daffodil

SUCCESS STORY

Developing an AI-Enabled Care Management Platform for a US-Based Re-Entry Healthcare Provider

Customer: California Based Healthcare Provider

Country: United States

Industry: Healthcare

ABOUT THE CLIENT

SERVICES DELIVERED

Healthcare Software Development

Our client is a 501(c)(3) non-profit digital health organization based in the United States, working to break the cycle of poor health outcomes, medical inaccessibility, and chronic disease recurrence. The organization supports underserved, uninsured, and marginalized individuals by providing the digital tools and resources they need to navigate the healthcare system with confidence. Its services include telehealth access, digital health insurance enrollment, health literacy programs, care navigation training, and ongoing patient support, with the broader mission of reducing preventable hospitalizations and closing persistent gaps in healthcare access.

BUSINESS SITUATION

When our client approached us, they wanted a platform to manage clients and billing. But the real challenge was much bigger than standard healthcare software.

The organization already ran programs across addiction recovery, housing, and mental health, but operations depended on spreadsheets, shared drives, manual documentation, and disconnected workflows. Intake, assessments, care plans, encounter notes, and billing data were scattered across systems.

This created three key gaps. First, care teams and billing managers worked without a unified system, making documentation and daily patient tracking difficult. Secondly, each MCP (Kaiser, Health Net, PHC) had distinct documentation and billing requirements, resulting in complex claim tracking and high rejection rates. And last but not least, the leadership lacked visibility into onboarding, assessments, and claim status, while reports were prepared manually.

The platform also needed to securely handle sensitive PHI with role-based access, privacy controls, and audit trails. More than a software vendor, the client needed a technology partner to streamline workflows and build a compliant platform.

Some of the key requirements were to:

1. Develop a comprehensive web platform covering care management, billing management, and reporting
2. Orchestrate a multi-tenant architecture with super admin, system admin, and tenant-level controls
3. Enable automation across the full client journey: intake, onboarding, assessment, care plan creation, and execution
4. Provide support for multiple MCPs (Kaiser, Health Net, PHC) with MCP-specific assessment forms and billing logic
5. Integrate Office Ally for claims submission, remittances, and eligibility checks
6. Develop configurable reports and dashboards for inbound, approved, and rejected claim volumes
7. Meet HIPAA, CalAIM, DHCS, and CMS billing standards through audit logs, RBAC, and structured data capture.

THE SOLUTION

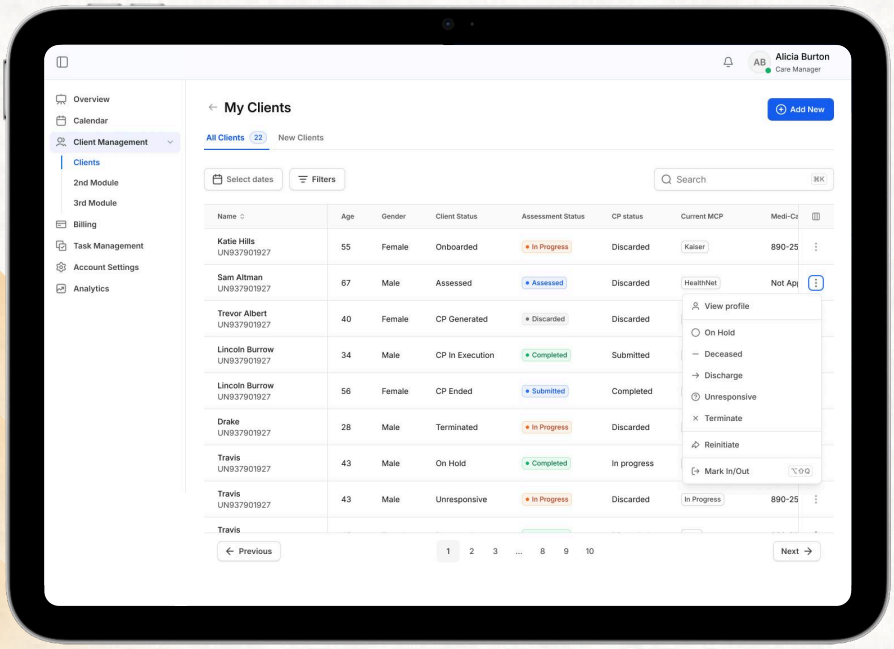
Daffodil approached this as a healthcare operations transformation problem rather than a conventional portal build. The goal was to take a non-profit running on spreadsheets and disconnected workflows and give it a single platform that could run intake, care, and billing.

