



HQ PARTNERS

Case Study

Healthcare Fintech — Patient Payment Solutions

From Chaos to Prototype

Three years. Three million dollars. No prototype. No design. No requirements. Until a different approach changed everything.

3 yrs

Previous failed attempts

\$3M+

Spent with no result

8 mo

To working prototype

0→1

Nothing to Beta

THE SITUATION

A healthcare fintech startup had spent three years and three million dollars trying to build a payment solution for uninsured and underinsured patients, people who needed medical care but couldn't afford it. The vision was genuinely meaningful. The execution had never gotten off the ground.

When the CTO brought in outside help, he wasn't looking for another consultant with a checklist. He needed someone who could break down and assess what had failed previously and why so those pitfalls could be avoided. That is exactly what happened.

What They Had After Three Years:

No prototype · No design · No requirements · No validated partnerships · No proof the idea would work

THE CHALLENGE

Previously, no process map had been created to identify the pieces. No mapping had been done to see how those pieces fit together. No validation had been done to ensure the necessary participation from hospitals, insurance providers, and funders.

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And no one had asked the most important question: Does this actually work in the real world?

THE APPROACH: THREE DAYS THAT CHANGED EVERYTHING

Before a single requirement was written (or rewritten), or a line of code was touched, three days were spent in a conference room with large sheets of paper taped around every wall.

The questions were simple and direct:

- What do we want this product to do?
- Who are all the players we need to make it work?
- What do we build ourselves and where do we decide to partner?
- What does the end-to-end process flow look like?
- What had failed before, and why?

By the end of those three days the walls told the whole story: databases, process flows, integration points, partner requirements, and a clear picture of exactly what needed to be built and who needed to be involved to build it.

That was the foundation. Everything else was built on top of it.

THE BUILD

With the process mapped and the design agreed to, it became imperative to follow a build and delivery process that would result in the successful deployment of an MVP that could be validated in the real world. Several key considerations were agreed to and followed as the product evolved:

- Technology would partner with and get input from sales, finance, and marketing as the product was built — ensuring every dimension of the business was represented in every decision
- A partnership with an HL7 healthcare data provider was critical to ensuring HIPAA compliance and standardized data exchange with hospital systems
- Amazon Web Services cloud architecture would be used to ensure a secure, scalable, and compliant infrastructure
- Bank integration would be curated carefully to ensure patients were receiving low interest funding options that were realistic and accessible
- Credit agencies would need to be engaged to ensure proper credit assessments and reporting for each patient
- Integration with insurance providers was critical to ensure proper adjudication of each claim — even for uninsured patients who needed billing codes for the process to work



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- A clear understanding of hospital systems and their Revenue Cycle Management was imperative to the success of billing and payments end to end
- SDLC management processes would be used to ensure active management and monitoring of milestones and dates throughout the build

THE DELIVERY

Eight months from the discovery session in that conference room a fully functioning integrated prototype was ready for Beta.

The MVP was deliberately scoped and focused:

- One hospital
- One insurance provider
- One funding partner
- One admission window, scheduled services only
- A carefully selected beta patient group

Proving the concept worked was only one of the objectives. The second, and equally as important, was to determine what worked well, what needed to be adjusted, and what simply did not work. That feedback would be incorporated back into future iterations to ensure the product design evolved and continued to include its most critical components.

WHAT FOLLOWED

With the success of the beta prototype, the follow-on release was scoped to introduce additional complexity — higher risk credit profiles, additional admission windows, and expanded funder relationships. Each phase building deliberately on the last, validating before scaling.

When that deliverable was completed, the consulting aspect of this program began to wind down. Handoff was done to the permanent internal team — a team that had been involved in every step of the build and therefore understood not just what had been delivered, but why every decision had been made. They didn't inherit a product. They owned one.

The most critical piece of the engagement closeout was ensuring the handoff was clean and that the team truly was able to own the product and process when the consulting team stepped away. And in that — we succeeded.

THE TOUCHSTONE DISCOVERY METHOD IN ACTION

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This engagement — years before the methodology had a name — reflects every phase of the Touchstone Discovery Method.

01

Discover & Understand — Three days of structured discovery before a single requirement was written. What does this product need to do? Who are the players? What do we build and where do we decide to partner with external providers? What had failed before and why? The entire product architecture emerged from honest, structured conversation, not from assumption.

02

Design & Plan — A complete product design was mapped on paper and included database designs, process flows, integration points and partner relationships. Requirements were defined, both business and functional. The delivery was schedule built and used SDLC management end to end. The TO-BE vision was documented and agreed to before anyone touched a keyboard.

03

Build & Transform — A permanent internal team was involved in every step of the build, so when the engagement ended, everything belonged to them. The product, the architecture, the processes, the partnerships, and the knowledge to keep building without outside help was all left with the team.

04

Review & Adjust — With each delivery phase planned to be built deliberately on the success of the one before it, the product would expand in complexity and depth only after each previous stage was validated and feedback incorporated back into the design.

The Lesson

Three years and three million dollars produced nothing.

Eight months of honest discovery, structured design, and disciplined delivery produced a working integrated prototype, tested with real patients in a real hospital, solving a problem that genuinely mattered.

The difference was not money. It was not team size. It was not technology.

It was starting with the right questions.

That is the Touchstone Discovery Method. Every time.