

Abstract

Referral Management Program in the

Retail Telehealth Clinic Setting

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Background and Purpose: Inefficient coordination of patients to referral services can exacerbate delays in care leading to diagnostic errors and increased healthcare costs. To address this, comprehensive referral management can connect patients to health services in a timely manner. Referral management in the retail telehealth setting is fragmented because of disjointed integration with health systems leading to missed opportunities to follow through with care. Implementation of a referral management program can improve patient safety and control costs.

Methods: This quality improvement pilot project used a pre-post intervention design with different groups to evaluate the Care Coordination Model referral management program on rates of referral appointments initiated, appointment completion, and referrals to in-network clinicians. The convenience sample evaluated referrals ordered in the retail telehealth care setting of a large health system.

Results: A total of 156 referrals were reviewed during the intervention period with 56 in the pre-intervention retrospective group and 102 in the intervention group. The number of referrals initiated improved, and the rates of in-network referrals significantly increased. No statistical significance was assessed in rates of referral completion between groups.

Conclusions: The intervention streamlined patient connection to services and significantly improved the number of appointments back to in-network clinicians. Referral management is an opportunity to improve timeliness to referred services and overall quality of care.

Implications: Clinical settings are incentivized to address referral management to improve patient safety and retain patients within the network. Although the evaluation of a referral management program is novel in the telehealth setting, the benefits are recognized in clinical health care to improve quality of care and cost savings.

Keywords: Referral Management Program, telehealth, health system, network, diagnostic error, delay in care, referral initiation, referral completion, in-network referral