

A woman with dark hair in a ponytail, wearing blue scrubs, is smiling and talking on a white telephone. She is in a hospital room, with a bed and a computer monitor visible in the background. The background is a soft-focus blue and white.

Phreesia

Faster, better, smarter: Bringing your referrals process into the 21st century

September 15, 2022

2022 BEST IN KLAS
PATIENT INTAKE MANAGEMENT



AGENDA

- ✓ Introductions
- ✓ About Phreesia
- ✓ Transforming referrals management
- ✓ Q&A

TODAY'S SPEAKERS



Tabatha Lester

Communication Manager
Bluegrass Orthopaedics



Davis Meyer

Director, Patient Experience
Downtown Drs. Brown



Pamela Arbelaez

Manager, Client Success
Phreesia



Creating a **better, more engaging** healthcare experience



Who we are: Market-leading provider of intake solutions that transform the healthcare experience by engaging patients in their care

What we do: Enable healthcare provider organizations to optimize operational efficiency, improve profitability and enhance clinical care

How we do it: Software-as-a-Service (SaaS) platform with integrated payments to manage the patient intake process

PHR
LISTED
NYSE



HITRUST
CSF Certified



Disorganized referrals management can have a ripple effect across your organization:

Referrals from **many sources** without **centralization** causes

Inefficient use of staff time

Unscheduled referrals and schedule gaps can

Reduce profitability

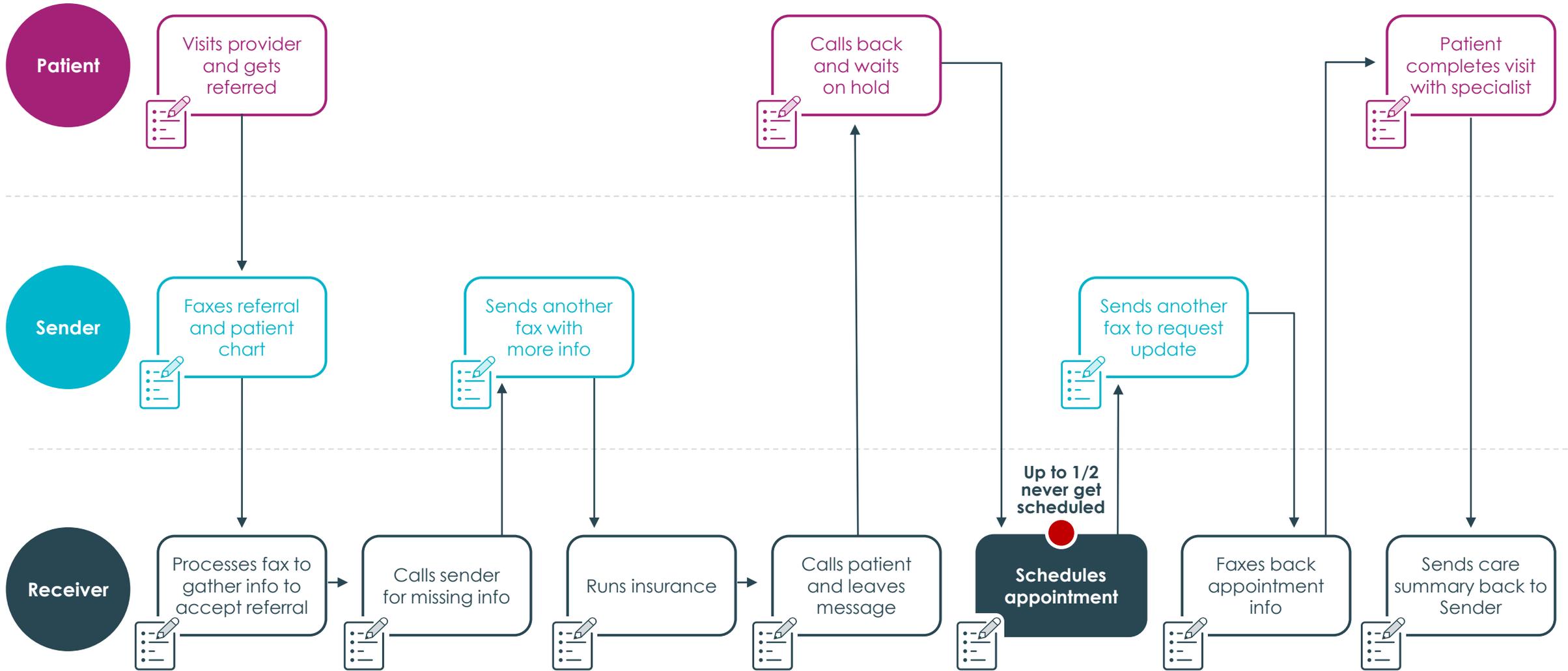
Missed or **unscheduled referrals** can lead to

