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Revenue Cycle:
Reimagining for a
More Efficient Tomorrow

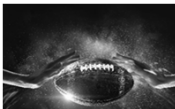


A Touchless Real-Time Authorization Process Is Here

Friday, January 18th, 2019
Gillette Stadium Clubhouse

Murali Athuluri
New England Health Exchange Network

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Industry Efforts

About 190,000 results (0.25 seconds)

CMS expands prior authorization program
HME News - Jun 4, 2018
WASHINGTON - CMS will roll the standard power mobility device codes that are currently part of a PMD Prior Authorization Demonstration in ...

CMS Continues Power Mobility Prior Authorization Demonstration
HomeCare - 8 hours ago
This rule moves the HCPCS in the PMD PA Demonstration to the national Prior Authorization program beginning September 1, 2018 and ...

Senate bill calls for Medicare Part D electronic prior authorization
Health Data Management - May 23, 2018
Three U.S. senators have introduced legislation that would provide for the use of electronic prior authorization in Medicare Part D, a process ...

GAO: Medicare DME Prior Authorization Programs are Effective
HealthPayIntelligence.com - May 22, 2018
GAO: Medicare DME Prior Authorization Programs are Effective ... By 2016, CMS had fully implemented proposed prior authorization programs ...
CMS should extend prior authorization pilots, GAO says
Healthcare Dive - May 22, 2018
View all

Cut prior authorization hassles through automation, EHR integration
American Medical Association - May 18, 2018
The burden insurance company prior authorization (PA) requirements put on medical practices is rising significantly and causing a negative ...

PriorAuthNow bags \$10.5M for automated prior authorization services
MobilHealthNews - May 15, 2018
Columbus, Ohio-based PriorAuthNow, maker of an electronic prior authorization platform, has closed a \$10.5 million Series A funding round.

The Da Vinci Project by CMS

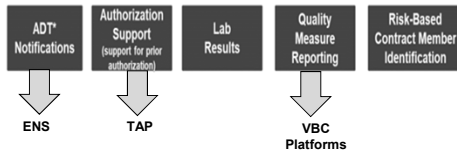
Phase 1 (Mar 2018 - Mar 2019)



Phase 1.5 (Jul 2018 - Jul 2019)

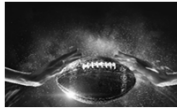


Phase 2 (2019+)



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Industry Efforts

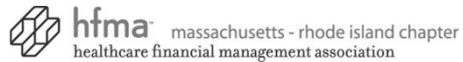
- **Health Care Leaders Collaborate to Streamline Prior Authorization and Improve Timely Access to Treatment**
- **We, the CAQH CORE Board, are writing to lend our voice in support of the Consensus Statement on Improving the Prior Authorization Process**
- **MA Chapter 224 of the Acts of 2012 directs the Division of Insurance (DOI) to develop standardized and electronic prior-authorization forms**



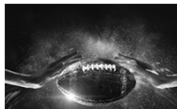
Consensus Statement on Improving the Prior Authorization Process

CAQH

COMMONWEALTH OF MASSACHUSETTS
Division of Insurance



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Consensus Statement

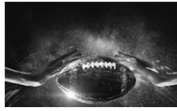


According to the [Consensus Statement](#), these health care leaders will work together to:

- **Reduce the number of health care professionals subject to prior authorization requirements** based on their performance, adherence to evidence-based medical practices, or participation in a value-based agreement with the health insurance provider.
- **Regularly review the services and medications** that require prior authorization and eliminate requirements for therapies that no longer warrant them.
- **Improve channels of communications** between health insurance providers, health care professionals, and patients to minimize care delays and ensure clarity on prior authorization requirements, rationale, and changes.
- **Protect continuity of care for patients** who are on an ongoing, active treatment or a stable treatment regimen when there are changes in coverage, health insurance providers or prior authorization requirements.
- **Accelerate industry adoption** of national electronic standards for PA and improve transparency of formulary information and coverage restrictions at the point-of-care.



