

e-guide

# AI & Automation for PBMs:

Cutting Costs, Protecting Revenue,  
and Differentiating Service



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Pharmacy Benefit Managers (PBMs) sit at the center of today's healthcare economy—ensuring members get the medications they need while balancing costs, outcomes, and contracts. Yet manual prior authorizations and fragmented benefit verification delay therapies and frustrate prescribing providers and members alike.

**Medication non-adherence remains stubborn—nearly 50% of Americans don't take prescriptions as directed (CDC)—driving \$500B in avoidable costs and threatening rebate flows (IMS).**

Meanwhile, PBM call centers strain under the volume of member needs for repetitive status checks, prior authorization guidance and refill support.

These pressures are compounded by ineffective communication methods such as phone calls, paper forms, and disjointed portals, which slow workflows, drive up costs, and erode provider and member trust.

AI-powered automation offers a practical path forward. By automating prior authorization, benefit verification, and refill/adherence workflows, PBMs reduce inbound call volume and free staff while improving time-to-therapy. Just as importantly, proactive, HIPAA-compliant engagement with members and providers enables white-glove programs (e.g., GLP-1 weight management) that help PBMs win and retain health insurer and employer contracts.

This guide explores how AI and automation unite stakeholders through integrated workflows, enabling more efficient, compliant, and effective healthcare delivery.

# Challenges Facing PBMs

Approaches built on manual processes and fragmented systems fail to deliver the coordinated, efficient experience needed to advance PBM innovation. These limitations manifest in four key challenges:

## 1. Data Silos and Fragmented Systems

PBMs still depend on fragmented systems across payers, providers, pharmacies, and members. Benefit verification and prior authorizations often move by fax, phone, or portals—slowing access and frustrating stakeholders. The CAQH Index shows that moving these transactions to electronic workflows can save minutes per request and billions in annual administrative costs. AI-powered automation eliminates silos, streamlines handoffs, and accelerates therapy access while reducing friction with providers.

## 2. Manual Processes and Workflow Bottlenecks

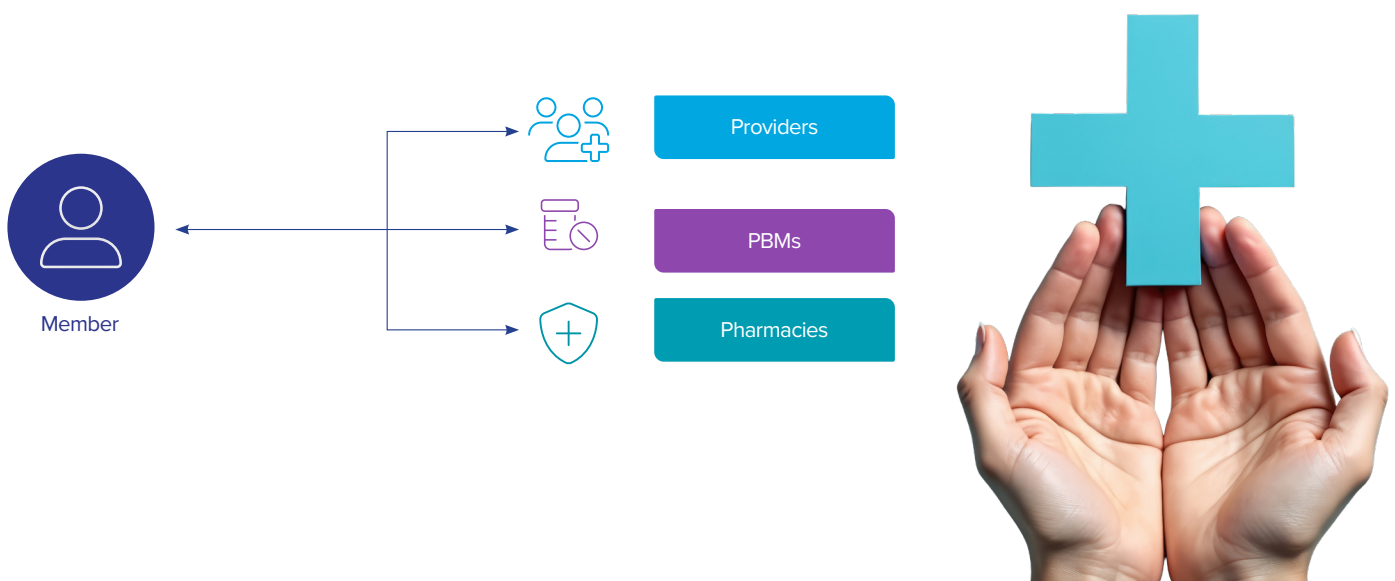
Call centers and PA teams spend hours on manual data entry, phone calls, and status checks. Each call center FTE costs \$33K–55K annually, yet much of their work is repetitive and non-differentiating. Automation removes bottlenecks, frees staff capacity, and accelerates therapy starts.

