

Expanding Resupply Revenues Beyond Sleep

How providers of more than sleep therapy, such as incontinence, diabetic supply and enteral nutrition, can optimize their resupply programs to increase revenues and patient care.

When HME providers read about resupply, they might initially conclude, “Ah, sleep therapy,” but they need to think again.

Resupply applies to much, much more than sleep, and smart resupply programs can be a key revenue driver for a variety of HME categories.

Recently, Morgan Dopplick, the director of Connect operations for HME software company Brightree LLC (brightree.com), and Margaret Lindskog, the director of operations for ReSupply LiveCall at Brightree, sat down with HME Business Executive Editor David Kopf to discuss expanding resupply beyond sleep. They touched on some of the HME items other than sleep that can drive resupply revenues, and how providers of those items can optimize resupply for improved efficiencies and increased earnings.

This interview originally took place on the [HME Business Podcast](#). If you prefer to listen to the interview, [Click Here](#) for that episode.

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HME Business: Let's start with a very basic question — why is resupply critical for today's HME provider business?

Dopplick: First and foremost, a quality resupply program has a direct impact on the provider's patient. Being able to provide a regular, efficient, successful program drives the kind of compliance that the patient really needs. It helps ensure that the patient is getting the supplies that they need when they need it, on time every time. Having that regular, recurring program generates a dependable, low-touch, and profitable revenue stream for the provider, as well. So it's really a win-win. It's a win for the patient, because they're having their therapy needs met, and it's a win for the provider, because they have that dependable revenue stream coming through.

I know that Brightree is working hard to expand resupply. What are some of the categories besides sleep that can benefit from well-executed resupply programs?

Dopplick: I'm glad you asked. Over the last several years, there has been a distinct focus on resupply in the sleep area, but we've taken what we've learned in the sleep space — what benefits patients in a regular resupply program in the sleep space — and have been expanding the benefits of an effective resupply program to other therapies: incontinence, diabetic, and enteral nutrition. In each one of those areas, we know that it's critical that patients are being resupplied timely; that they're getting what they need; and they're getting their full orders. So we're applying what we learned in sleep and carrying that over into other key lines of business that our customers are. This has really proved to be the next phase in terms of resupply.

These are some major categories we're talking about. Each one of these respectively has a fairly large



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patient footprint, correct?

Dopplick: Absolutely. And really, for resupply, not only is the footprint large, but the demographics of the patient varies as well. So it all becomes that much more critical to make sure you have an efficient program that can handle different patients, different payers, different ages, different needs. All of that really comes together in focusing on what your resupply program can do.

What has the sleep segment learned that can be applied to other categories that want to improve their resupply programs?

Lindskog: One of the things that we've learned through the sleep resupply process is to set the patient and the provider up for success from the patient setup. Resupply success begins at the onset of therapy and focusing on the initial patient education; changing out the supplies; the reasons the patient should pay attention to resupply; and the benefits that they're going to see. You want to set expectations with the patient; explain the follow-up process; and what patients can expect going forward once they start their therapy and once they're at home with their equipment. When providers start resupply from the get-go, we find that it

increases compliance and sets the patient up for success.

What are some other components of an effective resupply program?

Lindskog: Obviously, having the technology behind your resupply program assures that you are contacting the patient effectively and at the proper time. So, offering different contact modalities based on the patient's preference, but also their success, is a key driver as well.

What are some of the software and business process innovations that you've seen at Brightree and in the industry that have improved resupply programs?

Dopplick: Software really is the key to managing multiple patients across multiple payers; multiple outreach methods; and multiple disease states. Leveraging technology can take the burden off the HME and ensure that the patients are being contacted the right way, at the right time, and about the right supplies. Software can really do a good chunk of that patient management work for you. That's a huge benefit to an HME provider. It allows the provider to identify and overcome different pain points or any bottlenecks that they have within their

organization so they can streamline their workflow, processes, and create a consistent resupply program for patients.

Then, after they've mastered that software, they can shift into looking at additional services that they can lean on to compliment the resources that they have at the HME. So whether that is a live calling service that can help generate a more personal connection with their patients, or documentation retrieval service that can help with some of that paper chase. Those additional service offerings complement the technology and the software and really round out the end to end solution that every supply program will want to have.

Last but not least, after you've done all the work and you have patients reordering, you want to focus on your analytics. What does your data tell you? Do you have patients who are at risk of retention? Do you have opportunities to maximize your orders? That's really where the analytics component can come in. So providers want to make sure they have good quality data that allows them to keep tabs on their patient base and be proactive when there are concerns or issues. This ensures that the resupply program you've worked hard to build remains solid for your business and your patients.

Learn more about Brightree's ReSupply platform at brightree.com/resupply, or email info@brightree.com.



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In creating those kinds of tools and those analytics, have you seen any key performance indicators that are turning into the barometers for a good resupply program?

Dopplick: Absolutely. On average, here's what we see for a provider that leverages an end-to-end resupply solution: Of course, the clinical outcomes improve, but they grow their business. We see, on average, a 30 percent increased resupply revenue, and 37 percent increased revenue per order. And then, when it comes to retention, we see about a 9 percent to 10 percent improvement in overall patient retention, which we know just generates the downstream bottom line, as well.

I know that Brightree has a lot of tools to help providers with resupply, such as Brightree Connect. Could you describe that, and tell us a bit about how providers are starting to use that as part of their resupply?

Dopplick: The Connect software is an integrated solution that really manages a provider's resupply patient base. It identifies the right patient at the right time for the right supplies and then it helps the provider make outreach to their patients. Patients can click resupply orders in a

multiple of different communications modalities. So we've really sought with the software to not only manage that list but make contact in the way that's most appropriate for the patient.

And it's happening right on their smartphone, correct? They might get a text or they might get a call depending on what they want.

Dopplick: Yes. There's something for everyone. For example, if a patient is a busy business traveler and they don't want to be tied to a phone and call in, they can use a method such as the Patient Hub. Patient Hub is a Brightree patient engagement app that gives patients a short alert on their phone letting them know that it's time to reorder their supplies. That's a really seamless solution for that kind of busy patient; they could be walking through the airport and open the app and pop in their order and they're good to go. They know that those supplies are going to arrive on time when they need them.

We also have a more of an automated an IVR solution and we have a guided work list if you have staff at your location that can make those calls, that's available as well. We also have our ReSupply LiveCall service that can help assist your staff in making some of resupply calls.

Tell us more about the ReSupply LiveCall service. That sounds interesting.

Lindskog: With ReSupply LiveCall, we work with providers' patients on a one-on-one basis as an extension of an HME's business to provide personalized service; ongoing education; and support that many patients need. This is a very effective method with our older patient population as well as patients that might be having a little trouble with their therapy, and need that extra support. And again, just calling those patients when they're due for supplies, offering the support, troubleshooting any issues, and ensuring that we capture that order and maximize that order through education as well.

What about documentation retrieval services as part of a resupply program? How does that fit into the scenario?

Lindskog: Documentation retrieval makes it a complete, end-to-end, full-service resupply solution. We will get any CMNs needed, detailed written orders, prior authorizations, verify the benefits, collect copayments, unmet deductibles, and take away all of that paper chasing and the financial piece of collecting that payment upfront. So again, it really puts a nice finish on a complete resupply offering.