

Brad Bauer

Senior Vice President of Business Development Bamboo Health

This article is sponsored by Bamboo Health. In this Voices interview, Behavioral Health Business sits down with Brad Bauer, Senior Vice President of Business Development at Bamboo Health, to discuss how real-time, closed-loop referrals are improving access to care while driving down costs. Bauer outlines the biggest hurdles states face in implementing real-time referrals and shares key strategies to overcome them. He also offers insights into the future of behavioral health referrals as the industry continues to evolve.

Editor's note: This interview has been edited for length and clarity.

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Q: Behavioral Health Business:

Share a bit about your background and the journey that led to your role today.

Brad Bauer: I've been in the healthcare information technology space for about 32 years now, working with organizations like Equifax, McKesson Technologies and now Bamboo Health, where I've been for a little over a decade.

What's really close to my heart is using near real-time data to mitigate risk, create administrative efficiencies and improve health outcomes, especially for vulnerable and high-risk populations. That passion is what led me to Bamboo Health in the first place.

About 10 years ago, I joined the team with a shared mission: to use what we call pivotal moments in the healthcare continuum to drive meaningful change and better support those most in need.

At the end of the day, it's about helping government agencies and commercial healthcare entities deliver higher-quality healthcare through smarter, more integrated use of data within clinical workflows. That's what gets me up in the morning—that's the real needle mover. And I think that spirit is deeply embedded in Bamboo Health's mission.



Q: Behavioral Health Business:

Why are behavioral health interventions so important?

Bauer: Identifying mental health and substance use disorders early on is critical, as it directly improves quality of life. Right now, over 59 million American adults are living with mental illness, and 36% of adults aged 18 to 25 suffer from a diagnosable mental health disorder. These are staggering numbers that point to a very real mental health and substance use disorder crisis in this country.

Mental health is one of the leading causes of disability and premature death. Yet only about half of those living with mental health conditions are actually receiving treatment. That's a statistic I keep coming back to.

Individuals with behavioral health conditions often have medical costs over 2.8- 6.2 times the total compared to those without. They're often cycling through the system, frequenting emergency departments, seeking opioids or experiencing behavioral health crises that result in high-cost care episodes. Those pivotal moments are where the financial burden really spikes.

This segment of the population plays a significant role in driving up healthcare costs, which in turn impacts how states approach public health strategies, and it definitely influences how Medicare and Medicaid address care for these individuals. It's a vulnerable group that, because of repeated and avoidable utilization, is heavily influencing the financial strain on the system.

That's where behavioral health intelligence and closed-loop referrals come into play. By identifying these individuals earlier in the care journey and getting them connected to the right treatment sooner, we have a chance to change the trajectory.

And with the workforce shortages we're seeing across the board, it's even more important to have smarter, more effective systems in place. If we can guide people to the right care the first time, we avoid unnecessary hospital readmissions and reduce overall costs. It's about getting people the treatment they need, and doing it in a way that's sustainable for the system.



Q: Behavioral Health Business:

How do real-time, closed-loop referrals help expand access to care? **Bauer:** When we talk about real-time, we're referring to the ability to digitally submit a referral for someone in need of inpatient or outpatient mental health or substance use treatment. But to make that work, the sending provider needs real-time visibility into available beds; otherwise, the referral process falls apart.

This relies on a specific network, whether regional or statewide, being able to provide accurate information on bed availability up to the minute. That way, a provider can confidently make a digital referral to the appropriate level of care, whether that's inpatient, outpatient or a psych bed.

It's a critically important component. Without accurate bed counts, the closed-loop referral process becomes unreliable. The two go hand in hand, and real-time, closed-loop referrals help expand access to care by placing individuals into the right treatment setting when they need it most. This becomes especially important when you hear stories of individuals literally living in emergency departments, particularly in youth or foster populations. That often happens because there's either a perceived lack of beds or no effective system in place to get those individuals where they need to go.

That's where real-time referrals make a huge difference. These systems give behavioral health providers the ability to perform real-time assessments, submit a referral digitally and track that referral through to completion.

That means you're not just sending someone off to a facility and saying, "Good luck." The system tracks who received the referral, who accepted it, and confirms that the individual actually arrived at the facility. If the referral is not accepted, the provider is required to provide a reason why they did not accept the individual. That's what makes it a closed loop.

This is essential not just for patient care, but also for reporting and outcomes. State agencies and local municipalities rely on this data to assess the health of their networks—what's working, what isn't and what policy decisions need to be made.

For example, we've seen youth populations that are consistently underserved. That could be because there truly aren't enough beds, or it could be that these individuals aren't being connected through referral systems often enough to get placed appropriately. That insight only comes through real-time, trackable data.



