

# Increasing Your Service Volume By Creating A Crisis Referral Development Plan

**The Coalition for Behavioral Health Business Recovery Initiative**

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# Agenda

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1. The Framework For A Crisis Referral Development Plan
2. Referral Source Education: Reintroducing Your Programs & Services
3. Getting Your Message Out
4. Marketing & Outreach Activities
5. Assessing Payer Crisis Needs

# Significant Decrease In Referrals Because Of The Pandemic

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Shelter in place orders have forced traditional referral agencies to close, reduce services, and move employees to remote work settings unable to provide onsite assessment of consumers for referrals

- Schools
- Colleges and universities
- Outpatient primary care / medical groups
- Social service agencies
- Autism and I/DD services
- Field based health plan care managers

Social distancing practices have limited contacts in many traditional referral source settings, reducing consumer engagement and the ability to generate referrals

- Reduction of hospital discharge planners – temporary halting of non-essential medical treatment
- Probation departments – adult and juvenile justice programs
- Police gang, drug and community outreach and prevention programs
- In home services – crisis services, case management
- Long-term care



# 1. The Framework For A Crisis Referral Development Plan

## Reviving The Flow Of Referrals

Consumer referrals are the lifeblood of organizational revenue. Any disruption of referrals can be devastating to financial health and sustainability.

Crisis referral development planning:

- Is essential to re-stimulating your organization's referral flow and volume that may have been impacted by the COVID-19 pandemic.
- Will update and inform your organization's marketing/business development plan for the recovery period following the crisis.
- May lead to new strategies for repositioning in this rapidly evolving market.

## A Crisis Referral Development Plan: The Framework

1. Referral source education
2. Getting your message out
3. Marketing and outreach activities



## 2. Referral Source Education: Reintroducing Your Programs & Services

## Before You Start...

- Reassess your referral development plan targets and goals for driving referrals to your programs and services.
- Identify new payer and referral agency challenges to getting referrals and develop customer-friendly solutions to remove obstacles.



## Referral Source Education

- Referral source education is essential to reintroduce your programs, services, and enhanced referral processes to key referral agencies in your referral network.
- Referral sources will need to know that your organization is still operating and open for business.
- Proactive outreach and education will give you a competitive head start in recapturing market share that lost during the pandemic.

# Inform Your Referral Sources About Any Changes In Operations

- Your programs and services may no longer be available or have limited capacity.
- Some treatment sites may no longer be open as employees work from home.
- Ability to conduct face to face client assessments may be limited or curtailed.
- Business hours may have changed due to limited office space, parking restrictions, and need to stagger consumer appointments for social distancing.
- Newly implemented health and safety screenings may have added additional steps in your referral process.

**Referral sources will need to be informed about changes, so they are comfortable making referrals.**

# Reassure Your Referral Sources That It's Safe To Refer Consumers

Referring agencies now have the added burden of reassuring consumers, families and professionals that treatment or placement sites they are referring to have adequate health and safety procedures in place.

Provider organizations will need to:

- Reassure referring agencies that your treatment sites are safe.
- Educate key contacts in your referral network on “how to make a referral” to your organization with COVID-19 changes in your intake and admission guidelines.
- Provide information about new health and safety screening procedures so referral sources and clients know what to expect. Examples:
  - Client temperatures may be taken at time admission or visits
  - Health screenings may be conducted by a medical professional
  - PPE is worn onsite

## Why You Need Electronic Communications — Now Is The Time To Invest In Your Web Site & Social Media

- Field-based marketing and one-on-one contact has been limited or eliminated with the closure of schools, outpatient treatment, primary care settings, etc.
- Referral sources—both payers and community agencies—need to know you are open for business and accepting new consumers.
- Rapidly changing market and rules require frequent contact.

## Electronic Brochures

- Detailed information about your organization, programs and services
- Commonly used by hospital discharge planners, schools and colleges, payer care managers, primary care/medical groups
- Information can include:
  1. Detailed program/service descriptions
  2. New protocols for client visits in inpatient/residential settings
  3. Business hours
  4. How to make a referral
  5. Contact info—name, phone, web, email

## Electronic Flyers

- Quick and easy way get your message about your organization's current status
- Update and resend every 30 days
- Referral sources can easily share these flyers with consumers and stakeholders.
- Information can include:
  1. Current programs and services
  2. New pandemic safety precautions
  3. Business hours
  4. How to make a referral
  5. Contact info—name, phone, web, email

## Update Your Website

Referral sources, payers, and consumers rely on your organization's website when looking for programs and services.

