Pointcare

SOLUTION BRIEF

Pointcare for Multi-Site Community Health Centers

Automate enrollment workflows to reduce burnout and maximize patient coverage continuity

THE CHALLENGE

Enrollment managers at community health centers face rising patient volumes, frequent coverage lapses, and overwhelming manual processes that strain limited staff resources, leading to missed reimbursements, increased uninsured visits, and difficulty meeting coverage targets under tight deadlines.

01 Urgency-Based Triage as Default Operations

Without a capacity model connecting site count, patient volume, and case complexity to available hours, enrollment managers allocate resources based on deadline proximity rather than revenue impact, creating a cycle where prevention work gets continually deferred.

02 No Mathematical Framework for Resource Allocation

Organizations count reps and sites but rarely document case completion time by enrollment type, leaving managers unable to prove when workloads become mathematically unachievable before coverage lapses occur.

03 Hidden Time Subsidies Across Enrollment Types

Without workflow time audits, organizations cannot distinguish which enrollment categories consume disproportionate staff hours or whether that time investment delivers proportional revenue protection.

04 Policy Changes Creating Permanent Workload Increases

Semi-annual reviews and expanding work requirements (requiring 80+ hours/month verification) will double documentation needs, yet most organizations wait until implementation before calculating the impact on staff capacity.

THE SOLUTION

Pointcare offers a comprehensive coverage management platform designed for community health centers, automating enrollment, renewals, and compliance workflows to reduce administrative burden and prevent coverage gaps for patients. By consolidating data from multiple sources, proactively detecting lapses, and providing bilingual self-service tools, Pointcare empowers health centers to maximize reimbursements, streamline operations, and ensure patients remain connected to care, even with limited staff and rising patient needs.

Key Benefits

- **Reduce claim rejections with predictive coverage management:** Pointcare's advanced lapse detection identifies at-risk patients up to 90 days before claims are rejected, with 94% accuracy, enabling enrollment managers to allocate resources based on revenue impact rather than just deadline proximity.

- **Maximize staff efficiency through streamlined resource allocation:** By streamlining repetitive administrative tasks and automating compliance, Pointcare cuts manual workload by up to two-thirds, providing documented time savings per enrollment type and proving when additional resources are needed.

- **Lower staffing costs while managing increased workloads:** Orchestrated, multi-channel campaigns and bilingual self-service tools enable health centers to handle expanding documentation requirements and work verification processes without proportional staff increases, even during policy changes that double workloads.

HOW IT WORKS

Community health centers are the backbone of accessible care, but rising patient volumes and complex coverage requirements can overwhelm even the most dedicated enrollment teams.

Pointcare transforms this challenge with a unified platform that automates enrollment and renewal workflows, proactively detects coverage lapses up to 90 days in advance, and orchestrates multi-channel patient outreach, empowering CHCs to keep more patients insured while reducing the administrative burden on staff.

By consolidating data from multiple sources, Pointcare's coverage intelligence uncovers hidden eligibility and maximizes reimbursements. Advanced lapse detection algorithms flag at-risk patients before revenue is lost, while automated life event tracking and exemption handling ensure compliance without manual effort. Flexible enrollment support scales to meet demand, and bilingual self-service tools (English/Spanish) make it easy for patients to complete steps anytime, on any device. Real-time analytics give leaders clear visibility into operations and outcomes, supporting data-driven decisions that boost efficiency and patient satisfaction. With Pointcare, health centers can focus on delivering care, confident that coverage gaps are closed, staff burnout is minimized, and every visit is protected.

2.3M+
Patients with coverage managed by Pointcare

100+
Community health centers served

2012
Founded with a mission to eliminate coverage gaps

ABOUT US

Founded in 2012, Pointcare is the leading coverage management platform, managing coverage for over 2.3 million+ patients across 80+ community health centers. Pointcare is dedicated to ensuring seamless access to healthcare for millions of Medicaid, Medicare, and Marketplace plan members and the health centers that serve them.

Founded with a mission to eliminate coverage gaps, Pointcare provides real-time visibility into coverage status, automates renewals, and simplifies the complexities of Medicaid and other healthcare programs.