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Tackling Authorizations

Real-time Integrated Prior Authorizations that Simplifies Payer-Provider Communications for All Referral Transactions Including:

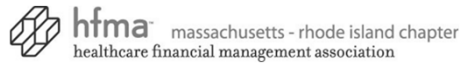
- All Medical / surgical procedures
- Specialty
- Behavioral health
- Prescriptions – Infusion Drugs, High Cost/High Risk Medications
- Imaging, DME and other services

Using Variety of Care Guidelines:

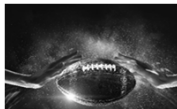
- InterQual
- Milliman
- Custom

For:

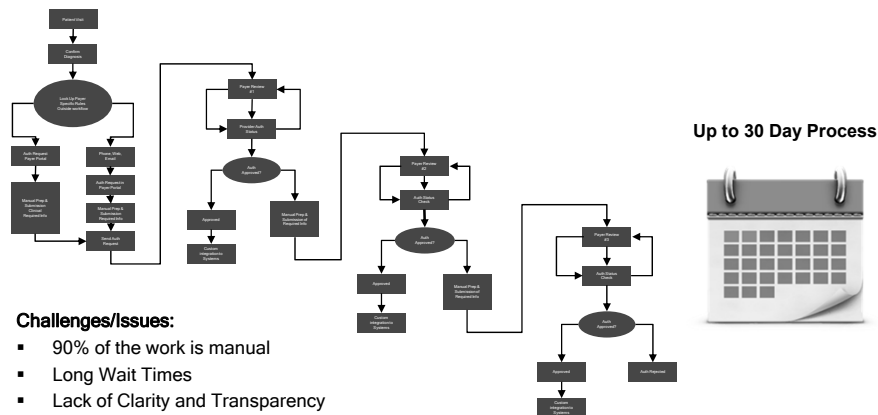
- Inpatient
- Outpatient
- General Office Services



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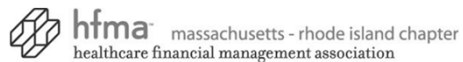