Before writing code, we worked with the client to define and document their internal processes. We helped translate their workflows into clear, role-based flows that could be automated. Here's what our solution featured:

Designing A Multi-Tenant Foundation With Role-Based Access

We built tenant management as the first layer, envisioning the platform as a scalable solution that could eventually serve other non-profits and healthcare providers. Each tenant operates in isolation, with its own users, configurations, and data, which was essential for privacy and compliance.

We implemented 9 distinct roles mapped to specific stages of the operational workflow, from intake coordinators and care managers to billing managers and physicians. Every role has tightly scoped permissions, ensuring staff access only to what is relevant to their work and that sensitive actions are restricted to the right reviewers.

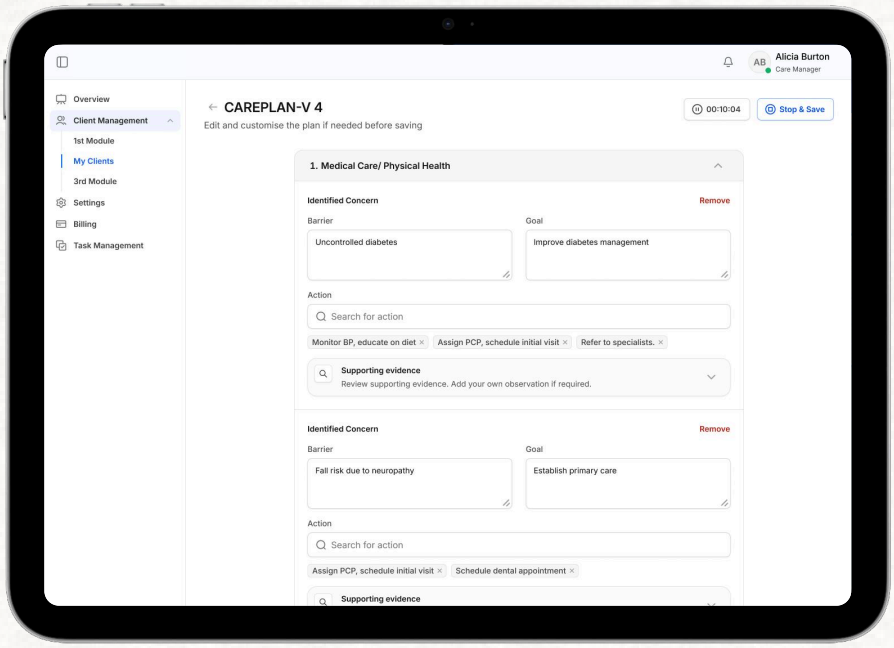


Structuring The Patient Lifecycle: Onboarding, Assessment, And Care

Patient management was the heart of the platform, split into two clearly defined stages to ensure explicit handoffs and clear accountability.

Intake coordinators handle onboarding through a structured form paired with an in-app interaction recorder. Consent is captured before recording begins, resolving a long-standing problem in which intake conversations were lost or summarized inconsistently. Once onboarded, the patient profile moves through a defined lifecycle, with a patient Journey view providing any authorized user with a time-stamped history of every event from the assessment onward.

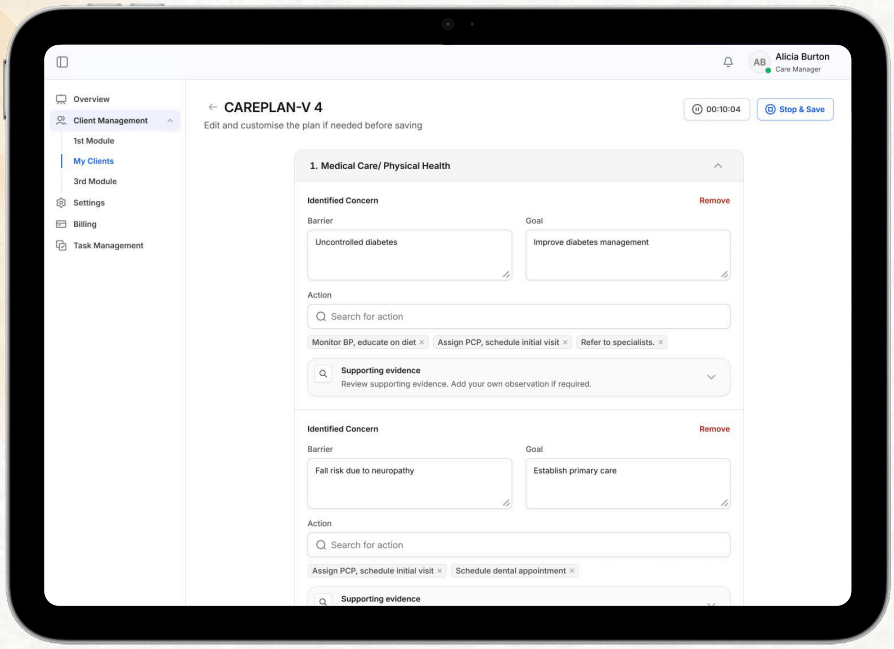
After onboarding, the patient is assigned to a care manager who owns the assessment stage. The system supports MCP-specific assessment flows: forms, required fields, and downstream billing rules adapt automatically based on the payer. This eliminated one of the biggest sources of rejected claims: using the wrong documentation template for the wrong payer.



