]
 Internal Medicine [11]

Referrals able to receive/month = **70**

Specialty Type: Primary Specialty
 Secondary Specialty

Insurance Network(s): Cigna, Aetna, Humana, Blue Cross Blue Shield

Requires Patient Details Prior to Scheduling: NO YES

Patient Preference(s)

Provider Network(s): COMMERCIAL - InNetwork

IDEALMATCH: 60
 SUBJECTIVE: A
 MY RANKING: 5 hearts
 ORG RANKING: 5 hearts
 COST: \$\$\$\$
 PATIENT SATISFACTION: 5 stars

Specialty Score(s) | **Schedule** | Report Card | Referral Trends

5323 HARRY HINES BLVD, DALLAS, TX 753907201
 Phone 1: (214)645-7521 | Phone 2: | Fax:

Appt Reminders: On

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9:30am - 5:30pm	9:30am - 5:30pm	9:30am - 5:30pm	9:30am - 5:30pm	9:30am - 5:30pm	9:30am - 5:30pm	9:30am - 5:30pm

Referral Tracking

AVG DAYS TO SCHEDULE: 56 | PATIENT TO SCHEDULE: 8 | STAFF TO SCHEDULE: 3 | PASSED APPT NOT CLOSED YET: 3 | OVERDUE IN A STATUS: 18

Sent | Received | **New Patient Search** | Filter to me | Show all | Show deleted | No Comm | Email | Text | Call | Last 30 Days | 9/29/2021 |

ID	Created	Unread	Patient	Initiator	Order	PA Status	PA #	Insurance	Valid From	Valid To	TBD Date	Recommended Recipient	Scheduled Recipient	Appt	Specialty	Assigned	Stage	Status	Next Action
1045	9/23/20	<input checked="" type="checkbox"/>	Robert De	Rowan Cl	Referral							DAVID PHAM	DAVID PHAM	9/25/20	Cardiovascular I	Robert Harri	Closed L	<input type="button" value="Open"/>	Mark as Closed
1107	10/14/21	<input type="checkbox"/>	Robert De	Rowan Cl	Referral							MATTHEW DICK			Cardiovascular I	Robert Harri	In Review	Overdue 7 day(s)	Patient to sched
1108	10/14/21	<input type="checkbox"/>	PriorAuth	Amanda B	PriorAuth							ANGELA SHEDD			Dermatology	Robert Harri	New	Overdue 7 day(s)	Wait for recipier
1109	10/14/21	<input type="checkbox"/>	PriorAuth	Amanda B	Referral							ANGELA SHEDD			Dermatology	Robert Harri	New	Overdue 7 day(s)	Wait for recipier
1113	10/14/21	<input type="checkbox"/>	Robert De	Rowan Cl	Referral							MATTHEW DICK	MATTHEW D	10/30/21	Cardiovascular I	Robert Harri	Closed L	<input type="button" value="Open"/>	Mark as Closed
1114	10/14/21	<input type="checkbox"/>	PriorAuth	Amanda B	PriorAuth			Blue Cross Bl				ANGELA SHEDD			Dermatology	Robert Harri	New	Overdue 7 day(s)	Wait for recipier



- Referral
- REFERRALS
- NETWORK BUILDER
- Match Criteria
- Build Network
- Provider Network
- Facility Network
- ORG Rank Providers
- PCP Rank Providers
- Specialty Mapping
- Insurance Management
- REFERRAL COORDINATOR
- Patient Search IdealMATCH
- Referral Tracking
- Fax Management
- REPORT CARD
- Report Card Criteria
- Org Report Card
- Referral Impact Trends
- NETWORK VISIBILITY
- Leakage by Specialty
- Leakage by Contract
- Leakage by Facility
- Leakage by PCP
- Leakage by Procedure Group
- Professional Claims Analysis

