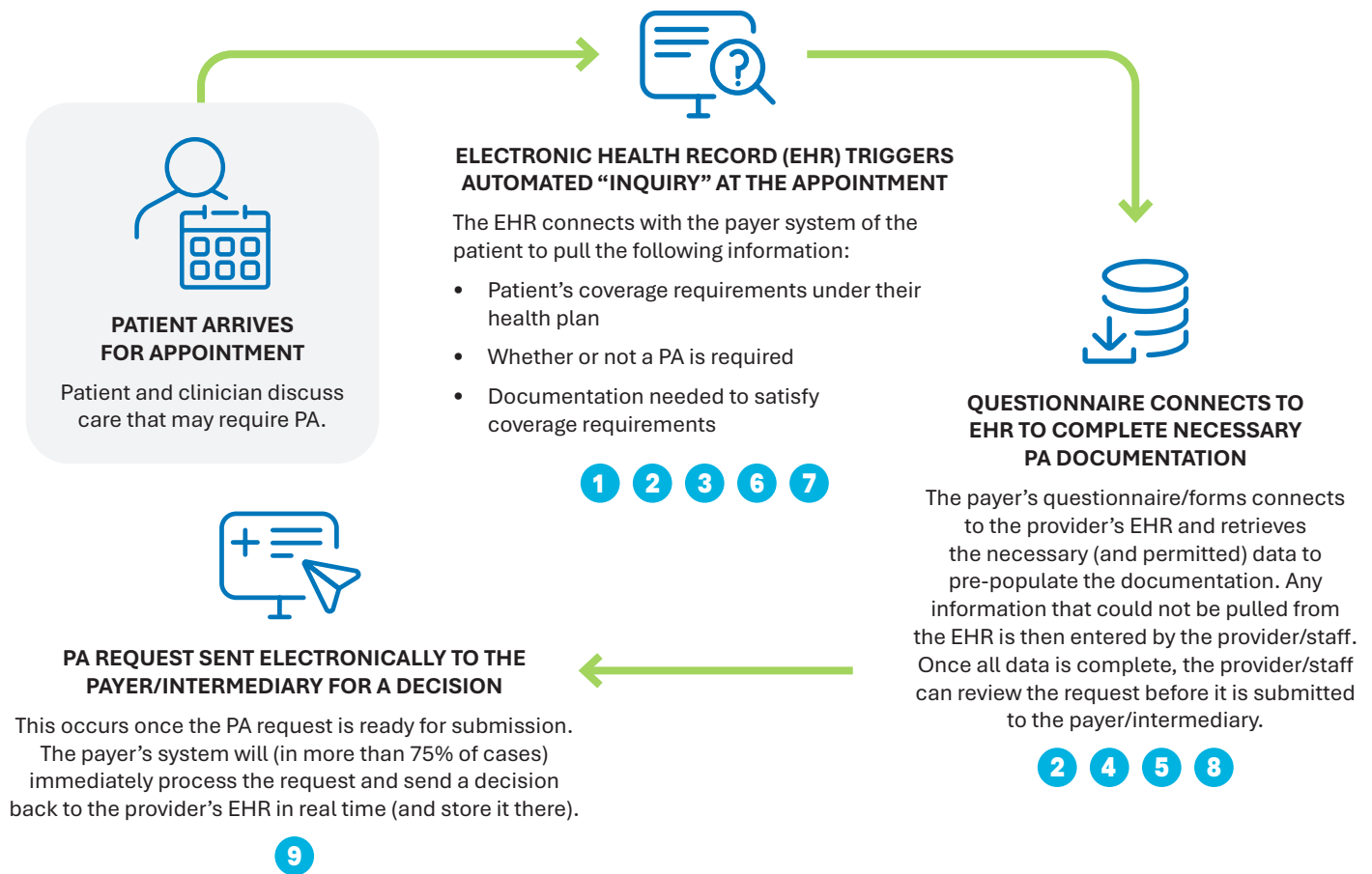# PRIOR AUTHORIZATION (PA): An Automated Workflow

VALUE PROPOSITIONS

- Provide immediate coverage requirements
- Reduce administrative burden
- Decrease PA request volume
- Reduce denial rates
- Minimize revenue losses
- Comply with specific federal PA requirements
- Improve revenue cycle integrity
- Ensure minimum necessary clinical data sharing

SAMPLE AUTOMATED WORKFLOW

PATIENT ARRIVES FOR APPOINTMENT

Patient and clinician discuss care that may require PA.

ELECTRONIC HEALTH RECORD (EHR) TRIGGERS AUTOMATED "INQUIRY" AT THE APPOINTMENT

The EHR connects with the payer system of the patient to pull the following information:

- Patient's coverage requirements under their health plan
- Whether or not a PA is required
- Documentation needed to satisfy coverage requirements

1 2 3 6 7

QUESTIONNAIRE CONNECTS TO EHR TO COMPLETE NECESSARY PA DOCUMENTATION

The payer's questionnaire/forms connects to the provider's EHR and retrieves the necessary (and permitted) data to pre-populate the documentation. Any information that could not be pulled from the EHR is then entered by the provider/staff. Once all data is complete, the provider/staff can review the request before it is submitted to the payer/intermediary.

2 4 5 8

PA REQUEST SENT ELECTRONICALLY TO THE PAYER/INTERMEDIARY FOR A DECISION

This occurs once the PA request is ready for submission. The payer's system will (in more than 75% of cases) immediately process the request and send a decision back to the provider's EHR in real time (and store it there).

9

WORKFLOW BENEFITS

1. Increase likelihood and timeliness of patient receiving the ordered service
2. Delegate request submission task to provider staff/PA staff as desired
3. Reduce faxes, phone calls, or interactions with individual payer portals
4. Decrease manual data identification and entry within EHR
5. Eliminate duplication of data entry associated with payer portals
6. Create predefined and auditable data sharing requirements
7. Reduce unnecessary PA requests
8. Reduce incomplete PA request submissions
9. Decrease decision turnaround time

Massachusetts Health Data Consortium