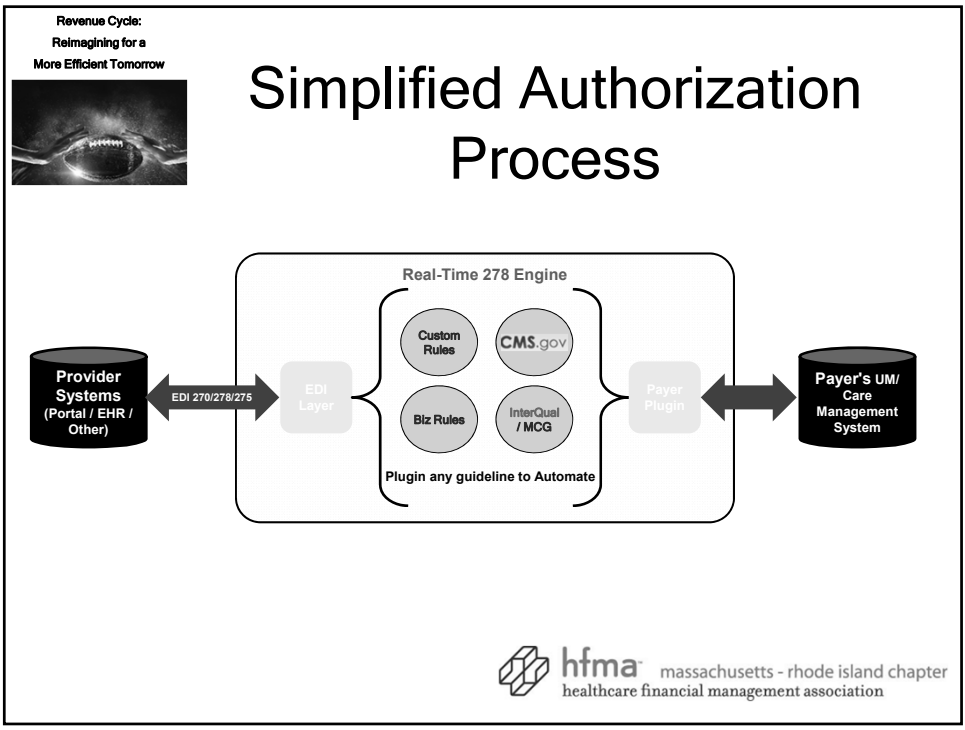
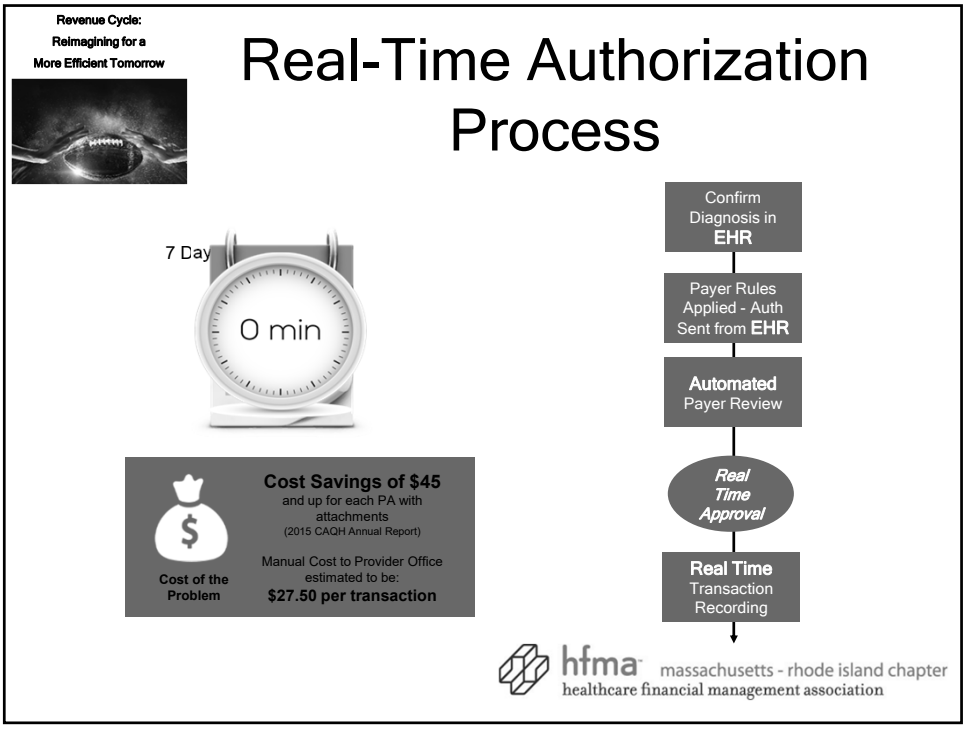
Current Authorization Process



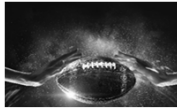
Challenges/Issues:

- 90% of the work is manual
- Long Wait Times
- Lack of Clarity and Transparency
- Long Response Times
- Compromised Person Satisfaction
- \$\$\$ Spent, Time Lost



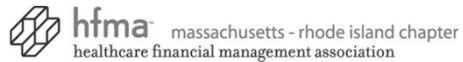


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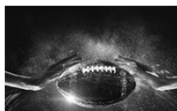


