

CHALLENGE

The healthcare provider was using fourteen siloed software systems to manage patient journeys across health screening and lifestyle coaching pathways. Heavy reliance on people and paper was impeding care coordination and resulting in a huge amount of unwanted variation. Operational processes like scheduling were also incredibly laborious, requiring 50 full-time administrators.

Coordinating virtual follow-up with patients was particularly challenging. This was limiting their ability to scale and to implement a new 'lifestyle coaching' service which would add considerable value to their clients. More generally, the provider also wanted to enable an easy way to create personalized treatment plans and a first-class digital patient experience.

About the provider

Our client is a leading multibillion-dollar healthcare provider, employing 84,000 people in 190 countries including the US, China, UK, and Australia. Lumeon is deployed in their corporate wellbeing and health assessment division, across more than 90 sites.



60%

increase in patient satisfaction

through automated, personalized digital wellness plans and context-driven portals



reduction in paper

through implementation of end-to-end digital processes



\$1.2m

savings within first year of depoyment

through consolidation of 14 disparate software systems and enhanced operational efficiency

SOLUTION

Lumeon worked with the client to identify best practice processes and map out the end-to-end patient journeys according to patient risk status, as well as payer and health package details. We then helped the provider to create workflows (or pathways as we call them) that include intelligent automation rules to help exchange information with patients, as well as pathway protocols to help coordinate care.

Our Care Pathway Management (CPM) platform consolidates clinical and administrative data, managing the patient journey from scheduling to follow-up and recall. Digital pathways guide staff across different teams throughout best-practice pathways.



From point of booking onwards, the provider has designed digital automation programs that make use of online forms and automated communications to gather information from patients, understand their goals and help them prepare for appointments.

When patients ring up to book, staff based in a central call center can easily input patient details and the platform will suggest clustered appointments at locations closest to the patient. This significantly reduces the time taken to manually generate appointments. Lumeon's APIs also enable patients to book online via the provider's patient portal, presenting slots they are eligible for or they can upgrade to a nominal cost.

The pathway guides clinical staff to conduct all the relevant tests and meticulously perform screening procedures. Results are electronically returned to the platform, which then automatically populates a personalized digital health assessment report, including highlighted outlying data, charts and recommended advice.



Example lifestyle action plan showing personal goal progress



Example auto-charted health assessment report

Health assessors or physicians can use this to create a personal goal for the patient which triggers an automated action plan, (once agreed by both parties). For example, a goal of reducing BMI by six points in six months will create a sequence whereby patients are sent custom e-questionnaires (via app, email or portal) to track progress, as well as weekly activities, nutrition plans and guidance about losing weight.

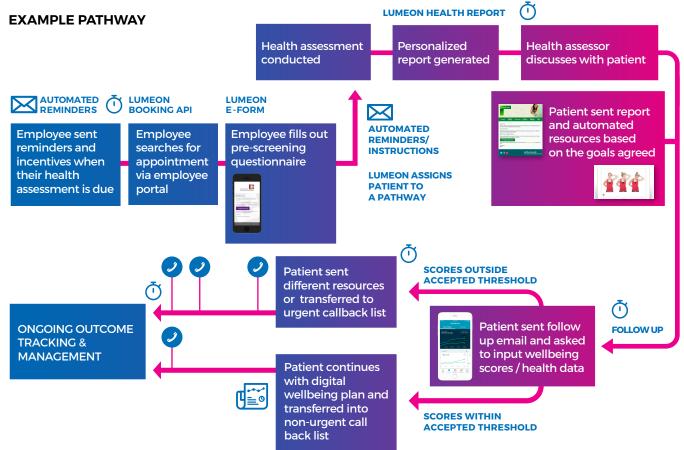
Every so often, the pathway will prompt lifestyle coordinators to call patients by transferring patients into call lists with auto-populated scripts. They can easily view each patient's personal goals and progress over time. The pathway guides them through checklists and if patient responses fall out of threshold, they will be prompted to escalate patients for review. They can also be prompted to upsell other relevant packages e.g. physical therapy vouchers.

Patients can also be escalated to more senior staff at any point in their journey, if their real-time scores from the e-questionnaires indicate they are not making appropriate progress.

Depending upon the data entered, they can either be transferred into high frequency, priority callback lists or maintained on lower frequency callback lists with the support of digital resources. This allows the provider to standardize follow-up procedures and focus human intervention on patients who are most likely to be at risk.

Towards the end of the process the health assessor or physician is notified that the goal timer is about to expire. They can assess whether to recall the patient, set new goals or discharge them. When patients come in for their next assessment, health assessors can see all previous goals allowing them to provide excellent customer service and enabling sealess care continuity.

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OUTCOMES



Standardized processes and improved care coordination

The provider can create standardized digital pathways that are run though one master system. Guided worklows allow non-clinical staff to take on more responsibility, while other activities are completely automated. All care stakeholders can see real-time patient progress, as well as the next steps and who is supposed to be completing the tasks. SLA timers ensure that the needs of each patient and contract are met.



Outstanding patient experience

Employees now benefit from a responsive, flexible service. They receive automatically personalized activities and resources tailored around their health profile and are transferred to digital wellbeing programs that help keep them on track with their personal goal. They can also book online and receive automated reminders about appointments.



Scalable growth without additional headcount

Automation enables the provider to monitor a large volume of patients via e-questionnaires, data threshold alerts and call list prompts. Digital workflows mean all processes, from appointment booking to invoice generation, are now executed rapidly and with greater efficiency.



Reduced administration for health assessors

By using auto-generated health reports and pre-planned activity sequences, health assessors don't have to hand-craft documents and follow-up processes each time. This leaves more face-to-face time with patients. Data thresholds and remote monitoring procedures also mean only at-risk patients are escalated to them during follow-up.



Enhanced control over the patient journey

The provider can monitor standard patient journeys across all sites, viewing bottlenecks or low uptake. This can be used strategically e.g. to prompt call center staff to make additional calls to offer out appointments. Pathway protocols are also easy to update, in order to future-proof their business.