Referral Impact Trends																															
SELECT BU: Example ACO			PROVIDER VISITED	MONTHS WITHIN	CONTRACT	PRACTICE TIN	SPECIALITY	NPI	LEAKAGE TYPE	CONTRACT YEAR	LOCATION	REFERRAL TYPE	ORDERS	ASSIGNED																	
ACCESS COMMUNITY HEALTH NETWORK			ACO-PCP	1	PPO+	All	All		Network	2021	ALL	ALL	ALL	ALL																	
<table border="1"> <thead> <tr> <th></th> <th>Before RP</th> <th>Benchmark</th> <th>2021-01</th> <th>2021-02</th> <th>2021-03</th> <th>2021-04</th> <th>2021-05</th> <th>2021-06</th> <th>2021-07</th> <th>2021-08</th> <th>2021-09</th> <th>2021-10</th> <th>2021-11</th> <th>2021-12</th> <th>TOTAL</th> </tr> </thead> </table>																	Before RP	Benchmark	2021-01	2021-02	2021-03	2021-04	2021-05	2021-06	2021-07	2021-08	2021-09	2021-10	2021-11	2021-12	TOTAL
	Before RP	Benchmark	2021-01	2021-02	2021-03	2021-04	2021-05	2021-06	2021-07	2021-08	2021-09	2021-10	2021-11	2021-12	TOTAL																
REFERRAL MANAGEMENT																															
# Urgent/STAT			0	0	0	0	0	0	0	1	0	0	0	0	1																
# Routine			406	381	616	543	692	663	699	711	679	738	699	573	7,400																
# Direct			0	0	0	0	0	0	0	0	0	0	0	0	0																
# Referrals			406	381	616	543	692	663	699	712	679	738	699	573	7,401																
# Referral Auth			406	381	616	543	692	663	699	712	679	738	699	573	690																
# Prior Auth			0	0	0	0	0	0	0	0	0	0	0	0	1,135																
# Auths			406	381	616	543	692	663	699	712	679	738	699	573	690																
# of Schedule by Patient			403	380	615	540	689	663	693	709	678	737	698	572	690																
# of Schedule by Staff			3	1	1	3	3	0	6	3	1	1	1	1	515																
Open Referrals			157	150	322	218	288	228	238	248	244	244	244	244	244																
Avg # of Days Behind			245.7	229.7	229.1	177.5	171.3	135.1	119.6	102.4	79.7	79.7	79.7	79.7	79.7																
Avg Days to Get Scheduled			6.9	3.9	10.9	4.2	3.7	4.2	4.0	4.9	6.3	6.3	6.3	6.3	6.3																
Avg Days to Appt Date			94.8	18.3	24.9	16.0	21.5	18.5	21.8	19.6	27.7	27.7	27.7	27.7	27.7																
ARC Messages Sent			1,458	1,372	1,841	2,094	2,628	2,776	2,940	2,767	2,642	2,642	2,642	2,642	2,642																
Engaged With ARC - Reviewed			249	231	294	325	404	435	461	464	435	464	464	435	435																
Engaged %			61.3%	60.6%	47.7%	59.9%	58.4%	65.6%	66.0%	65.2%	64.1%	64.1%	64.1%	64.1%	64.1%																
Staff - 2 Way Text Messages			0	1,372	1,841	2,094	2,628	2,776	2,940	2,767	2,642	2,642	2,642	2,642	2,642																
Patient - 2 Way Text Messages			0	0	0	0	0	0	0	0	0	0	0	0	0																
Scheduled through ARC			124	112	140	180	188	225	215	201	198	198	198	198	198																
Scheduled through ARC % (Scheduled / Engaged)			49.8%	48.5%	47.6%	55.4%	46.5%	51.7%	46.6%	43.3%	45.5%	45.5%	45.5%	45.5%	45.5%																
Show			47	52	60	79	68	93	83	76	76	76	76	76	76																
Show % (Show / Scheduled)			37.9%	46.4%	42.9%	43.9%	36.2%	41.3%	38.6%	37.8%	38.4%	38.4%	38.4%	38.4%	38.4%																
No Shows (Responded)			6	1	1	4	9	7	8	2	6	6	6	6	6																
Closed Loop with Patient			42	48	48	64	58	70	71	62	65	65	65	65	65																
Closed Loop with Patient (Closed / Show)			89.4%	92.3%	80.0%	81.0%	85.3%	75.3%	85.5%	81.6%	85.5%	85.5%	85.5%	85.5%	85.5%																
Avg Days to Close Loop - Patient																															
Closed Loop with Specialist			0	0	0	0	0	0	0	0	0	0	0	0	0																
Closed Loop with Specialist (Closed / Show)			0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%																
Avg Days to Close Loop - Specialist																															
Avg Patient Experience Score			4.6	4.4	4.5	4.6	4.7	4.5	4.6	4.6	4.6	4.6	4.6	4.6	4.6																
After Discharge Care Messages			0	0	0	0	0	0	0	0	0	0	0	0	0																
After Discharge Care Messages - Engaged %																															
Referred Patient back to PCP %																															