Q: Behavioral Health Business:

What are some of the challenges states must overcome to implement real-time referrals? **Bauer:** If this were easy, everyone would be doing it, right? What we're really talking about here are the barriers to adoption.

Most behavioral health providers are overworked, understaffed and juggling multiple health IT systems, many of which are legacy platforms that don't communicate with each other. The behavioral health infrastructure as a whole is still fragmented and lacks standardization and interoperability.

So, when you're trying to introduce real-time referrals across a diverse behavioral health provider network, which includes social workers, community care workers and clinicians, you need a thoughtful and comprehensive strategy. That includes system training, network onboarding and ongoing optimization.

Network onboarding means thoroughly reviewing the provider network to make sure the system works as intended. And because behavioral health sees a lot of workforce turnover, one-and-done training just isn't realistic. Ongoing, 24/7 training and support throughout the contract term is essential for any vendor offering these services.

Another key factor is harmonization with the overseeing authority, usually at the state or county level. In some cases, states mandate the use of certain systems, including closed-loop referrals. But mandates alone aren't a silver bullet. Providers are unlikely to embrace new technology unless the system actually works well and fits into their workflow.

And then there's integration and interoperability. Most behavioral health providers are already using a range of other technologies, so bringing in something new, like a closed-loop referral system or broader care coordination platform such as the Bamboo Intelligence Hub TM can feel overwhelming if it's not done right. The ability to integrate with existing health IT systems provides a higher degree of interoperability and reduced duplicate data entry.

That's why we pay close attention to the entire technology continuum. Around 25% of behavioral health providers don't even have an EHR, unlike most primary care settings. So if your solution only integrates with an EHR, you're missing a big part of the population. That's why it's critical to offer webenabled platforms for providers who are still operating on paper.

You also want to eliminate duplicate data entry. If I'm a provider and I've already entered information into my system, I don't want to reenter all of it into a referral platform. I want that data to pull through automatically. That's what makes the process efficient, and that's the whole point. Technology should reduce burden, not add to it.

Q: Behavioral Health Business:

How can real-time referrals reduce the overall cost of care on an individual?

Bauer: What real-time, closed-loop referrals do is bring greater efficiency to the process of identifying those in need and actually getting them connected to appropriate care.

Right now, many facilities are still relying on outdated methods like a Rolodex or making phone calls to find treatment options. That's neither modern nor efficient, and as a result, people fall through the cracks. A recent Deloitte report highlighted the cost of this inefficiency: in 2024, \$5.3 billion in excess healthcare costs were tied to overutilization and heavy reliance on emergency departments for acute mental health crises. That's a massive number.

This kind of overutilization clogs the system—it reduces overall capacity and increases wait times for other patients. Closed-loop referrals, when integrated into a larger care coordination platform, help route individuals to the right treatment setting faster and more effectively.

Getting people into care sooner means fewer unnecessary readmissions. And in the case of justice-involved populations, it also helps reduce recidivism. By connecting care teams at the time of release, when these individuals are most at risk, you create a better path forward.

We've already talked about reducing costly ED visits, and the data backs it up: individuals with behavioral health conditions cost an average of \$8,720 more than those without.

This is about building a highly effective behavioral health coordination system, with real-time referrals at the center, to make sure people actually get the care they need.



Q: Behavioral Health Business:

What does the future of behavioral health referrals look like?

Bauer: For whole-person care to become a reality, providers need systems that integrate both physical and behavioral health data in a way that meets individuals where they are, working within existing systems.

Care collaboration platforms like the Bamboo Intelligence Hub TM are promising solution suites that help behavioral health providers proactively manage pivotal moments in a person's care journey, addressing both physical and behavioral health needs.

The Bamboo Intelligence Hub gives care teams a comprehensive view of an individual's journey, including key care events like admissions, discharges, transfers, treatment referrals, crisis dispatches and even justice-involved moments such as incarcerations, bookings, and release events. This allows care teams to engage individuals at the right moment in time.

These platforms also provide the interoperability and integration needed to bring together data from multiple legacy systems, helping teams make more informed decisions.

Finally, platforms like the Bamboo Intelligence Hub(R) don't just support dayto-day care, they also generate valuable outcomes data and reporting that inform states, payers and providers on the overall health of their behavioral healthcare continuum.



Q: Behavioral Health Business: Finish this sentence: In 2025, the behavioral health space will be defined by...

"the industry's ability to embrace whole-person care with care collaboration platforms that bridge today's fragmented delivery and technology landscape, leveraging solutions like BIH and closed-loop referrals to expand access, track care effectiveness and deliver meaningful outcomes reporting..."

