

Proven Performance: End-to-End Care Access Programs for Maximizing ROI, Enhancing Member Experience and Improving Healthcare Outcomes

Health plans need more than just member engagement—they need a comprehensive solution that gives members a way to take action.

Breaking down barriers isn't just about sending messages; it's about completing the action and creating positive experiences, scheduling appointments, completing Health Risk Assessments (HRAs), and engaging members in conversations to ensure they fully understand and utilize their health plan benefits and incentives.

Here's how ReferWell's Care Access programs can be effectively organized and integrated throughout the year

By leveraging an innovative care access scheduling platform and empathetic Care Navigators to proactively reach out and schedule care, health plans can seamlessly integrate targeted programs for healthcare management, member engagement, and provider support.

1. Engaging & Retaining New Members (January - February)

- **Recommended Activities:** Welcome new members, schedule initial wellness visits, enhance access and utilization of plan resources.
- **Desired Goals:** Improve the new member experience, establish primary care relationships, prevent plan-jumping.
- **Proactive Integration:** Set the foundation for personalized care plans, introduce HRAs.

2. Health Risk Assessments (January - September)

- **Recommended Activities:** Conduct HRAs to identify high-risk members, collect detailed health information.
- **Desired Goals:** Early identification of health risks, developing personalized care plans, and improved long-term health outcomes.
- **Proactive Integration:** Use HRA data to inform referral management and personalized outreach.



DID YOU KNOW

High-Quality Member Experience:

- Correlates with adherence to medical advice.
- Leads to better clinical results and health outcomes.
- Improves chronic disease management.
- Boosts overall member satisfaction.

3. Closing Care Gaps (March - October)

- **Recommended Activities:** Target gaps identified in HRAs, schedule necessary screenings.
- **Desired Goals:** Improve HEDIS scores, boost Star ratings, enhance state-level quality scores.
- **Proactive Integration:** Coordinate with referral management to ensure members receive appropriate care.

4. CAHPS Improvement (March - December)

- **Recommended Activities:** Conduct regular member satisfaction surveys, provide empathetic customer service.
- **Desired Goals:** Enhance member experience, improve CAHPS scores, drive engagement.
- **Proactive Integration:** Inform and adjust engagement strategies based on member.

5. Referral Management & Provider Support (Year Round)

- **Recommended Activities:** Provide tools and resources to low-performing providers, improve care coordination.
- **Desired Goals:** Increase provider satisfaction, enhance member show rates, ensure timely care delivery.
- **Proactive Integration:** Support proactive health management and timely follow-ups from care gap activities.

6. Navigating Access to Care (Year Round)

- **Recommended Activities:** Improve access to PCPs,

specialists, mental health, and SDoH services, respond to test results.

- **Desired Goals:** Reduce health disparities, enhance care coordination, increase follow-through rates.
- **Proactive Integration:** Utilize insights from earlier engagements to address member needs comprehensively.

7. Improving Risk Adjustment Performance (Year Round)

- **Recommended Activities:** Schedule appropriate follow-up care, meet the Centers for Medicare & Medicaid (CMS) requirements.
- **Desired Goals:** Identify high-value targets, ensure accurate risk adjustment, maintain financial performance.
- **Proactive Integration:** Leverage data from HRAs, care gap closures, and referrals to prioritize high-risk members.

8. Chronic Condition Concierge & Over-the-Counter (OTC) Benefit Support (Year Round)

- **Recommended Activities:** Assist members in navigating chronic condition management, provide personalized OTC benefit recommendations, place OTC orders, and schedule necessary care.
- **Desired Goals:** Improve member health management, increase OTC benefit utilization, and reduce hospital readmissions.
- **Proactive Integration:** Utilize data from member interactions, care management programs, and pharmacy benefits to identify and prioritize members who need the most support.

Year-Round Care Access Programs That Drive Success Through Empathy & Understanding

ReferWell's systematic and compassionate approach addresses every phase of the member journey—from initial engagement and health assessments to closing care gaps and managing referrals. By combining a year-round strategy driven by empathetic Care Navigators, we deliver a claims-validated 241% ROI, enhance healthcare outcomes, and elevate the member experience.

- ✓ Drives 4-Star Ratings Achievement
- ✓ 242% ROI Closing Annual Wellness Visit Care Gaps
- ✓ 80-90% Reduction in Member Issues
- ✓ 88% Retention Rate for Members At-Risk
- ✓ High-Impact CAHPS® Program Execution
- ✓ 139% ROI Scheduling Annual Wellness Visit for Risk Adjustment
- ✓ Optimized Incentive & Over-the-Counter (OTC) Benefit Utilization
- ✓ Strategic Pre-AEP/Retention Initiatives

Learn More

To learn how ReferWell can help your health plan drive value by scheduling care and creating meaningful experiences that prompt member action, visit referwell.com/care-access-complete/.