Workflow Efficiencies

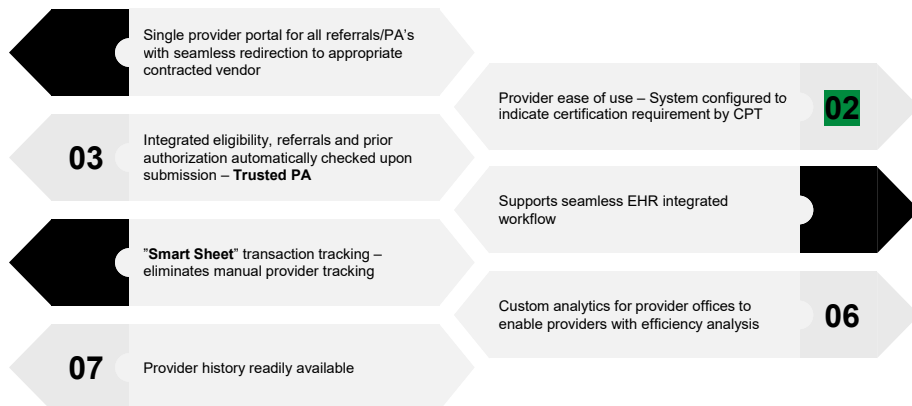
- ✓ Improved Productivity – Automated Batch Process to Check PA
- ✓ Improved Provider Office Communication – Smarter Smart Sheet with Relevancy
- ✓ Delivered Referral / PA Decision Traceability – History Tracking, Timestamps & Authenticated
- ✓ Delivered Trusted PA – Certified & Adjudicated Real-Time Payer Response



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Effectively Addressing Provider Adoption



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Effectively Addressing Health Plan Adoption



Medical Management

- ✓ Rules Configuration - Business & Clinical
- ✓ Fully Automated Prior Authorization
- ✓ Product Integration & Benefit Counters
- ✓ Workflows & Clinical Attachments with Images
- ✓ Provision External Users
- ✓ Clinical Transitions
- ✓ Authorization Management including Bundled Payments / Cases
- ✓ Concurrent Reviews



Technology Enabled

- ✓ EDI Transaction Support - 278, 275, 215, 216 & 217
- ✓ Activity Traceability & Auditability
- ✓ Data Extract, Transformation & Loading
- ✓ Integration with InterQual, and Custom Guidelines



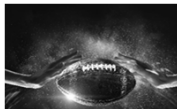
Communications

- ✓ Email Notifications
- ✓ Adhoc Letter Generations
- ✓ Exception & Appeal Processing
- ✓ CH224 Compliant



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Automated PA Workflow

Provider sends patient demographics, diagnosis codes, and procedure codes to the Authorization Engine using EDI 278

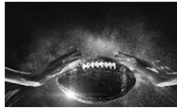
Authorization Engine responds with a set of questions based on their policies using EDI 278 and EDI 275 attachment

Provider responds with appropriate answers or documents

Authorization Engine responds with **Certified, Pended** or **Not Certified** response

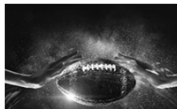


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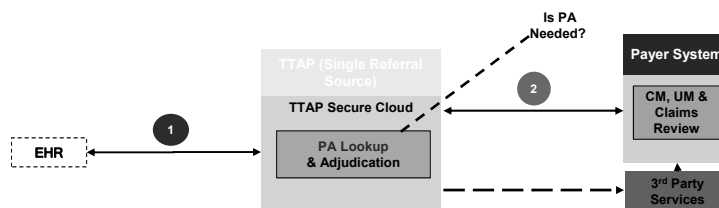


6 Steps to Trusted PA

- **Single Source for Referrals, Authorizations, Inquiries & Notifications (RAIN)**
 1. Verify Member Eligibility
 2. Verify need for PA (Lookup Service) for this patient including Notice of Admission (NOA)
 3. Determine relevant medical necessity based on member / provider & payer benefits.
 4. Verify status of a referral / authorization request (278X215)
 5. Send Notification of Admission (278X216)
 6. Deliver 'Trusted PA' Ex: Eliminate Accumulator Gap

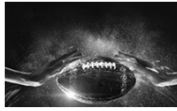


Provider Context



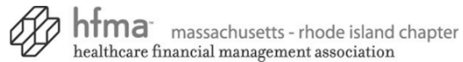
- 1 Fully Integrated TTAP solution within EHR for all referrals
- 2 Real-time Trusted PA adjudication with Payer System