- Direct referrals: Enable direct health plan referrals and consumer self-referrals
- Appointment scheduling: Give consumers easy and quick access to appointments
- Online portals: Enable digital pre-screening and form completion to accommodate social distancing
- Information and engagement: Share innovations, outcomes, and success stories
- New pandemic health procedures: Give consumers confidence in your facility's safety

## Engage On Social Media

- Engage on the channels where your target audiences are—LinkedIn, Facebook, Instagram, TikTok, Twitter, Google+, YouTube, Glassdoor; start with one or two and build up.
- Ensure your critical information is just a click away.
- Encourage comments and shares; find ambassadors among staff and consumers to amplify your voice.
- Follow the 80/20 rule: At least 80% of your posts should be informational and of interest to your audience, no more than 20% should be promotional.





### 3. Getting Your Message Out

## What Is the Message & Who Needs To Get It

- Get your message out to referral sources about changes in your programs, services, and intake processes is important to restarting referral flow.
- Message to reestablish your organization as a credible, innovative and high-quality provider organization that is open for business.
- Update marketing materials to provide important organization, program and service line updates with emphasis on new program capabilities, service delivery innovations, and health and safety precautions.
- Revisit strategic relationships (past and present), identify new key contacts, and explore new opportunities for contract and service line expansion.



## 4. Marketing & Outreach Activities

## Marketing Outreach Basics

Objective: Make the phone ring!

- Identify and prioritize referral source agencies for marketing outreach
- Conduct a referral source outreach and education campaign
- Distribute updated electronic marketing information
- Reestablish formal referral pathways
- Build strong one-on-one relationships through routine communication and follow up.
- Implement new methods for making referrals

# What Are Referral Agencies Looking For?

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Referral sources will make referrals based on how easy it is to get consumers scheduled, assessed and into treatment. They are looking for:

- Digital communications
- Comprehensive program information on the website
- Knowledge of what programs and services are open
- Availability of virtual screening and assessment
- Virtual tours of your programs
- Online scheduling for appointments
- Online portals for making referrals

## Reinventing Customer Service

- Customer service may not have been a priority while you dealt with crisis management.
- Many referral sources and consumers may have gone unserved during the pandemic.
- You need to develop new ways to make the referral process easy, customer-friendly, and accessible

***What does customer service look like in “the new pandemic era?”***

# Identify & Prioritize Referral Sources

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- Agencies, organizations, professionals your team has cultivated relationships with over the years.
- Referral sources in internal reports:
  - Intake and client admissions data reports
    - # referrals by payer and referral source per month
    - # types of clients
    - # of referrals made to your specialty treatment programs
  - Monthly marketing and sales reports with payer and referral source trends and volume

Remember—Phone, email, webinars, virtual tours and video conferencing will need to replace onsite meetings, presentations, lunches and cocktail hours.

