# HealthyConnect delivers continuous care. Your care team stays connected.

A focused clinical role for your health center. HealthyConnect handles ongoing ACCESS care.

HEALTHYCONNECT

Enrollment. Patient support.
Ongoing care. Clinical updates.

HealthyConnect bills Medicare directly for ACCESS care.

YOUR CENTER

Keep the clinical relationship.
Review, coordinate and document.

Bill separately for qualifying co-management.

ILLUSTRATIVE FIRST YEAR / 1.5 QUALIFYING TRACKS PER PATIENT

**$150**
per patient per year

**$267**
per modeled review hour

$135 reviews + $15 qualifying onboarding

1.5 tracks × 3 reviews × 7.5 minutes = 33.75 minutes/year
$150 ÷ 0.5625 modeled review hours ≈ $267/hour

## A current patient story. A focused clinical contribution.

PATIENT

Shares changes, questions and care experiences.

HEALTHYCONNECT CARE TEAM

Brings relevant information into a focused care update.

YOUR CLINICIAN

Reviews the update and coordinates the next step.

Free HealthyConnect ACCESS care • Keep existing providers • Direct or provider-assisted enrollment

## One-page setup. No referral-partner fee.

HealthyConnect handles onboarding. Start at the fqhcs package page

HealthyConnect planning illustration: averages 1.5 qualifying tracks across enrolled patients; each track requires distinct qualifying review and coordination. Uses national-base payments of $30 × 3 reviews plus $10 qualifying onboarding per track. CMS minimum review and coordination time: 5 minutes; this model uses 7.5 minutes. Onboarding, billing and other administrative time are additional to the review-hour denominator. Actual payments vary by practitioner type, geography and applicable adjustments. This is gross revenue, not profit or a guaranteed result.

Medicare-enrolled FQHCs may bill CMP for eligible services beginning October 1, 2026.