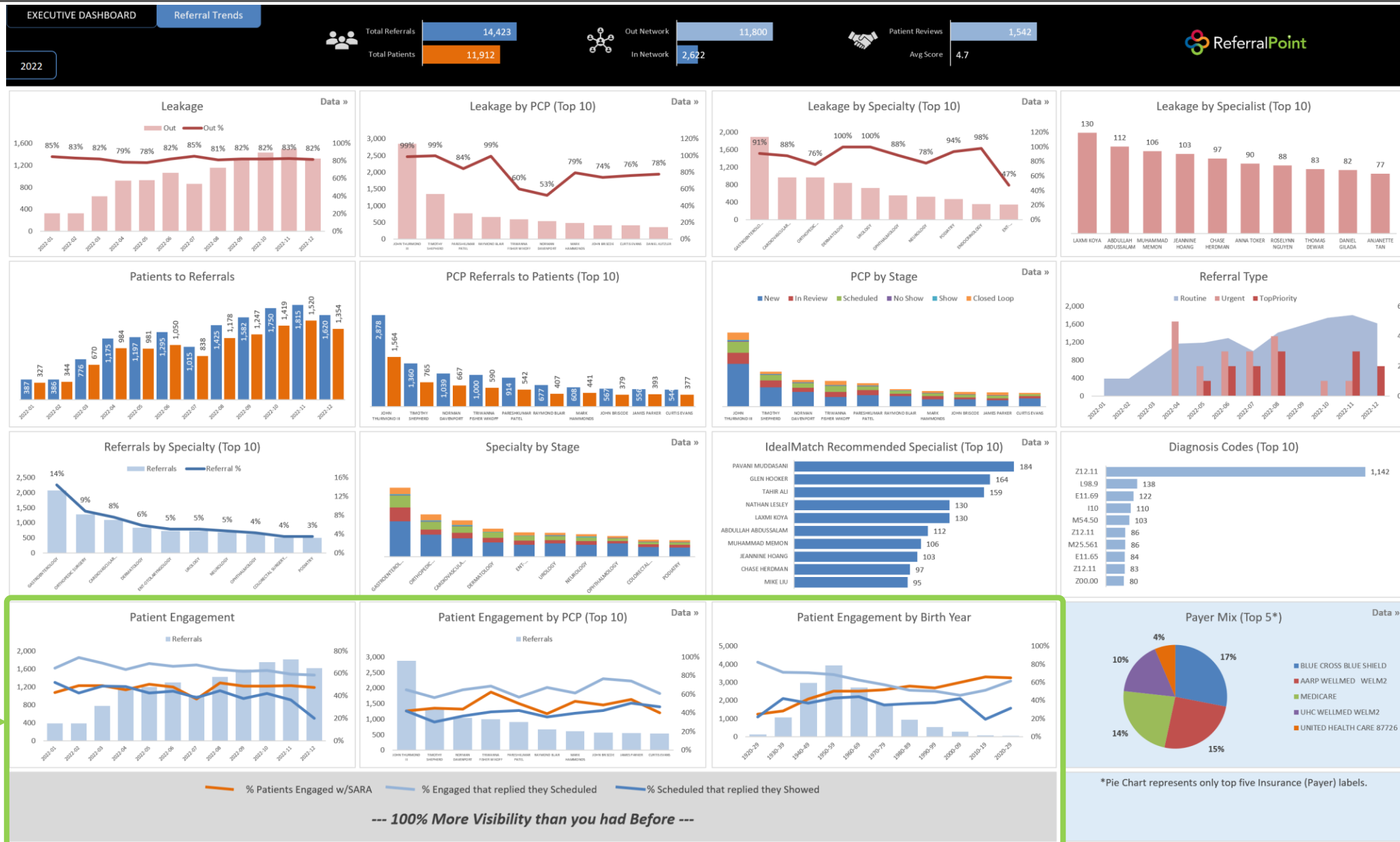
Filters you want:

- ✓ By Clinic
- ✓ By Referral Type (Routine, Direct, Urgent)
- ✓ By Referral Order Type
- ✓ By RCC (Auto assigned to attributed PCP)

Referral Trends month over month:

- ✓ # urgent referrals at a specific clinic?
- ✓ # auths submitted by RCC each mo?
- ✓ # referrals scheduled but not close?
- ✓ # urgent referrals per RCC/month?
- ✓ How far behind in processing referrals?
- ✓ Status by clinic, provider, or RCC?
- ✓ Patient make their appt? Show %?

+ any individual report you want!





- Harris, Robert
- Administration
- Analytics
- Dashboard
- Care Management
- Referrals**
- Tasking
- Resource Center
- GPRO
- Reports
- Performance

- REFERRALS**
- NETWORK BUILDER
 - Match Criteria
 - Build Network
 - Provider Network
 - Facility Network
 - ORG Rank Providers
 - PCP Rank Providers
 - Specialty Mapping
 - Insurance Management
- REFERRAL COORDINATOR
 - Patient Search IdealMATCH
 - Referral Tracking
 - Fax Management
- REPORT CARD
 - Report Card Criteria
 - Org Report Card**
 - Providers Report Card
- NETWORK VISIBILITY
 - Leakage by Specialty
 - Leakage by Contract
 - Leakage by Facility
 - Leakage by PCP
 - Leakage by Procedure Group
 - Professional Claims Analysis

Org Report Card Summary

Selected BU: Gammidge HealthCare Partners

▶ Drill down by BU, Clinic, or Provider

	ACTUAL	POOR	YOUR SCORE	GOAL	SCORE
Referrals SENT	105	50		200	37
In Network %	4.1%	40%		90%	0
Refer by Patient %	88.4%	40%		90%	97
Refer by Staff %	4.4%	40%		90%	0
Avg Days until Appt gets Scheduled	1.1	5		1	98
Scheduled by Patient %	20.2%	40%		90%	0
Scheduled by Staff %	83.3%	40%		90%	87
Avg Days to Appt Date	0.4	30		5	100
Scheduled by Patient Show %	53.8%	40%		90%	28
Scheduled by Staff Show %	7.1%	40%		90%	0
Avg Patient Experience (1 to 5 Stars)	3.8	1		5	70
Closed Loop with Patient %	93.8%	40%		90%	100
Closed Loop with Recipient %	93.8%	40%		90%	100
Cost (1 - 5 Ratings)	0.4	5		1	100
Quality (1 - 5 Ratings)	4.5	1		5	88

Measure each step for each PCP and Specialist so you can finally know how well they are performing against their peers.