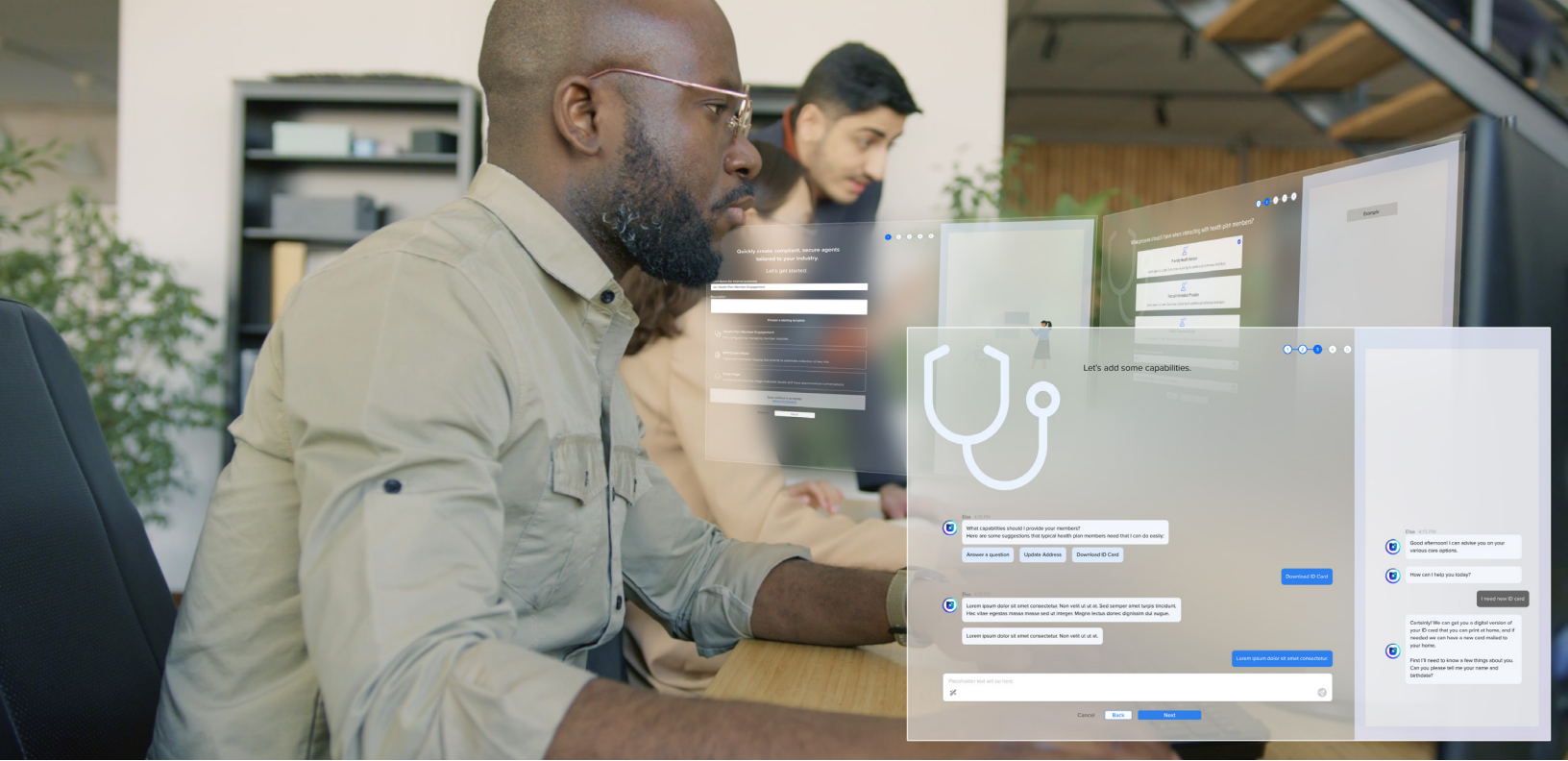
## 3. Limited Engagement Capabilities

Portals and one-way communications leave providers and members waiting for answers. When refill reminders or benefit updates require phone calls, adherence drops and satisfaction erodes. AI-powered outreach delivers timely, HIPAA-compliant updates across preferred channels, reducing inbound volume and improving experience.