# Conduct A Referral Source Education Campaign

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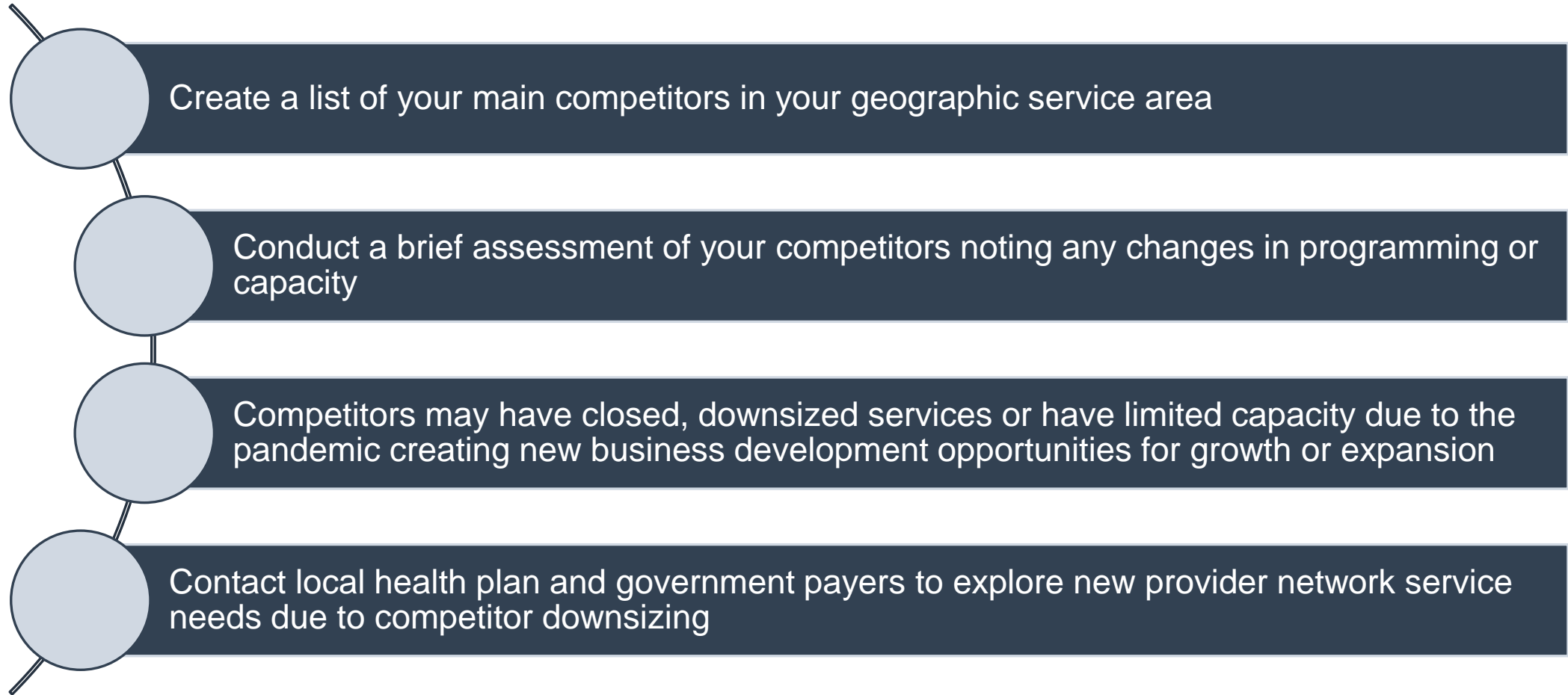
- Reintroduce your programs and services and reestablish referral relationships.
- Develop and email flyers to your top and current referral sources announcing availability of services.
- Send electronic brochures and a link to your website as follow up.
- Provide updated program information and instructions for making referrals and scheduling appointments.
- Identify new key contacts at referral source agencies as previous contacts may no longer be there.
- Find out what other services referral sources need and explore opportunities for new service line development and/or contract expansion.
- Identify a single point of contact at your organization to monitor referral activity and troubleshoot any issues in real time as referral agencies learn new protocols.

***Every referral counts as you rebuild trusted referral source relationships and program census.***



# Conduct A Brief Competitor Status Assessment

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## 5. Assessing Payer Crisis Needs

# Payer Opportunities

Payers have demonstrated interest in supporting provider organizations to keep payer networks intact and remain responsive to consumer need for services.

Conduct a payer crisis needs assessment to:

- Reestablish formal referral pathways
- Review relaxation in telehealth provisions
- Request contract rate increases
- Explore contract expansion opportunities

# Increased Acceptance Of Telehealth

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- The need for social distancing in the current pandemic era has forever changed consumer and professionals' attitudes toward telehealth.
- Consumers will increasingly look for virtual options based on convenience, cost, and effectiveness of care.
- Many believe that consumer adoption and payer support will continue in some form beyond the current crisis.
- Beacon Health Options reported:
  - 4477% increase in Telehealth claims and utilization since March 2020
  - 4400 number of providers who registered for two Beacon “Learn How to Use Telehealth” webinars
  - 51% of consumers in urban areas are evaluating virtual services, compared to 39% in suburban areas, and 26% in rural areas
  - 81% increase in calls from providers to Beacon Health Options' national provider line regarding Telehealth
  - 52% of Gen X consumers say they are evaluating virtual services, compared to 29% of Gen Z, 44% of Millennials, and 32% of Boomers

## Payer Concerns

- Closure or downsizing of contracted network provider organizations
- Limited consumer access to assessment and treatment
- Slow transition to telehealth and/or lack of resources to develop telehealth
- Increased utilization of more expensive higher levels of care (emergency, inpatient, etc) due to lack of access, disruption of treatment and case management for complex populations

# Identify & Prioritize Your Best Payers For Assessment

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- Prioritize payers to target for immediate outreach based on your organization's payer mix and revenue goals:
  - Payers with the best rates of reimbursement or fewest denials
  - Payers that refer a high volume of consumers to your programs and services
  - Payers with favorable authorized length of stay trends
- Crisis referral development strategies will vary depending on payer reimbursement models, populations served and market-specific service delivery requirements:
  - Commercial Health Plans
  - Managed Care Organizations
  - Managed Behavioral Health Organizations
  - Government Agencies (County/State)