- Referral
- REFERRALS
- NETWORK BUILDER
- Match Criteria
- Build Network
- Provider Network
- Facility Network
- ORG Rank Providers
- PCP Rank Providers
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- Leakage by Facility
- Leakage by PCP
- Leakage by Procedure Group
- Professional Claims Analysis

INITIATOR'S

Providers Report Card

Network: NPI: Start Date: End Date:

Filter Rows

NPI	Last Name	First Name	Overall Score	In Network %	Refer by Patient %	Refer by Staff %	Avg. days to Schedule	Scheduled by Patient %	Scheduled by Staff %	Avg. days to Appt	Patient Scheduled Show %	Staff Scheduled Show %	Patient Experience (1 - 5 Stars)	Closed Loop - Patient	Closed Loop - Recipient	Recipient - Cost (1 - 5 Rating)	Rec
1497917868	PHELPS	KRISTYN	70	33.3%	66.7%	33.3%	0	100%	100%	0	0%	100%	4	100%	100%	0.7	5
1033370820	YEHUDA	SARI	58	3.2%	96.8%	3.2%	0	30%	100%	0	66.7%	0%	4.2	100%	100%	0.2	4.3
1295167807	MANN	MAYA	51	0%	100%	0%	1	53.8%	0%	1.2	85.7%	0%	3	83.3%	83.3%	0.9	5
1376349576	WEINSTEIN	MARK	40	100%	100%	0%	0	100%	0%	0	0%	0%	0	0%	0%	0	0
1063461283	BARILE	DAVID	24	0%	100%	0%	0	0%	0%	0	0%	0%	0	0%	0%	0	0
1528268554	SAHOQ	APARNA	24	0%	100%	0%	0	20%	0%	0	0%	0%	0	0%	0%	1	5
1235111337	NAGY	AUBRIE	16	25%	100%	0%	43	25%	0%	0	0%	0%	0	0%	0%	0	4

RECIPIENT'S

Providers Report Card

Network: NPI: Start Date: End Date:

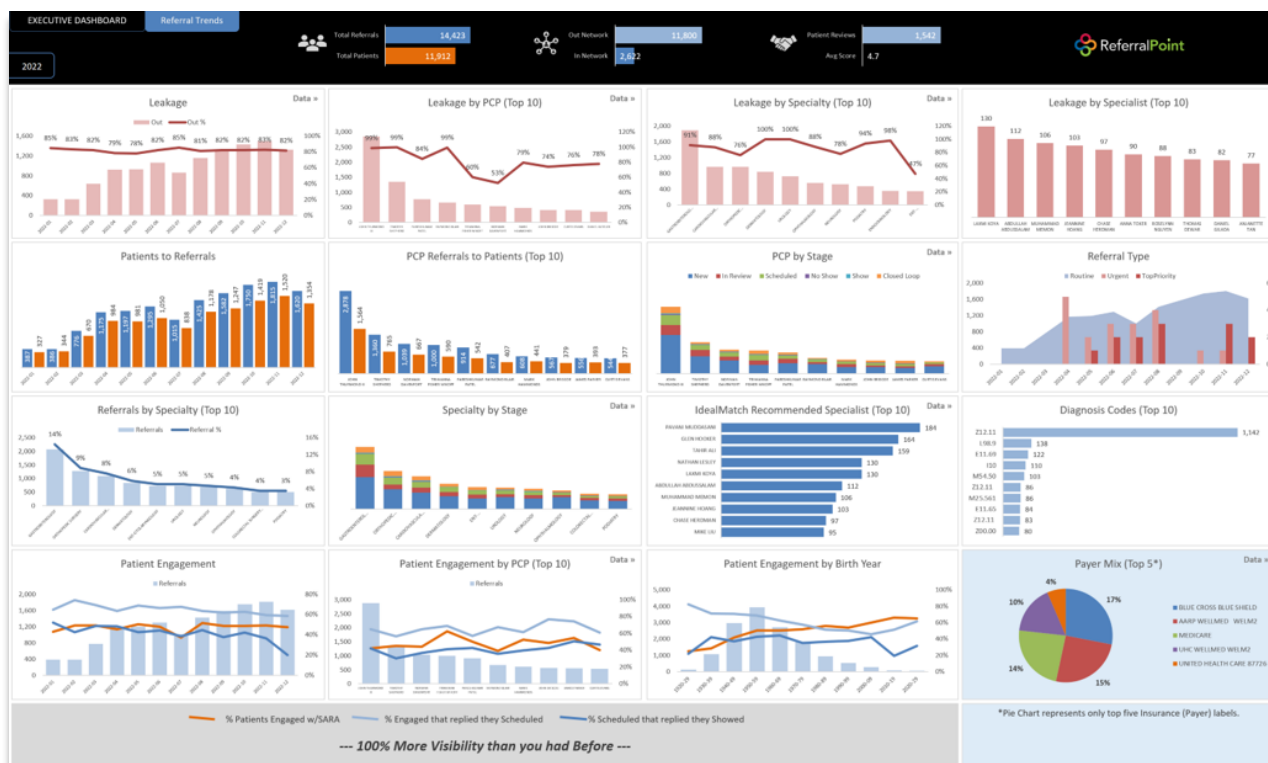
Filter Rows

NPI	Last Name	First Name	Overall Score	Refer by Patient %	Refer by Staff %	Avg. days to Schedule	Scheduled by Patient %	Scheduled by Staff %	Avg. days to Appt	Patient Scheduled Show %	Staff Scheduled Show %	Patient Experience (1 - 5 Stars)	Closed Loop - Patient	Closed Loop - Recipient
1770550931	GARCIA	JONAS	72	66.7%	33.3%	0	100%	100%	12	100%	100%	3.7	100%	33.3%
1154588242	OLSTEIN	RICHARD	67	100%	0%	0	100%	0%	8	100%	0%	3	100%	100%
1063651156	MALIK	AMYN	55	66.7%	33.3%	0	100%	100%	21.7	50%	0%	5	100%	0%
1265490296	LEE	KARLA	53	100%	0%	1	83.3%	0%	69.8	60%	100%	4.3	75%	0%
1467407197	GRAY	WILLIAM	52	100%	0%	0	50%	0%	9.5	100%	0%	4	100%	0%
1730137522	SLIFE	DAVID	51	100%	0%	0	100%	0%	14	100%	0%	1	100%	0%
1023344199	PHAM	DAVID	50	100%	0%	0	100%	0%	94.5	100%	0%	3	100%	0%
1356334031	KHAN	MUHAMMAD	45	83.3%	16.7%	7	40%	100%	25.7	100%	0%	4.5	100%	0%
1194769133	RINKENBERGER	ROBERT	18	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%
1588806749	DICKSON	MATTHEW	18	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%
1801864061	ALFONSO	CARLOS	18	0%	0%	0	0%	0%	0	0%	0%	0	0%	0%



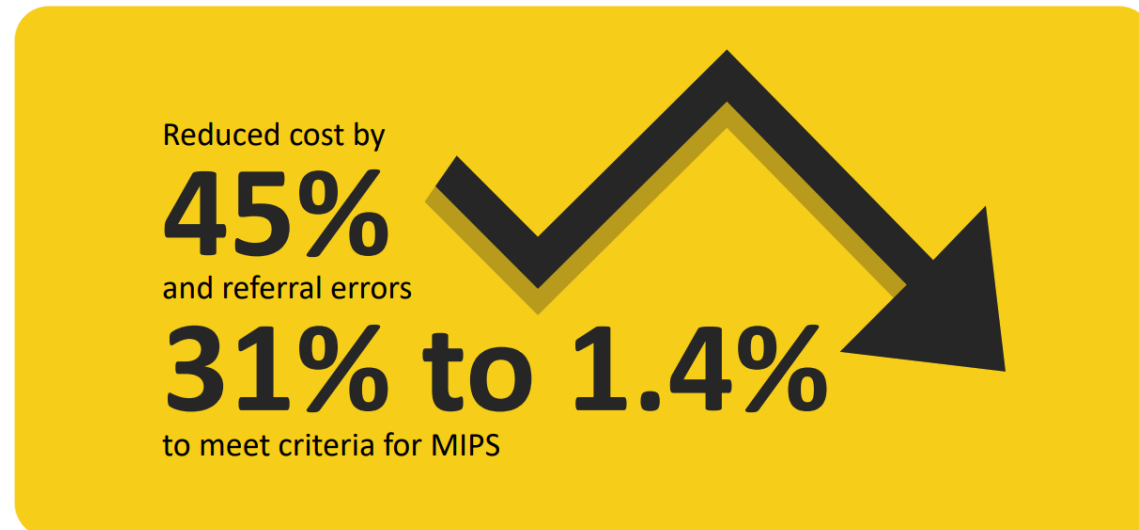
INCREASED VISIBILITY & ACCOUNTABILITY

- ✓ **100%** increase in visibility for each step of the patient's referral journey, whether scheduled by staff or patient
- ✓ Automated tracking from the time the referral is ordered through closing the loop, regardless of EHR
- ✓ Ability to compare PCPs' performance, including referred-to avg cost and quality score and in-network %
- ✓ Ability to compare specialists' performance, including time to appt, show %, closed loop %, and patient experience