## 4. Inability to Scale and Adapt

Specialty drug growth and rising regulatory oversight demand scalable PBM operations. Manual workflows cannot flex with demand spikes or new benefit designs. Automation scales engagement and workflow orchestration without linear headcount growth, allowing PBMs to adapt quickly and stay competitive.





## The Power of AI-Powered Automation for PBMs

PBMs lose millions each year to inefficiencies, churn, and administrative overhead. AI transforms fragmented workflows into streamlined systems that cut costs, accelerate therapy access, and differentiate service offerings in a competitive market.

Customer Experience Automation (CXA), a software category that blends user-focused technology, domain specific AI, and process automation, can reshape PBM communication. Through automated workflows and AI driven personalization, Ushur's CXA platform addresses critical gaps, delivering key improvements:

### Lower Cost for Call Centers:

Call centers remain a major expense for PBMs, yet much of the volume comes from repetitive benefit checks, PA status updates, and refill reminders. Automating these tasks cuts inbound and outbound calls, reduces handle times, and frees staff for higher-value clinical support—lowering costs while improving provider and member experience.

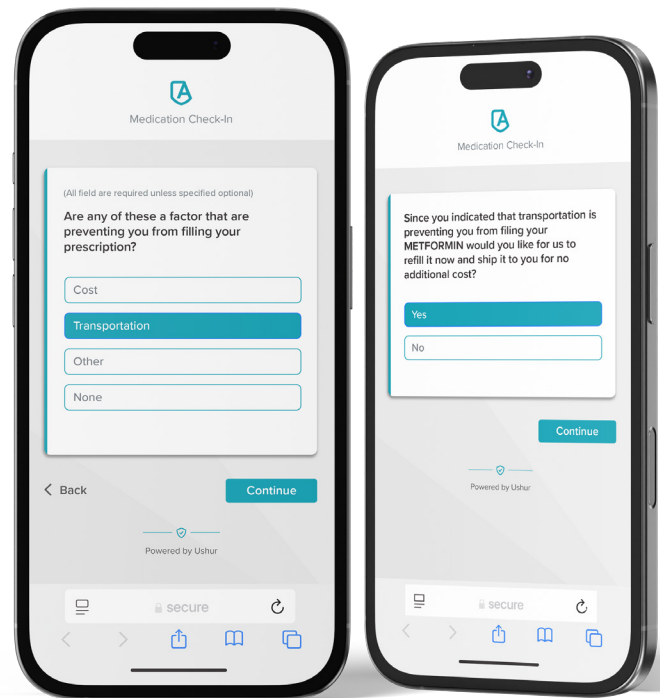
### Service Differentiators:

PBMs win and retain contracts by demonstrating value beyond transactions. AI-powered automation enables proactive, personalized communication that supports white-glove programs such as GLP-1 weight management. These high-touch services improve outcomes, strengthen plan and employer relationships, and create a clear competitive edge.

# Key Features of AI-Powered Automation Platforms

## Automated, Personalized Workflows:

- **Prebuilt templates:** Ready-to-use, industry-specific workflow templates for medication adherence, prior authorization processing, closing gaps in care and more to ensure consistency and reduce implementation time.
- **Dynamic questionnaires:** AI-powered questionnaires that adapt based on responses for applications like side effect monitoring and adherence barrier assessment.
- **Automated notifications:** Coordinated communications across the ecosystem for medication refills, prior authorization status, and benefit updates.



## Omnichannel Engagement and Accessibility:

- **Preferred channels:** An omnichannel approach to ensure stakeholders are reached through their preferred channels, increasing engagement and simplifying communication.
- **Accessibility:** Compliance with Americans with Disabilities Act (ADA) Web Content Accessibility Guidelines (WCAG) and Section 508 standards, providing multilingual support and supporting inclusive access across diverse populations.

