

5 Ways to Increase Your Admissions

2025



Table of contents

| | |
|---|---|
| Why are you here? | 3 |
| Move fast! | 4 |
| Know your screening criteria, make it easy and repeatable | 5 |
| Verify benefits before it's too late | 6 |
| Understand your referral sources | 7 |
| Analytics | 8 |
| About Supportable | 9 |



“

Don't agonize. Organize.

”

FLORYNCE KENNEDY

Why are you here?

Most likely, you've been wondering if there's a better way to run your front-end operations.

Running a behavioral health practice is serious business. You have a lot of people to take care of, and a lot of boxes to check in order to do so. Literally.

The barriers to getting a person started with a service are vast and often confusing for everyone involved.

Meanwhile, your program staff are wondering why they don't have enough clients. Groups with empty chairs, houses with open beds, billable staff with gaps in their case loads.

We've uncovered 5 universal concepts to implement while designing or modifying your referral management process.

1.

MOVE FAST!



Create an attitude of urgency within your team.

This is more of a guiding principle than a technique. Speed is the name of the game. Oftentimes you have a small window of time to connect with your prospective client. The longer a person waits to get started with a service, the less of a chance you have to be able to provide service to them. There are two main reasons for this:

1. **The person is in crisis and may fall off.** Everyday life events can greatly impact a person's willingness and ability to get started. When someone is distressed by work, family, finances, or drug use, the urgency to seek treatment increases. Delays in talking to a professional or waiting for treatment can reduce the chances of keeping an appointment. Studies show that roughly 50% of individuals scheduling an initial outpatient mental health appointment actually attend. Of those completing the intake, 35% fail to attend the first session ^[1].
2. **The provider down the street is quicker than you.** Let's be honest, this can be a competitive industry. For those of you operating in urban areas, it's crowded too. You may not like to think you have competitors, but you do. They're also trying to keep their spots filled. We're seeing more and more behavioral health and human services innovate to remain relevant and successful. If you don't innovate to move as fast as the modern world is evolving, others certainly will.

Most programs we come across have no idea how long it takes them to get a new client from first contact to butt-in-seat. That's a problem. You **NEED** to know what that number is. Hours? Days? Weeks?

Fortunately, we're living in an exciting time where we have a wealth of productivity tools available to us, all eager to rise above their own competition and help us get better at what we do.

2.

Know your screening criteria, make it easy and repeatable.

“Wrong fits” are caused by poor screening tools.

Screening can be costly in time and resources. You want to be able to funnel more “**Right Fit**” people into your openings (seats/beds/groups, etc.). Be sure to ask the best questions up front on your referral form. What are the best questions? That depends on what you do as an organization. Before devising questions to ask your prospects, ask yourself a few questions:

1. **What are your specialties? Screen FOR them.** Sure, you don’t want to play favorites, but your business and its practitioners have their own set of strengths and weaknesses. Find those areas in which you excel and ask questions around them. Do you have an elite-level Justice Involved group for women? Make sure it’s easy to identify a woman with recent criminal history so you can get her started as soon as possible. It’s silly to miss that opportunity simply because you don’t have a slick screening tool.
2. **What are your non-negotiables. Screen AGAINST them.** Everyone has limitations, yourself included. Most programs have prospects with diagnosis or conditions they work well with and prospects with diagnosis or conditions they don’t. If you run a non-medical residential facility, you may want to avoid accidentally placing a person with a high risk of kidney failure. The quicker you can identify this, the quicker you can refer them out to one of your partners who handles that situation beautifully.

Wrong fits are a major problem for staff morale, revenue generation, and reputation. Solidify your pre-screening questionnaire and use a tool that allows information to be easily entered and promptly processed. **More on this when we talk about efficient data collection in #5...**

3.

Verify benefits before it's too late.

Avoid money disputes.

According to Mental Health America, 10.8% of U.S. adults with mental illness were uninsured in 2024 ^[2].

Check insurance eligibility before the prospective client goes far into your funnel. It is better to know early on than to waste time entering data into your EHR or intake spreadsheets only to deny services or refer them elsewhere just because you don't accept their insurance or 3rd party payer.

We've seen providers miss on this a few times per week and end up having to explain to the prospect why they are being charged cash (which most won't pay). Now they must leave the program due to inability to pay.

This is a reputation and revenue killer.

Even worse, it's bad for the prospective client and hurts the industry as a whole. We assume you didn't get into this business because you love money disputes.

