### Case Study:

# Accountable Care Organization Celebrates 2900% ROI on Outsourced Recruitment

#### **Customer Profile:**

Since 2016, an accountable care organization (ACO) has partnered with independent providers and healthcare practices who use its care delivery model to offer services to Medicare patients nationwide.



**950+** primary care providers



**350+** partner practices



**280,000+**Medicare
beneficiaries



**\$2.3 billion** in medical spending

#### The Challenge:

- » Missed growth targets with in-house recruiters
- » Unfamiliar to most providers
- » Static earnings with existing providers
- » Inadequate, inconsistent, slow recruitment processes
- » Inability to collect and analyze recruitment data
- » Recruitment strategies not adapted based on data

#### The Solution:

andros Network Development

#### The Results:

- » 30x ROI
- » Educated providers on securing contracts
- » Generated new revenue from existing patients
- » Consistent, proven, recruitment processes
- » Automated data collection, storage and analysis
- » Pivoted recruitment efforts to adapt

In just four months, andros' skilled recruiters **delivered a 2900% ROI** after systematically finding, educating and pitching primary care providers.

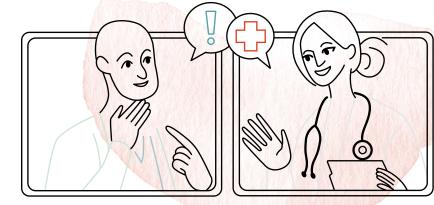
andros helped providers understand how the ACO's care delivery model would allow them to earn new revenue from existing patients.

Referrals soon accounted for 12% of sales because andros' explanation was clear and concise.

#### **Educated providers Across Multiple Channels**

Since ACOs were new to most providers, andros knew the marketing collateral had to explain the ACO business model and help providers **understand the financial benefits** before the first phone call. Additionally, because providers needed to see the information, it was shared via email and delivered to their practices by the U.S. Postal Service.

andros carefully timed recruiters' follow-up calls to give providers the opportunity to review and absorb the new information when it was convenient for them. Ideally, providers had gained a basic understanding of ACOs before andros recruiters called to offer additional insights and answer questions.



The educational and selling sequence used by andros was the opposite of the ACO's in-house recruitment strategy. Unlike andros, the ACO's recruiters always started with a phone call, then followed up with marketing collateral on select channels.

The ACO's results showed the andros multichannel first and phone call second sequencing approach worked.

With andros, the outreach and educational process, from the first contact to the signed contract, took 30 to 50 days.

#### **Created & Enhanced Educational Marketing Collateral**

andros let the ACO know that casual conversations about the financial benefits weren't convincing providers. As soon as providers told andros recruiters they needed to see concrete dollar amounts, andros discussed that insight with the ACO. The company immediately updated its earnings estimator and built a landing page dedicated to the earnings estimator and the benefits of the ACO's care delivery model. When andros found out providers wanted to hear what their peers had to say about working with the ACO, andros shared that discovery. The ACO now has testimonial videos from its providers.



## The ACO and andros filled the gaps with relevant, quantifiable, measurable information.

Leaders and recruiters used the data-rich andros platform to track the prospects they'd connected with and the outreach (phone, email, fax, inbound/outbound calls, video conference etc) week to week. Thanks to the andros Network Development solution, recruiters knew which steps had to be fine-tuned and how. Recruiters also kept detailed notes on prospects' responses and rated the prospects as high interest, low interest or neutral.

#### **Conversations Helped Close Deals**



andros recruiters relied on andros technology and weekly meetings to focus on the providers. In those meetings, recruiters talked about best practices as well as the challenges they were facing with prospects. As a result, andros recruiters spent even more time explaining the ACO model because most providers still struggled with the concept. Recruiters also directed providers to the ACO's website so they could confirm everything the recruiters had told them.

#### **Dedicated Resources to Qualified Leads**

The ACO had also asked andros to qualify its lead list of 3,600 providers, andros corrected inaccurate information, sourced missing information and built a chart detailing the reasons 760 leads had to be disqualified. In addition, andros immediately replaced 6% of the leads that the ACO itself had pulled. Because andros discovered 21% of the leads were invalid (lacking a valid medical license, deceased, hospital-owned), they removed them. As a result, they didn't waste time, effort and resources in an attempt to sell them. In addition, andros updated the list when they discovered 70% of the providers on the lead list didn't have email addresses and 68% didn't have the correct phone numbers.



andros systematically qualified the ACO's leads. The in-house recruiters still benefit from the andros commitment to validating and cleaning up the ACO's lead list.

The ACO's internal recruiters also saw how the consistent, but evolving processes deployed by andros gave prospects the information they needed to make better buying decisions.