## Personalization and Conversational AI:

- **Domain-specific AI large language models:** In healthcare, there is no tolerance for AI hallucinations, so the use of domain- and company- specific documentation and information at the core of AI large language models (LLMs) is key to accuracy and reliability.
- **Tailored messaging:** Context-aware communication based on factors including stakeholder role, patient condition, and treatment requirements.
- **Intelligent automation:** AI-driven support for complex workflows including prior authorization, benefit verification, and care gap closure.
- **Conversational interfaces:** Interactive support for medication guidance, billing inquiries, and more.



## Compliance: A Cornerstone of Safety and Trust

Compliance is crucial to ensuring safety, maintaining trust, mitigating risks, and staying aligned with constantly evolving laws and regulations. Organizations must strike a delicate balance between driving innovation and meeting regulatory requirements across the entire value chain.

### Key Compliance Challenges

- **Ensuring HIPAA Compliance Across Multiple Channels**

Healthcare communications involve multiple stakeholders and channels, making HIPAA compliance a significant challenge. Secure communication protocols are vital to protect sensitive data and meet strict regulatory standards.

- **Meeting Digital Accessibility Standards**

AI-powered tools must comply with ADA (WCAG and Section 508) guidelines to ensure accessibility for all patients with disabilities. This compliance framework fosters equitable access to healthcare information and services, regardless of individual abilities.

- **Adhering to Legal Standards for Content and Messaging**

Strict legal requirements govern content, messaging, and patient consent throughout the healthcare journey. Compliance with complex regulations is necessary to avoid potential legal complications.

- **Protecting PHI and PFI Through Data Encryption**

Data flows between multiple entities—pharma companies, payers, providers, pharmacies, PBMs, and healthcare consumers—which makes safeguarding PHI and PFI paramount. Robust encryption and seamless data integration are critical for meeting privacy standards and protecting sensitive information.



## Building a Robust Compliance Strategy

To ensure compliance, organizations must integrate technology, processes, and training into a comprehensive strategy. Key aspects include:

### Data Security and Privacy

Organizations must protect sensitive information. This includes implementing HIPAA- and PCI-compliant messaging across all communication channels and creating structured frameworks for data protection. These frameworks specify who can access patient information, how data moves between healthcare systems, and how long records are maintained. Secure electronic consent processes ensure patient authorization is properly documented and managed.

