

CASE STUDY



Increasing Patient Conversion: How Sohar helped Talkiatry Achieve a 12% Increase in Funnel Conversion

CLIENT OVERVIEW

Talkiatry is a national mental health organization offering accessible psychiatry and therapy services through virtual appointments. By working in-network with major insurers, Talkiatry connects patients to licensed psychiatrists who provide evaluations, personalized treatment plans, and medication management. Talkiatry's approach combines technology and a patient-centered philosophy to make high-quality mental healthcare widely available.

Industry: Behavioral Health

800+

Employees

245MM

Raised

Series C

Organization

RESULTS

By leveraging Sohar's Eligibility Automation products, Discovery and Verification, Talkiatry achieved measurable improvements in revenue, operational efficiency, and patient experience. The partnership eliminated manual inefficiencies, enhanced claim accuracy, and drove an increase in benefit verification accuracy to 95% while cutting operational costs.

BY THE NUMBERS

12%

improvement in patient conversion rates during intake.

90%

costs associated with manual operations team saved.

8:1

ROI realized within 12 months of implementation.

CHALLENGE

Talkiatry's insurance verification process had significant manual workflow leading to increased claim denial rates and lower intake conversion rates. These issues increased delays for patient appointments, caused confusion regarding patient financial responsibilities, and contributed to higher patient acquisition costs.

SOLUTION

In our conversations with the Talkiatry team, it became clear that the right solution to their problems would not just create efficiencies in their front-end RCM process, but must also reduce costs and positively affect the patient experience.

TALKIATRY'S OBJECTIVES

- Automate and streamline the benefits verification process.
- Improve claim acceptance rates.
- Reduce operational costs tied to manual RCM efforts.
- Enhance patient experience by minimizing delays in the intake funnel.

Sohar provides unmatched expertise in handling behavioral health benefits verification. Our robust understanding of X12 service codes and payer-specific nuances enables accurate mapping of behavioral health carve-outs and Managed Care Organizations. Sohar's statistical model approach to benefits selection ensures correct benefit information upfront, reducing misinterpretations and errors.

Additionally, our collaboration with digital billing vendor Candid Health allowed the ingestion of adjudicated claims data to adjust payer response interpretations dynamically, improving the accuracy of Talkiatry's checks over time. This eliminated the need for Talkiatry's engineering team to manage integrations, offering a seamless solution.

PAIN POINTS

Dependence on manual processes for benefit verification, causing delays and errors.

Extended lead times before new patients could be seen.

Insurance issues and financial misunderstandings with patients.

IMPLICATIONS

Increased claim denials, associated with a 70% benefits and eligibility accuracy rate with the manual insurance verifications team.

Increased operational costs employing a manual insurance verifications team.

KEY PRODUCTS UTILIZED

To meet Talkiatry's brief, we suggested two products from our [Eligibility Automation](#) suite, Discovery and Verification. These products work together to automate real-time eligibility and create operational efficiency.

Discovery

Helps companies determine a patient's health insurance coverage without asking them to share their provider up front.

Verification

Reveals whether a patient is eligible for services and verifies the nature of their benefits.

IMPLEMENTATION

The integration process involved high-touch collaboration between Talkiatry's engineering and product teams and Sohar's CTO. Sohar tailored its solutions to address Talkiatry's specifications, ensuring our Eligibility Automation flow met their requirements.

Despite competing internal priorities at Talkiatry, Sohar adapted its approach, offering flexibility during the onboarding process. While initial access was provided within a day, the full system integration was pushed into production when the benefits data accuracy (i.e. copay, coinsurance) exceeded 90% across all payers and 95% for the key high volume payers.

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“ I’ve been really impressed with the Sohar team. Easy to work with. Deep understanding of the space. And most importantly, the results speak for themselves. Fast, accurate responses mean we’ve been able to meaningfully improve our patient experience and get significantly more qualified patients through our intake funnel.

Matt Ivester

SVP, Head of Product at Talkiatry

“ Partnering with Sohar allowed us to streamline our insurance verification process in Talkiatry's intake flow and foster improvements to our entire RCM function. With Sohar, we are able to offer patients faster and more accurate payer/plan information, network status determinations, and benefits information - not to mention a better claim submission process, with fewer rejections related to up-front eligibility and cost-sharing discrepancies.

Charles Collins

SVP, Revenue Cycle at Talkiatry

“ Automating eligibility through Sohar has addressed a business-critical area for Talkiatry. By reducing manual workflows and improving the accuracy of our insurance verifications, we've enhanced patient conversion rates, improved operational efficiency, and reduced our claim denial rate—all while achieving an 8:1 ROI in the first 12 months. From my perspective, continuing this partnership is essential to tackling new challenges and driving even greater impact in our RCM processes.

Robert Crayn

CEO of Talkiatry
