

Patient Access & Experience Assessment

Find where patients wait, drop off and give up, and fix it in order.

In three to four weeks, two senior operators walk the patient journey at one site, from the first call to the follow-up visit. You get the bottlenecks behind wait times, no-shows and phone abandonment, what each one costs, and a ranked 90-day fix plan your managers can run.

WHAT WE ASSESS

Phones & call center

Abandonment, hold time and first-call resolution.

Scheduling

Template use, lead time to the third next available, no-shows.

Check-in & intake

Forms, eligibility and the prior-authorization handoffs.

Patient flow

Cycle time, room use and where providers wait.

Follow-up & referrals

Leakage, closed loops and recall.

Patient experience

Surveys, complaints and the moments that shape them.

WHAT YOU GET

- Access scorecard with a baseline for each metric
- Patient journey map with the moments that matter most
- Bottleneck register ranked by revenue and experience impact
- Prioritized 90-day fix plan with owners and dates
- Leadership readout with your administrator and medical director

HOW IT RUNS

Week 1	Data request, leader and front-desk interviews
Week 2	On-site observation, call listening, patient-flow study
Week 3	Analysis, costing and the fix plan
Week 4	Readout and the 90-day plan

INVESTMENT

\$12,500

Fixed fee for one site, three to four weeks. Multi-site groups are quoted. The plan is yours to keep, whether or not we help put it in place.

BUILT FOR

Medical groups, specialty practices, ambulatory surgery centers, outpatient and rehab clinics, and hospital outpatient departments.

WHAT IT IS NOT

- Not a clinical quality or coding review
- Not a HIPAA or compliance audit
- Not a reason to share patient data: we work from de-identified reports