

Improve referral network integrity, outcomes, and satisfaction with personalized digital navigators.

Provider Challenges

Post-encounter referrals are a high-volume challenge for provider systems. Nearly half of healthcare organizations lose 10% of annual revenue to patient leakage.¹ Providers face increased competition from neighboring systems and new entrant retail giants to keep care in-network. Despite their critical nature, systems struggle to integrate referrals into clinical workflows. As a result, patients do not receive timely navigation or scheduling assistance.

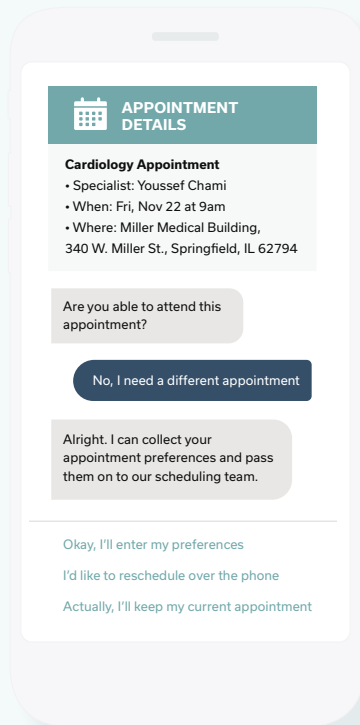
Digital Workforce Solution

Lifelink Systems' Referral Management solution guides every referred patient with post-discharge follow up and scheduling assistance via mobile conversations. Personalized digital navigators scale to support thousands of patients, and are highly configurable to specific care workflows. Providers benefit from improved referral adherence, reduced readmissions, and reduced operational overhead.

Solution Capabilities

- › ED to Primary Care or Specialists
- › Primary Care to Specialists
- › PCP Panel Reengagement
- › HIPAA-compliant mobile experience; no apps or passwords
- › Auto-fill and 1-click scheduling
- › Education and FAQs
- › Rapidly integrates with EMR, CRM, and scheduling systems
- › Real-time insights and analytics

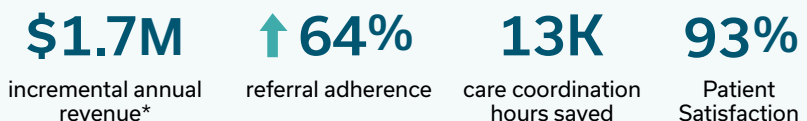
CASE STUDY



Scalable Impact

A Florida-based health system with 275K+ annual ED discharges across 10 sites faced 75% non-adherence for PCP referrals. Care coordination teams had no capacity to call each referred ED patient manually.

The system partnered with Lifelink Systems to increase in-network patient retention and streamline operations. The care coordination team reached nearly 80K discharged patients with the Cerner- and Salesforce-integrated solution. Patients engaged with personalized, conversational digital assistants on their mobile devices that reinforced the importance of referral follow-up, summarized care instructions, and coordinated appointment requests. Over 16% of patients scheduled physical or virtual PCP visits, increasing adherence by 64% from a 25% baseline. Staff spent less time on missed calls and data collection. ED and PCP providers benefited downstream from improved patient care continuity.



*Assumes annual gross spend of \$1,300/patient and 20% contribution margin. Value opportunity may vary depending on patient mix, fee structure, and volumes.