

Prior Authorization Consulting

Automating a time-consuming, resource-heavy process

Payers often require prior authorizations (approvals) before agreeing to reimburse certain procedures. To accomplish this, specific information must be submitted by the provider and a precise process followed. This is a time-consuming, error prone, manual effort. With Prior Authorization Consulting, these challenges are mitigated. The process for obtaining prior authorizations is automated, utilizing a software robot for fast, accurate, and timely submission.

Prior authorizations are required for many procedures performed in the outpatient setting such as CT, MRI/MRA, Nuclear cardiology, Chemotherapy, Radiation Oncology, and stress echocardiograms. Providers must obtain prior authorization approval from Commercial Payers before providing services to the patient. Payers can refuse approval on the basis of medical necessity, but a significant number of rejections are simply due to incomplete or incorrect form submission.

An innovative approach

Our approach to automation of the prior authorization process involves several steps

Assessment: Identification of key procedures requiring prior authorization determines where automation can deliver the greatest value.

Analysis: An analysis of the workflows associated with the key procedures is conducted to understand the steps associated with the prior authorization process.

Development: Based on the documented workflow, the software robot is programmed to complete each of the steps, thereby automating the process. Testing is performed upon completion of the development process.

Implementation: Upon successful completion of the development step, the prior authorization software robot will be implemented.

Support: Once implemented, the automated process and software robot is supported to address any operational issues.

Key Benefits

- Enhanced operational efficiency
- Better utilization of scarce healthcare
 workforce resources
- Improved continuity of care
- Increased accuracy of information provided to payers
- Reductions in abandoned care
- Enhanced quality of care

Expected results*

Our consultants help support improved operational efficiency, quality of care, and financial performance. Results from prior authorization automation include:*

- Reduced workforce hours required to complete prior authorizations
- Enhanced continuity of care
- Decreased time to complete and submit prior authorizations
- Improved accuracy of information submitted to payers

Learn more

Through collaborative and people-focused engagements, Philips can help develop innovative solutions to solve your most complex challenges of care delivery. We can help you achieve meaningful and sustainable improvements in clinical excellence, operational efficiency, care delivery, and financial performance to improve value to your patients. For more information, please visit **www.philips.com/healthcareconsulting.**

* Results from specific client engagements are not predictive of results in other situations. Results in other situations may vary.