# Conduct A Payer Crisis Needs Assessment

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- Reassure payers that you're staying open and services continue with limited disruption
- Share newly implemented health and safety precautions, revised policies and procedures, and staff positions (licensed health screening personnel) for consumer safety
- Provide an update on new service delivery platforms, i.e. Telehealth and other virtual consultation solutions you have developed
- Explore opportunities to expand your current contracted services:
  - Ask if there have been any provider organization closures, new service needs or populations to be served
- Propose an increase in contracted rates as increased employee wages, health and safety precautions, and expanded technology platforms have increased the cost of care. In a recent survey:
  - 20% of provider organizations have increased hourly staff reimbursement.
  - Provider organizations have reported hourly increases between \$1 and \$5 per hour and \$20 per day incentive payments.

# Payer Account Managers—Your Key Contacts

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Your payer account manager is best to lead the payer crisis needs assessment engagements and reset your organization's payer relationships

Account managers are:

- Part of the marketing/business development team
- Work with a dedicated group of payers and referral sources to help achieve payer goals and ensure customer satisfaction
- Add network value to your organization as the single point of contact with payer managers (contracts, provider network, care management, credentialing, provider relations, clinical services, etc)
- Responsible for payer customer service and development of contract



# Schedule Virtual Payer Marketing & Update Sessions

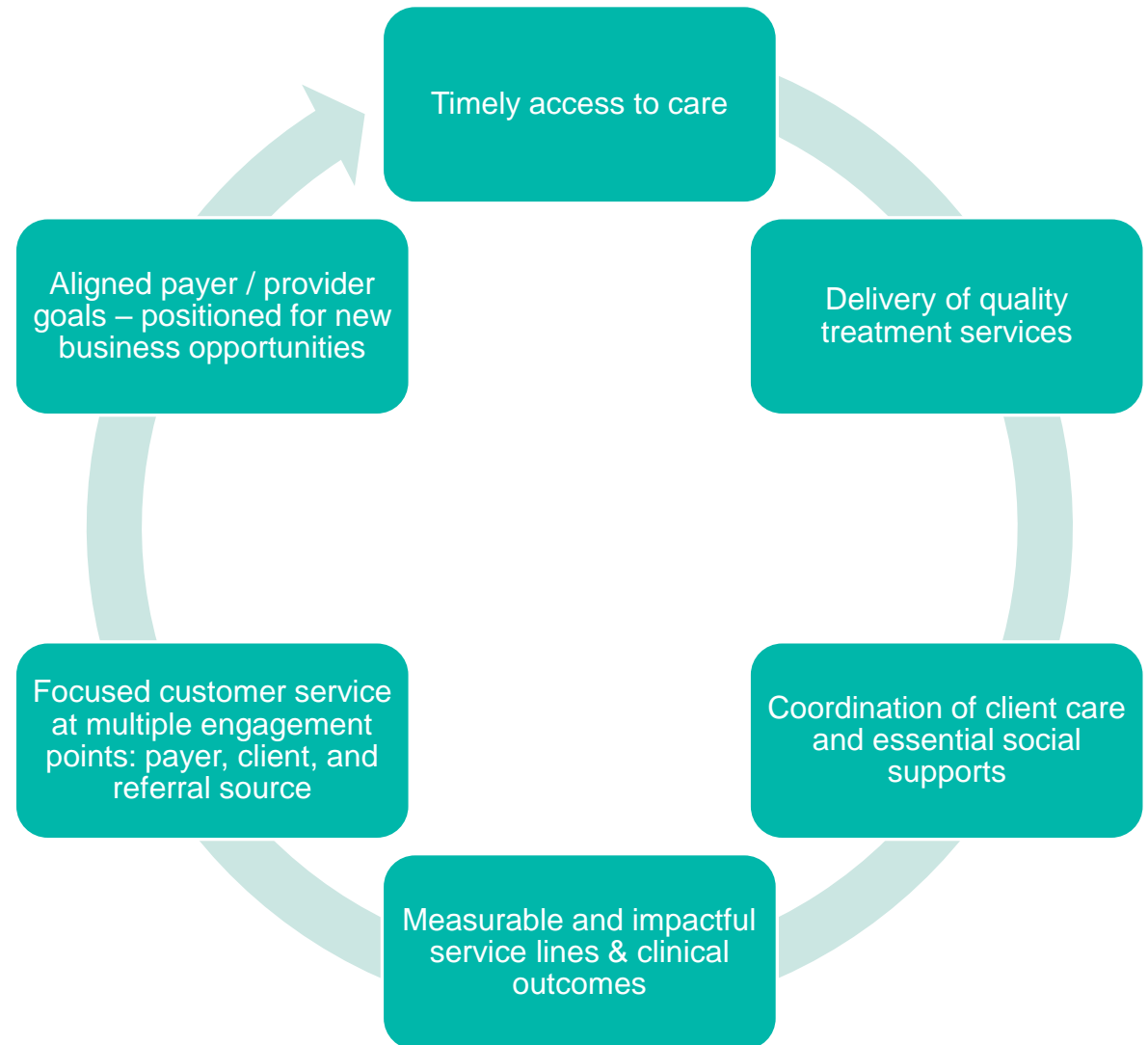
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- Immediately reestablish direct referral pathways with payer care managers and crisis call centers (health plan, MCO, MBHO) to increase referrals.
- Update payers on any changes to programs, populations served, intake/assessment protocols and new health and safety precautions for client safety.
- Schedule a virtual marketing update session (use Zoom or other popular platforms) with key payer personnel:
  - Call center staff
  - Office based care managers
  - Field based care managers
  - Payer account managers
- Follow up by sending electronic brochures they can pass on to other referral sources:
  - Large employers
  - Clients/members
  - Families/caregivers