REDUCED STAFFING CHALLENGES & COST

- ✓ Created Outsourced Referral Desk then trained PCPs staff
- ✓ Reduced time to close referrals and auths from **7 to 2 days**
- ✓ Saving **1,167 hrs/mo** allowing staff to focus on patient care
- ✓ Reduced referral errors from **31% to 1.4%** to meet criteria for MIPS
- ✓ Lowered cost to process referrals by **45%** compared to using Privia Staff
- ✓ Currently processing **3,500+ referrals/mo** and increasing monthly



5

**What Results
do you want?**

Reduced Referral Cost by 45% & Staffing Challenges

Larry Tatum, MD
CEO: Privia NT
Treasurer: AMGA



"ReferralPoint has helped identify gaps and improved our referral processes using data and automation which has continued to improve our clinical and financial outcomes."

- ✓ RP provided **cost/quality data** (we couldn't get) to build our Specialist Network
- ✓ Then **integrated IdealMATCH right into our EHR** making it quick and easy
- ✓ **90%** routine referrals now scheduled by patient via SARA, automated referral assistant
- ✓ Leakage reports identified minimum **\$4M/yr. rev opportunity** (\$178 Office Visit)
- ✓ Identified missed opportunities to refer to Specialist in same Zip Code
- ✓ We now outsource **3500+ referrals/mo** to ReferralPoint's Referral Desk
 - + Reduced referral errors from **31%+** to **1.4%** to meet criteria for MIPS (VBC)
 - + Reduced time to close referrals/auths from **7 days down to 2 days**
 - + **Saving 1,167 hrs/mo** ...so staff can focus on taking care of patients
 - + **Lowered cost** to process referrals **by 45%** ...vs our staff (**March saved \$13,164**)

How Privia NT Reduced Referral Costs by 45% and Improved ACO + MIPS Outcomes

Privia Medical Group (North Texas), a 370-provider multi-specialty group, is dedicated to prioritizing quality patient care and is successfully serving 45,000+ attributed patients through its ACO. In 2019, Privia NT generated nearly **\$3 million** in shared savings through its MSSP. While exploring how best to serve its patients and reduce costs through ongoing improvement, the group uncovered uniformity issues in referral processes and a lack of data and automation across multiple offices.

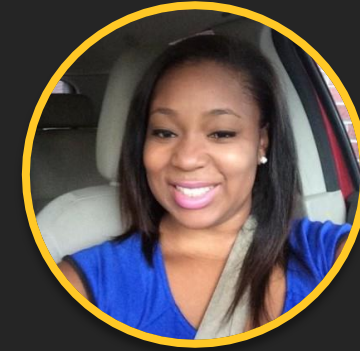
Implementing ReferralPoint's cost/quality data insights and automation has allowed Privia NT to build their preferred specialist network, identify revenue opportunities and streamline their process. Outsourcing 3,500 referrals per month to ReferralPoint has helped alleviate the burden on their staff, reducing cost by 45%, errors by 95%, and time to close the referral loop by 5 days. To see the before and after, we've outlined the challenges, solution, and results.

<p>Larry Tatum, MD CEO: Privia NT Treasurer: AMGA</p>	<p>Identified \$4.8M Revenue Opp/yr. Processing 3,500+ referrals/mo Reduced referrals 7 to 2 days</p>	<p>Saving staff 1,167 hrs/mo Lowered referral cost by 45% Reduced errors 31% to 1.4%</p>
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"ReferralPoint has helped identify gaps and improved our referral processes using data and automation which has continued to improve our clinical and financial outcomes."

[Click above to review Case Study](#)

Reduced Time Per Referral by 50% & Identified High-Cost Specialist Savings



Krystal Keys
Operations Mgr.
75 Referral Coordinators

- ✓ Built our Preferred Network within ReferralPoint
- ✓ Then integrated IdealMATCH right into our Athena EHR
- ✓ Reduced time per referral by 50%.
- ✓ Reduced from referral order to completion by 2 days
- ✓ Reduced from referral order to close loop by 7 days
- ✓ SARA...the automated patient engagement/reporting increased patient visibility by 100%
- ✓ Reports identified High-Cost Specialist Saving Opp \$31M in just one Market

Reduced Leakage **75%** + Unnecessary Costs **10%**



Tom McCarrick, MD
Chief Medical Officer

- ✓ What I like most is getting **100% more control over our referrals.**
- ✓ Before, we didn't know our **out of network %** but now that we can track/control it, we've seen it drop from **33%** down to **5.5%**.
- ✓ The Auto Referral Coordinator **helps us schedule, saves admin time, reduces no shows, and increases patient experience.**

 **ReferralPoint**

CASE STUDY

New Jersey Medical Group

Reduced Leakage 75% & Unnecessary Costs 10% with a Data-Driven, Closed Loop Referral Solution


10 Locations
52 Providers
50,000 Patients

Problem:

- No Control of Referrals
- Out of Network Leakage
- Open Referral Loops
- No Visibility into Provider Performance

Solution:

- IntelligentDATA™
- NetworkBUILDER™
- IdealMATCH™
- AutoCLOSELOOP™

Outcomes:

- Reduced Medicare Part B & Commercial Costs 10%
- Reduced Leakage from 33% down to 8%
- Increased Outbound Referral Visibility 100%
- Increased Patient Engagement 6x


Thomas McCarrick, MD
Chief Medical Officer

*"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 high-quality specialist."