Building An MCP-Aware Billing Engine With Office Ally Integration

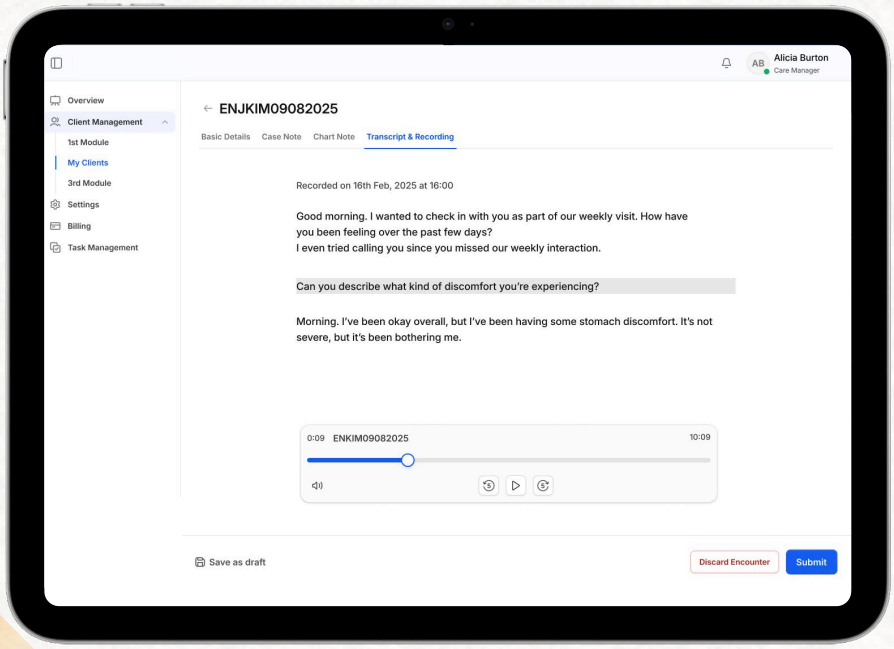
Billing was the most operationally painful area, and we focused the most engineering effort there. We built a configurable billing engine that defines rules per MCP and applies them automatically when claims are generated. Billing teams work through structured queues mirroring the claim lifecycle, with pre-billing readiness checks that flag missing documentation or mismatched codes before a claim is ever sent.

The platform connects to a clearing house partner to support the full claim settlement lifecycle, from initial submission and eligibility verification through denials, resubmissions, and remittance processing. Every billing action is logged with timestamps and user attribution, giving the team an audit-ready trail for internal reviews and compliance audits.



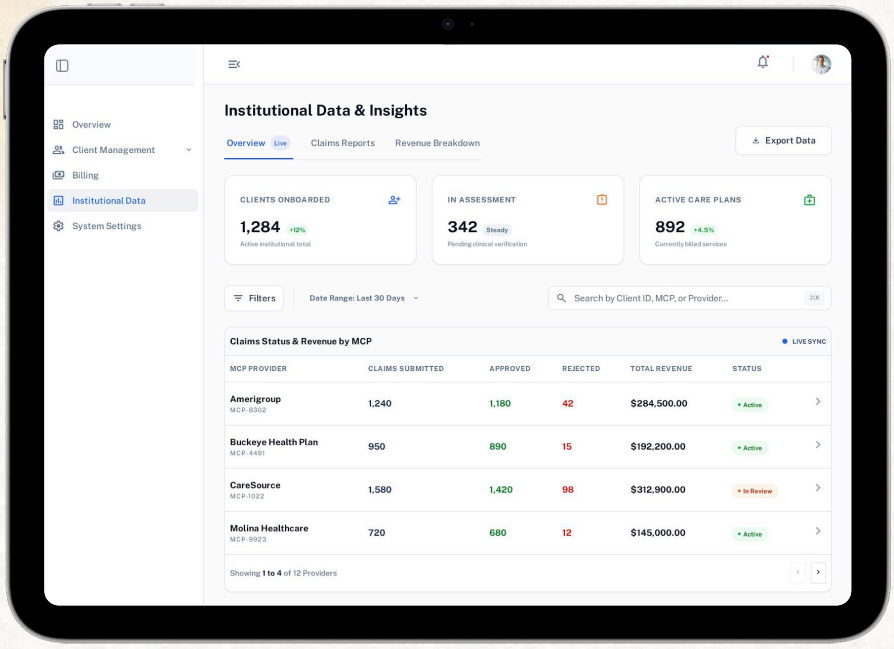
Reducing AI Costs With Self-Hosted Transcription And Care Plan Generation

