Specialty Referral. Reimagined.

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Health Plan Case Study

Primary care physician (PCP) referrals to specialists are particularly critical for the Medicare and Medicaid population. When up to 50% of PCP appointments lead to a referral - the impact of failures in the process directly leads to poor clinical outcomes and unnecessary emergency department (ED) and inpatient hospital (IP) stays.

Challenges

The ability to coordinate referrals across a disparate provider network has many challenges:

- Long delays between the order of a referral and the actual appointment
- Identifying the appropriate provider to receive the referral
- Inefficient appointment coordination and scheduling
- The inability to track the timeliness of the appointment, completion rates and results in real-time

These challenges create many barriers for members and as a result, many members simply do not follow through on these referrals - correlating to lower clinical outcomes and increased medical cost. In both fee-for-service and value-based models, such outcomes can have severe consequences.

Humana Inc., headquartered in Louisville, Ky., believes they can close the gap between people and the care they deserve by focusing on simplifying the consumer experience and reducing complexity in the health care system.

- $54.2 billion revenue
- 2.5 million members
- 45,500 providers

Humana.

"MyHealthDirect allows us to work very closely with our provider groups, while at the same time improving their performance for the benefit of our members."
– Dr. Roy Beveridge, CMO

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Solution

To address these challenges, Humana, a national payer with over a million Medicare Advantage lives, partnered with MyHealthDirect to pilot a digitally connected network across its employed primary care physician (PCP) offices and the corresponding affiliated specialist network. With this connected network, referral coordinators from PCP offices can search and instantly book an appointment for their members without having to make a single phone call. In real time, administrators can track members through the care continuum, gain insight into lead time metrics and make key clinical and business decisions.

The digital network has been deployed in two markets across several specialties including neurology, cardiology, gastroenterology, pulmonology, rheumatology, general surgery, and more. In total, 200+ referral coordinators now have access to over 150 specialists to electronically search, book and track referrals for 37 primary care centers. In Q1 2016, over 2,000 referrals were managed.

19% INCREASE IN REFERRAL COMPLETION RATE	**50% DECREASE IN TIME TO MANAGE REFERRAL**
From 62.5% to 74.4%	From 20 min to 10 min
8.5 DAY DECREASE IN AVERAGE LEAD TIME	**26% FEWER EMERGENCY VISITS AND HOSPITAL-IZATIONS**
From 16.5 days to 8 days	

More members completed their ordered referrals faster through a digitally connected network.

Results

Compared to the prior quarter, the time to book a referral dropped from 20 to 10 minutes, referral lead times decreased by 8.5 days, and completion rates increased by 19%. For every incremental week between referral and specialty visit, the likelihood of an emergency room visit or hospitalization increases by 1.12%. Thus, an 8.5 day reduction in lead time translates to 26% fewer emergency room visits and hospitalizations, reducing overall medical costs.

Summary

MyHealthDirect has been directed to expand this program into additional markets. The improved access to specialty care has reduced the number of emergency room visits and hospitalizations while improving the overall efficiency of the referral process. Real time analytics provide greater visibility into care delivery. Key performance indicators put power in the hands of stakeholders to make timely decisions. Data collected in the referral process can be used for reporting, predictive modeling and identifying trends to drive behavior change.

"This is a tool in an emerging science. To me, it is an emerging best practice."

- DR. YOGI HERNANDEZ
VP & CMO, INTEGRATED CARE
DELIVERY

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