[Click to Review Case Study](#)

6

What are
your **Next Steps?**

Which Capabilities would help achieve your Vision?

Intelligent
DATA

IDENTIFY – Problems & Opportunities

Using your Claims & 3rd Party Data to capture Provider Cost & Quality and see your leakage, referral trends, and savings opportunities

**IDENTIFY
REVENUE & SAVINGS**

Network
MANAGEMENT™

CUSTOMIZE - Provider/Facility Scores

to build preferred networks and the IdealMATCH algorithm based on 7 Data Essentials...network, quality, cost, qualified, access, loyalty, and patient experience

**REDUCE
LEAKAGE & COST**

Ideal
MATCH™

AUTOMATED - IdealMATCH Integrated Software

to help providers staff get out of spreadsheets and save time by making data driven decisions in **just seconds** to in-network, highest quality, lowest cost Specialist & Facilities

**CONTROL
LEAKAGE & COST**

AutoReferral
COORDINATOR™

AUTOMATED - PriorAuth + Schedule + Close Loop

with our API to payer sites to get PriorAuth approvals, automate patient scheduling, and automate closing the loop with the patient and provider regardless of EHR

**IMPROVE
STAFF EFFICIENCY**

Enterprise
VISIBILITY

MEASURABLE - Performance

scorecards to rank and compare PCPs and Specialist AND Measure each step from referral order to closed loop to capture lost revenue and shared savings

**INCREASE
QUALITY/REVENUE**

How do we help achieve your Vision?

Since we can't measure it, We can't FIX IT.



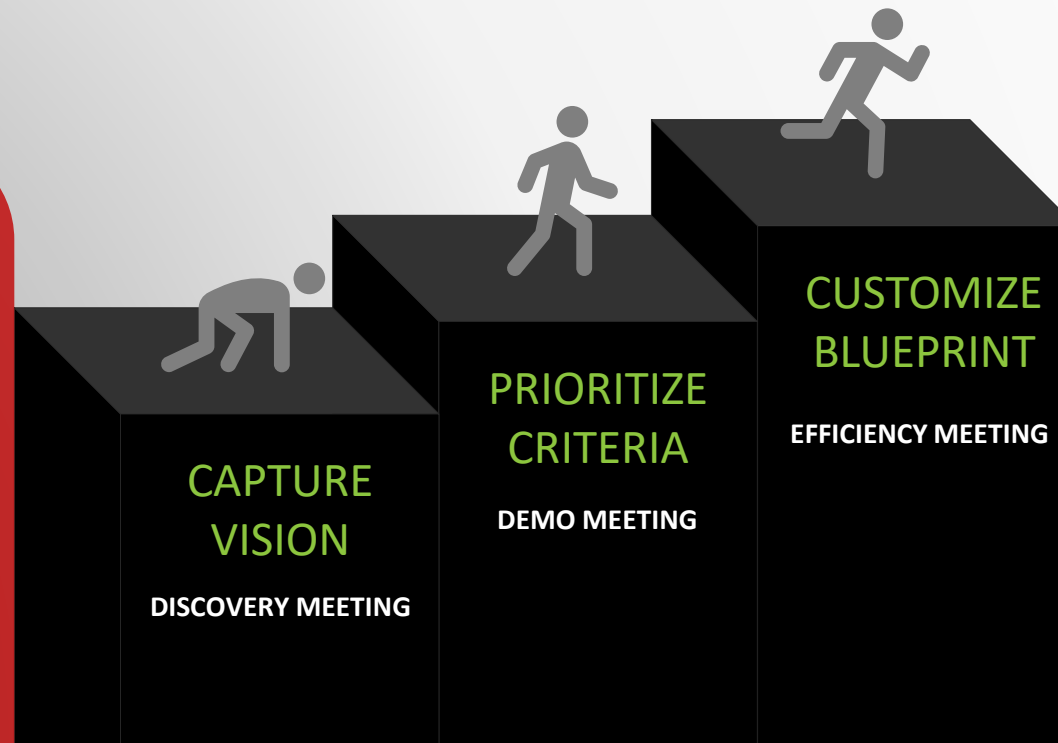
The **Point** is to get from where you **ARE** to where you want to **BE**

Since we can measure and optimize each step, we're getting MEASURABLE RESULTS!