Poor health outcomes

Missing data and documents can create

Delays in patient care

PROCESSING AND SCHEDULING A REFERRAL CAN BE A DIZZYING TASK



Up to **50%**
of referrals are never completed¹

On average, it costs

\$17

to process & schedule
a referral²

20%-30%

of diagnostic errors per year are caused by
breakdowns in the referral process³

What senders are telling us⁴



40% don't receive timely
post-visit care summaries



38% report overall poor
communication between
senders and receivers

¹ Weiner M, Perkins AJ, Callahan CM. Errors in completion of referrals among older urban adults in ambulatory care. J Eval Clin Pract. 2010;16(1):76-81. doi:10.1111/j.1365-2753.2008.01117.x

² Based on industry standards

³ Institute for Healthcare Improvement / National Patient Safety Foundation. Closing the Loop: A Guide to Safer Ambulatory Referrals in the EHR Era. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017.

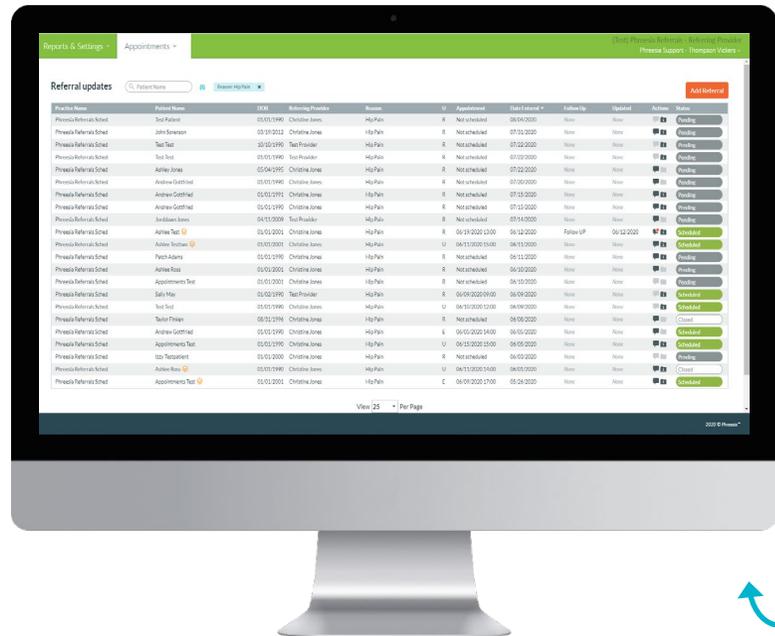
⁴ Phreesia Survey, 2020

GET ALL YOUR REFERRALS IN ONE PLACE TO ENSURE NO PATIENT FALLS THROUGH THE CRACKS



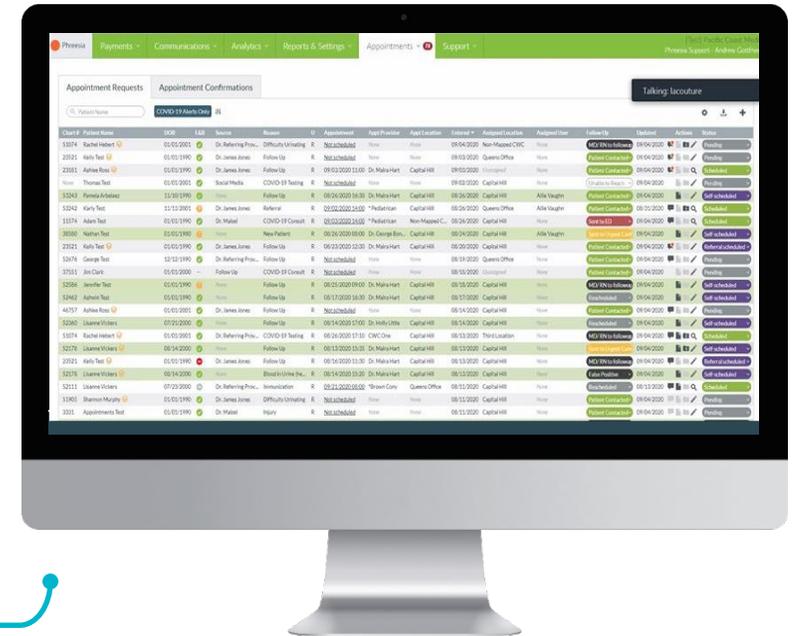
THE CONNECT NETWORK CLOSES THE LOOP ON REFERRALS

Sending providers use:



Referral sent (or direct scheduled)

Receiving providers use:



Real-time chat

Document attachment

Patient status updates

Electronic closed loop



Discussion

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THANK YOU

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