Improve access time for urgent referrals to specialists by promoting direct primary physician to specialist physician communication.

**Problem Statement:**
Urgent referrals should be seen by specialty physicians within 4 days, per DMHC standards. In reality, this is not met and patients seek urgent help in ER or may have negative outcomes.

**Discovery:**
60+ interviews (Physicians, mid-levels, specialists, prior authorization personnel, administrators).
- Most interviewees agreed on the difficulties of specialist access for urgent referrals. I was surprised they did not think direct communication with specialist was important in obtaining appointment date and facilitate information exchange.
- While there were several challenges, the logistical challenge of crossing several layers to get the specialist on the phone was the most significant one.
- To alleviate this, in June 2018, I operationalized Tiger Connect smartphone app that is HIPAA compliant and can be downloaded onto the personal cell phones of referring providers as well as specialist providers.
- While employed providers set this up with minimal difficulties, getting the community IPA specialist providers onboard was a challenge. Even the specialists who activated the smart phone app, did not use it consistently as only a portion of their patients were from Lakeside IPA.
- In January 2019, I pivoted from the initial smartphone app to an expanded intervention to also include direct cell phone contact (by providing the specialist cell phone numbers to our primary physicians), direct phone calls via traditional office line, secure email and EMR tasking.

**Goal:**
Improve specialty physician access time for urgent referrals, to less than 4 days.

**Outcome-oriented Objective:**
By September 2019, improve access time for urgent specialty referrals to less than 4 days for 70% of our patients.