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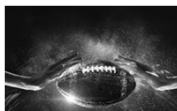


Provider Integration Options

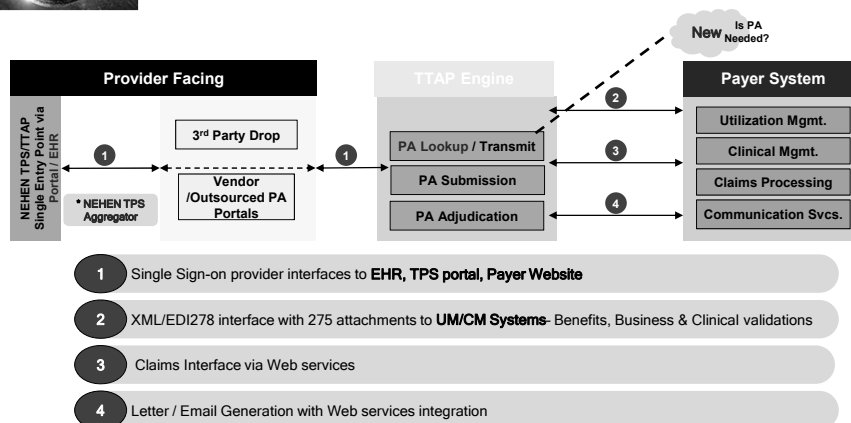
- **Provider Portal Single Sign on (SSO) Integration (URL launch)**
 - Using agreed upon protocols such as SAML 2.0, Authenticate and digests pre-defined users
 - Simply renders the provider input elements within your application
- **Hybrid Integration using JSON Web Services & SSO**
 - Uses **standard EDI (278/275) request / response**
 - Uses **JSON WS** to walk the question / decision tree based on user input
- **Batch mode extraction** (*Partners Healthcare pilot approach*) with / Without SSO
 - Patient cases scheduled for the upcoming days that may require Prior Authorization are passed through the **NEHEN-TTAP engine**, with a response based on member/plan benefits, provider/plan relationship and medical necessity guidelines
 1. Those that **do not require PA**, (No Authorization required)
 2. Those that **can be auto-authorized**, and
 3. Those that **need additional information** in the portal to complete the PA's



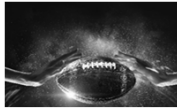
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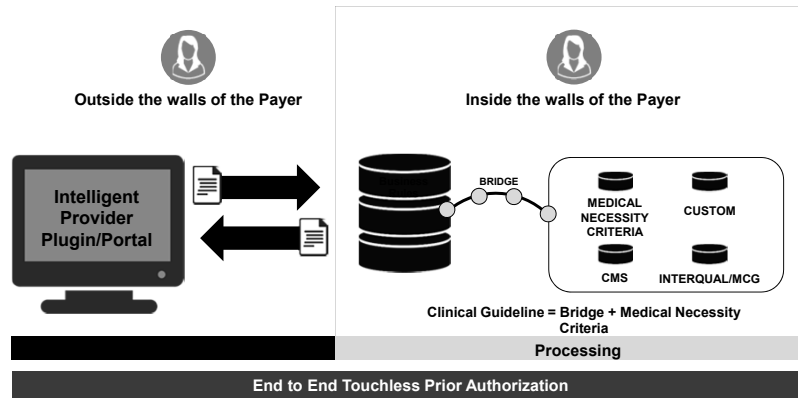
Health Plan Context




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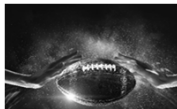


E2E Touchless Prior Authorization (Demo)



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Why Automated PA Works?

- End-to-end, real-time, touchless, prior authorization solution
- EDI 278-275 standards-based solution
- Agnostic integration with payer and provider systems
- Ability to automate ANY clinical and business rules
- Payers/Provider user configurable self edit and deploy guidelines directly

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A Touchless Real-Time Authorization

Thank You