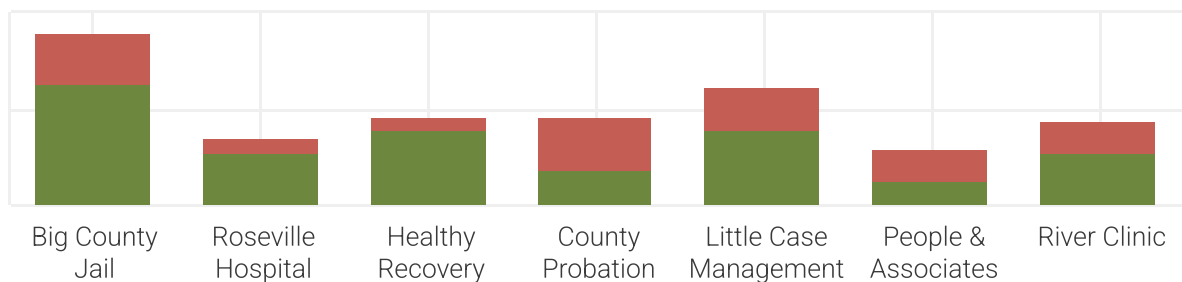
This is an opportunity to position yourself as a provider who helps proactively guide people in the right direction instead of a provider who seeks to take people's money (true or not, that'll be the perception).



4.

Understand your referral sources.

Who's giving you the best referrals?



Bad referrals can clog up your system. It's inevitable, you're going to get referrals that were never going anywhere. There are actionable items you can employ to minimize this.

1. **A clear and concise website.** Organic web traffic is great, but it can attract just about anyone on the internet. Make sure your website does a good job explaining what you do and NOT do.
2. **A sound way to collect referral source data.** If you're not asking who the person is who is submitting the referral on behalf of the patient, you're missing a critical part of your business. You need to know who they are and where they work. Building your professional referral network is key.
3. **A tally system.** Now that you're identifying your professional referral sources, you need to know if the referrals they send are good fits for your program. Each referral should be counted as either **successful** or **rejected**, contributing to the individual **conversion rate** of the referral source.

You can now use this data to improve your outreach efforts, designing campaigns around educating those referral sources who struggle to understand your business. Additionally, you're also saving everyone's time; your team, the referral source, and most importantly the person looking for help.

5.

Analytics

Make data-driven decisions,
keep improving.

A software company stressing the importance of analytics. Shocking! The reality is technology and data analytics have firmly found their place across most industries. This has not been the case for mental health [3].

The most successful companies we've come across in this field are the ones who are adopting technology designed to help them make data-informed decisions, getting ahead of their fellow providers. They treat their referral process like an assembly line, continuously adjusting and improving to speed up the process. To name a few:

- Rejection Reasons
- Average Minutes to First Contact
- Average Time from Referral to Admission
- Processing Time by Staff Member
- Conversion Rate by Company > Contact
- Referrals by County > City

You might be out there telling people you do same-day assessments, but how often are you able to deliver on that promise? **How do you know?**

We mentioned before that easy and repeatable screening is crucial. When you have a controlled form that collects uniform data, your world opens. When a person picks from a list of predefined choices instead of free-form writing, the data is more easily processed, making it easier to draw graphs, identify trends, and detect anomalies.

When it comes to the referral and intake process, you have plenty of opportunity to examine objective data (measurements of time, demographics, referral results) and gain valuable insight into your process.

Perhaps you can get rid of that pesky checklist that staff hate doing. When onboarding new customers, we love to ask, "why do you do it that way?" We especially love the answer, "because that's the way we've always done it."

Data analytics will give you the ability to truly self-examine and improve the way you deliver service from the get-go.



SUPPORTABLE



About Supportable.

We eliminate barriers, maximize revenue, and increase positive impact for behavioral health organizations through customizable, data-driven software solutions.

Here at Supportable, we LOVE the referral process. We built a system that maximizes efficiency and the process of converting referrals into revenue. Supportable increases transparency so management can monitor results and quickly identify bottlenecks. Analytics allow for real-time referral status and the ability to assess the health of the organization's intake process.

Supportable boosts care and profitability for behavioral health organizations with customizable technology and reliable support. Our platform lowers patient acquisition costs by streamlining operations, allowing clinicians to focus on care and executives to enhance financial outcomes, aligning clinical excellence with business efficiency.

Supportable would love to have a conversation with you if you are looking to improve your referral process and get more **"Right Fits"**, quicker turnaround on calls, and fewer insurance gaffes. More butts in seats = increased revenue.

Book a Call

supportableapp.com/discovery



Citations

1. Barrett MS, Chua WJ, Crits-Christoph P, Gibbons MB, Casiano D, Thompson D. EARLY WITHDRAWAL FROM MENTAL HEALTH TREATMENT: IMPLICATIONS FOR PSYCHOTHERAPY PRACTICE. *Psychotherapy (Chic)*. 2008 Jun 1;45(2):247-267. doi: 10.1037/0033-3204.45.2.247. PMID: 19838318; PMCID: PMC2762228.
2. Reinert, M, Fritze, D & Nguyen, T (July 2024). "The State of Mental Health in America 2024." Mental Health America, Alexandria VA. <https://mhanational.org/wp-content/uploads/2024/12/2024-State-of-Mental-Health-in-America-Report.pdf>
3. Reuterskiold, Carl (March 28, 2023). "Data's Role—Or Lack Thereof—In Mental And Behavioral Health Diagnoses." *Forbes*. <https://www.forbes.com/councils/forbestechcouncil/2023/03/28/datas-role-or-lack-thereof-in-mental-and-behavioral-health-diagnoses/>