Two AI capabilities were core to the platform: transcription of recorded patient interactions and assistance with care plan generation. Both were initially scoped against third-party APIs, but at the volumes the organization was projecting, third-party costs would have grown into a meaningful operating expense over time. We proposed a self-hosted approach. For speech-to-text, we deployed Whisper on the client's infrastructure, enabling the team to obtain accurate transcription of intake and assessment conversations without per-minute API charges. For care plan drafting, we integrated Gemini into a controlled flow in which care managers receive a structured, suggested plan based on assessment data, which they can then review, edit, and finalize. The combination kept clinical control firmly in the care manager's hands while removing the blank-page problem that slows documentation. Hosting these models internally also strengthened the privacy posture, as recordings and assessment data did not have to leave the client's environment for processing.



Driving Data-Backed Insights Across Care And Billing

Before the platform, generating any report meant pulling data from spreadsheets by hand. We built a reporting layer giving leadership real-time visibility into patients onboarded, care plans active, and claims submitted, approved, and rejected by MCP. Dashboards are customizable for funder-specific reporting requirements, which vary significantly in a non-profit context.



IMPACT

The platform unified healthcare operations into a single, role-based system for intake, care management, and billing teams. Manual onboarding and assessment processes were replaced with guided MCP-aware workflows that capture consent, include consent-captured recordings, automated transcription, and AI-assisted care plans, reducing administrative workload and improving care delivery. On the billing side, automated validation, MCP-specific rules, and Office Ally integration created a transparent, auditable claims process that reduced errors and improved revenue visibility.

NUMBERS THAT SHOWCASE THE IMPACT

9

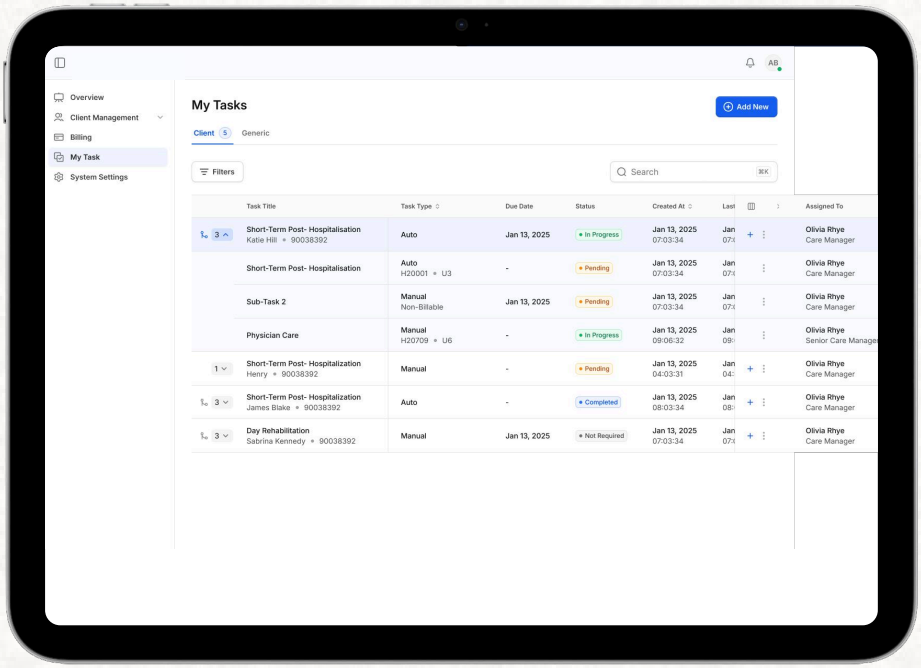
Distinct user roles operationalized

300+

Managed care plans supported (Kaiser, Health Net, PHC)

1

Unified platform for intake, care, and billing



HAVE A SOFTWARE PRODUCT VISION IN MIND?

Set up a personalized consultation with our technology expert

Let's Talk ↗

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