# Leverage “Preferred Provider” Status With Payers To Increase Referrals, Market Share & Contract Expansion Opportunities

## Provider Network Value

A preferred provider organization is nimble and can adapt quickly to rapid changes in the market and offer new solutions to payers in response to new service needs



# Hillsides Payer Engagement Case Study I

- Hillsides - Los Angeles County based non profit childrens services provider organization:
  - Residential treatment services for children and youth
  - Outpatient mental services
- Payer mix diversification strategy for sustainability in the changing California managed care/VBR market
- Hillsides Goal:
  - Enter into the commercial health plan market
- Payer Need:
  - Reduced hospital readmissions of complex youth
- Payer Partnership Concept Statement:
  - Repacked core service lines
  - Proposed reduced inpatient hospitalization episodes for complex youth (HEDIS measure) to reduce payer cost
  - Demonstrate managed care/VR readiness
  - Ability to participate in alternative payment models (case rate)
- Direct Payer Referrals
- Commercial contract acquisitions include:
  - Beacon Health Options
  - Kaiser Permanente (VBR)
  - Cigna
  - Magellan



# Childrens Institute Payer Engagement

## Case Study II

- Childrens Institute - Los Angeles County based non profit childrens services provider organization:
  - Outpatient mental health services
  - In-community case management
  - Social services – children, youth and families
- Service line expansion / revenue diversification strategy development
- CII Goal:
  - Revenue diversification
- Payer Need:
  - Case management of complex adults/youth
- Payer Partnership Concept Statement:
  - Repacked core service lines
  - Demonstrate managed care/VR readiness
  - Ability to participate in alternative payment models (case rate)
- Direct Payer Referrals
- Contract acquisition include:
  - Blue Shield Medicaid Health Homes Program
  - Field Based Case Management – Primary Care and Mental Health



## Questions From Our Circle Members

1. If we currently do not have contracts with our local health plans, would you suggest we reach out and conduct a payer crisis needs assessment?
2. How does a provider organization become a “preferred provider” with health plans?
3. Do you think we need to create a marketing / business development department if we don't currently have one?
4. How important is it to have an account management role within our organization especially now when budgets are so tight? What's the value?

## More Resources

1. [You Operate Virtually, You Serve Virtually, But Are You Marketing Virtually?](#)
2. [Going 'Virtual' For Revenue Generation: Assuring Consumers & Referral Sources Can Find You](#)
3. [Assessing Your Organization To Increase Referrals & Optimize Revenue Sources](#)
4. [The Challenge Of Referral Generation In The New Paradigm Of Integrated Care](#)
5. [85 Referral Management Solutions Available In The Health & Human Service Field Offerings: An \*OPEN MINDS\* Analysis](#)
6. [An Expanded Referral Program – The Cigna Collaborative Care Model](#)
7. [How To Build Value-Based Payer Partnerships: An \*OPEN MINDS\* Executive Seminar On Best Practices In Marketing, Negotiating, & Contracting With Health Plans](#)

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