BEFORE

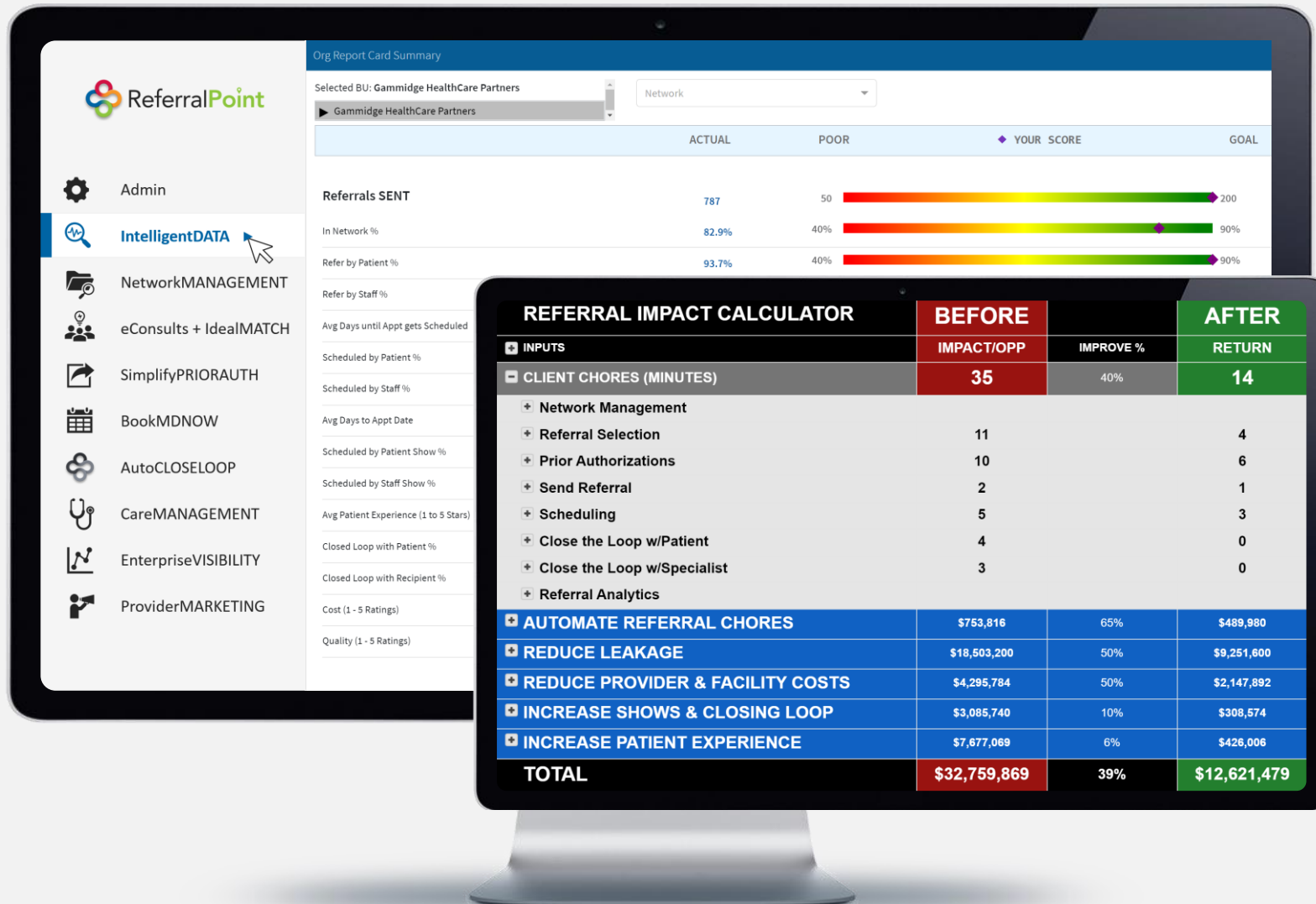
1. No visibility where we ARE
2. No control of Leakage
3. No control costs/quality
4. To many manual chores
5. Overwhelmed providers/staff
6. Low patient experience
7. Low close-loop. Not Accountable



AFTER

1. 360* visibility where we ARE
2. Reduced leakage > Inc Rev _____%
3. Reduced cost > Inc Savings _____%
4. Increased productivity _____%
5. Reduced staff cost _____%
6. Increased patient sat _____%
7. Increased close loop _____%

We'll build your Custom BLUEPRINT



1 Get VISIBILITY
into the impact of each step of your referral process.

2 Get ACTION PLAN
to improve efficiency, cost, quality, and revenue.

3 Get IT NOW
Whether you move forward or not, at least you'll have a Blueprint to show your execs.

Email Kari Anne at blueprint@referralpoint.com

Q&A

Stop by our VBCExhibitHall.com Virtual Booth



[Visit the ReferralPoint exhibit booth](#)

Contact Us

blueprint@referralpoint.com

gschmitt@TheExhibitHalls.com