



Improving the Referral Process within a Federally Qualified Health Center (FQHC)

Amber Lawrence
Connect Health + Wellness

December 5th, 2025

Background

What is an FQHC?



An FQHC stands for Federally Qualified Health Center. These are community-based healthcare providers that receive funds from Health Resources and Services Administration (HRSA) to offer primary care services in undersere area

Current Challenges?



Limited Access to Specialists
Insurance and Financial Barriers



Communication Gaps



Patient Barriers

Importance of Referrals?



Continuity of Care



Compliance with HRSA Requirements



Patient-Centered Care



Quality and Risk Management



Tracking and Follow-up

Problem Statement

- The current referral process in several FQHC's is inconsistent, lacks real-time tracking, and creates delays in specialty care, resulting in incomplete or stalled referrals and disconnected patient care.

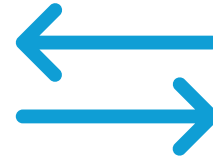
Project Aim



Improve referral competition, targeting a 6-month goal on average, at most.



Reduce overall referral turnaround time.



Increase communication between FQHC and Specialists.



Enhance patient experience.

Present Condition Review

Limited staffing in the referral department has led to delays in processing the high volume of referrals. These challenges stem from budget constraints and broader workforce shortages.

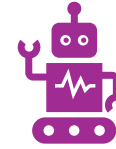
Failure to provide complete documentation to specialty offices leads to scheduling delays and frequent back-and-forth communication.

Lack of standardized follow-up and guidance from providers and referral staff leaves patients uncertain about when to reach out to the referring office if no update is provided.

Proposed Intervention



Expand referral department staffing to ensure timely follow-up and improve the overall patient experience.



Utilize AI solutions to automate non-critical steps, reducing manual workload and improving efficiency.



Develop a standardized referral workflow that includes a checklist to ensure all required documents are attached before submission, establishes weekly follow-up with referring offices for appointment updates where possible, and requests office notes promptly to close out referrals

Intervention: Standardized Workflow

Referral documentation checklist.

```
graph TD; A[Referral documentation checklist.] --> B[Order templates.]; B --> C[Provider-Staff alignment on responsibilities. (Avoid Delays: Miscommunication at the start often leads to incomplete referrals and scheduling issues. Ensure Completeness: Both provider and staff need clarity on who gathers and verifies required documents. Improve Patient Experience: Patients receives accurate instructions when roles are clearly defined.)];
```

Order templates.

Provider-Staff alignment on responsibilities. (**Avoid Delays:** Miscommunication at the start often leads to incomplete referrals and scheduling issues. **Ensure Completeness:** Both provider and staff need clarity on who gathers and verifies required documents. **Improve Patient Experience:** Patients receives accurate instructions when roles are clearly defined.)

Intervention: Patient Communication



Implement a multi-channel approach for appointment reminders, including phone calls, mailed correspondence, and patient portal notifications for enabled users



Offer patients clear, step-by-step instructions to prepare for and attend their appointments



Offer transportation support when necessary and when options are available to ensure patients can attend their appointments

Expected Benefits:



Patients: Faster access, clearer instructions, fewer missed appointments.



Providers/Referral Staff: Reduced administrative burden, better coordination.



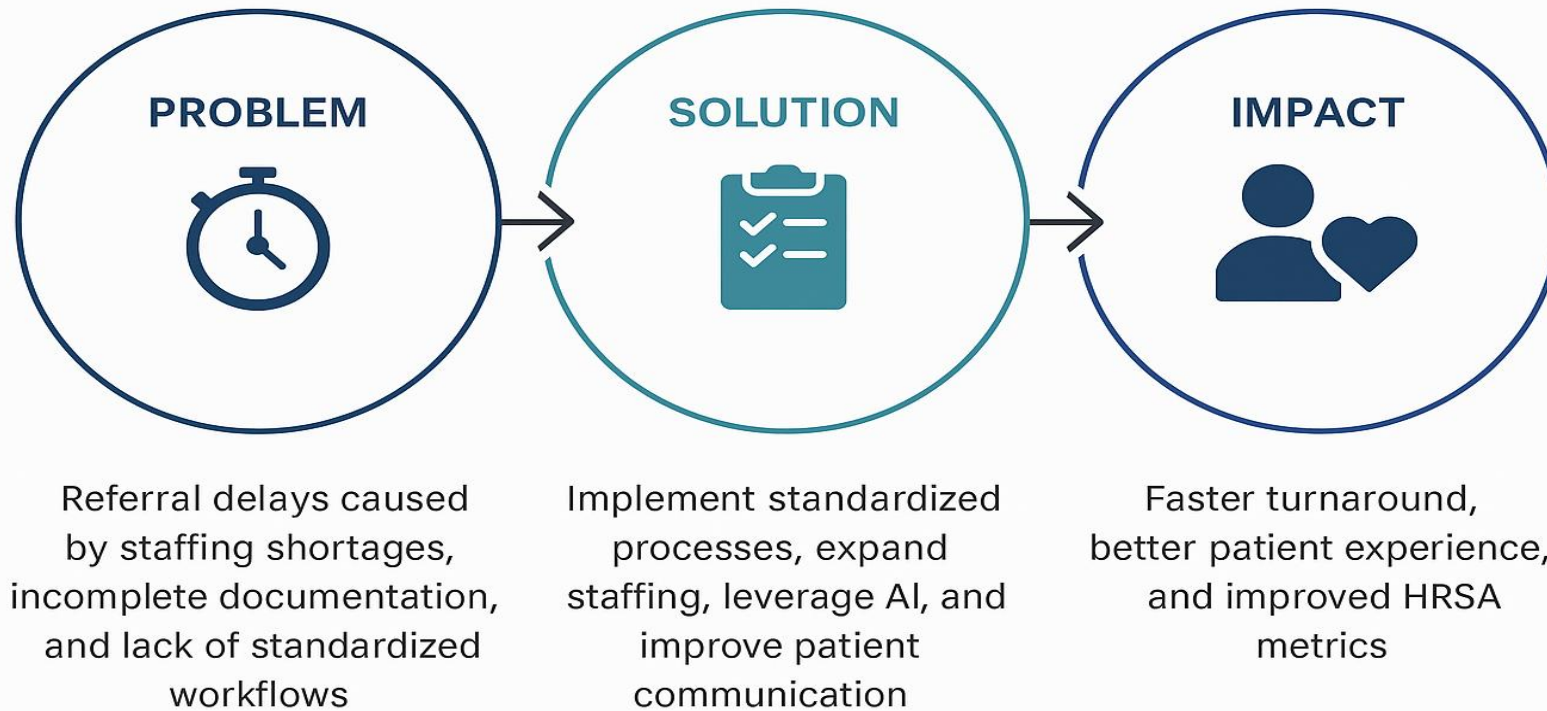
FQHC: An improvement on HRSA quality metrics, satisfaction, and partnerships.

Sustainability Plan:

Hold monthly meetings focused on referral performance metrics, engaging site coordinators, referral support staff, and providers to drive process improvements.

Ongoing training (Referral processes often change due to technology updates, specialist and insurance requirements)

Conclusion:



Questions?



Thank you for listening to my presentation!