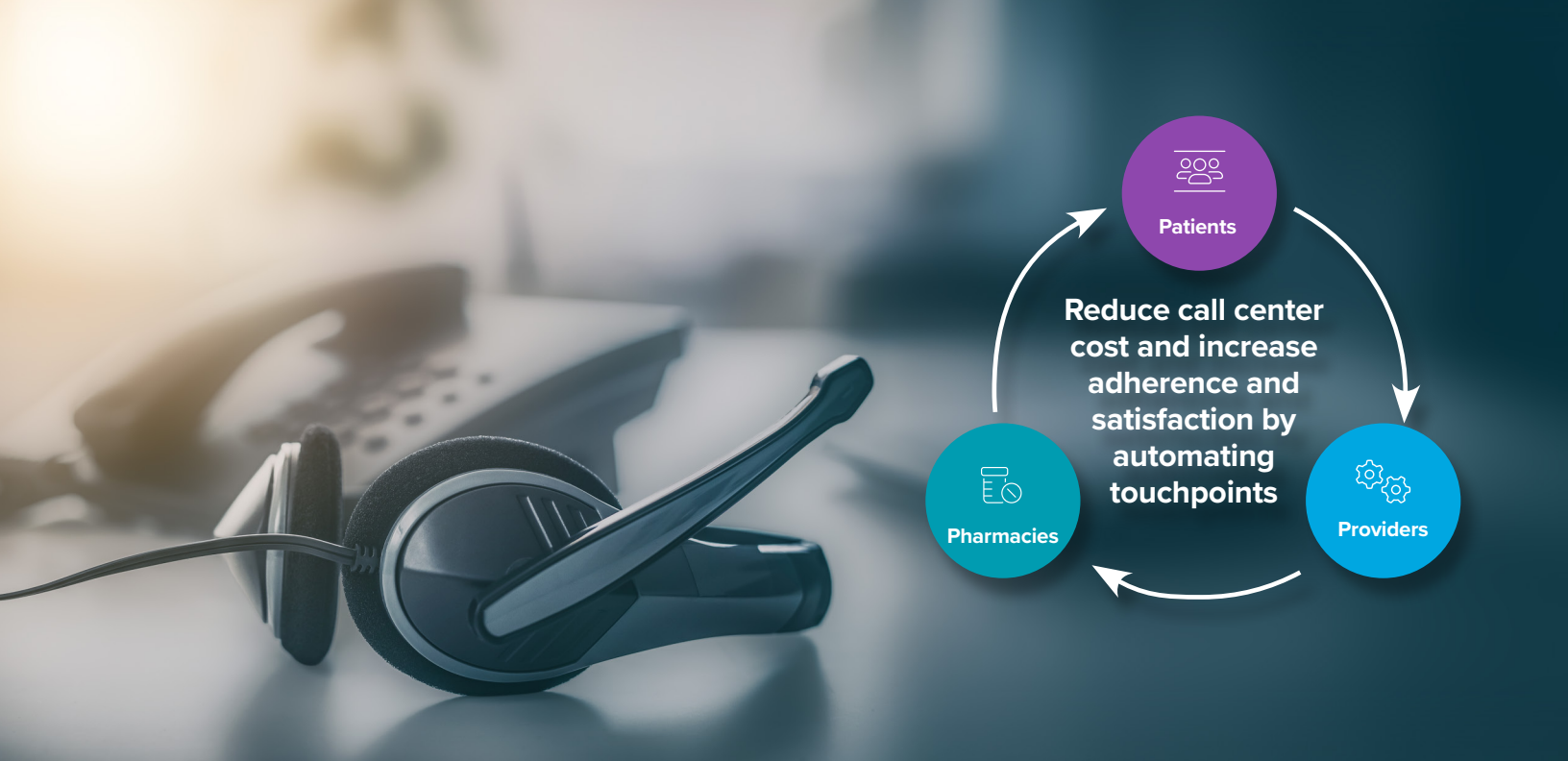
### Accessibility

Healthcare technology must be easy to use for people with different abilities, language preferences, and ways of accessing information. It should comply with ADA (WCAG and Section 508) standards, ensuring features like screen readers, keyboard navigation, and language options are available to all users. Inclusive design practices help organizations serve their entire patient population while meeting regulatory requirements.

## Building and Maintaining Compliance Excellence

Compliance best practices include:

- **Conducting risk assessments:** Perform thorough risk assessments before implementing AI-powered tools. Evaluate the entire value chain to identify potential vulnerabilities related to AI model accuracy, data security, messaging, and accessibility.
- **Implementing clear governance policies:** Establish clear data governance policies across all stakeholders involved, ensuring secure handling of PHI, PFI and other sensitive data. This includes defining roles, implementing access controls, and tracking data usage to meet privacy standards.
- **Prioritizing transparency:** Ensure transparency and explainability in AI decision-making processes. This is critical for compliance and building trust across the entire ecosystem.



## Bridging the Pharmacy Ecosystem: Integration with PBMs and Pharmacies

AI and automation streamline PBM communication, enabling secure, efficient data exchange between Stakeholders.

### Streamlined Communication Workflows

Automated communication workflows improve the medication fill and prior authorization processes by:

- Facilitating communication between prescribing providers, PBMs, pharmacies and patients
- Providing two-way information exchange in a HIPAA-compliant environment
- Delivering timely updates about coverage and authorization requirements and processes

### Enhanced Specialty Pharmacy Coordination

For complex medications requiring specialized handling, automation can coordinate workflows between specialty pharmacies, providers, and patients. Automated systems manage delivery scheduling, therapy protocols, and education while maintaining compliance. This coordinated approach ensures proper timing and administration—crucial factors for success.

These integrations transform fragmented communication networks into a coordinated ecosystem optimizing medication access and adherence for even the most complex medication regimens. Enhanced coordination and automated workflows drive improved outcomes while reducing administrative burden.

# AI and Automation Use Cases for PBMs

PBMs lose millions each year to inefficiencies, churn, and administrative overhead. AI transforms fragmented workflows into streamlined systems that cut costs, accelerate therapy access, and differentiate service offerings in a competitive market.

## Medication Adherence and Support

AI and automation can identify and address root causes of non-adherence through targeted surveys that lead to personalized support, helping overcome traditional barriers to medication compliance.

## Understanding Adherence Barriers

Surveys identify the root cause of medication adherence due to specific challenges such as:

Transportation and cost barriers

- Side effects
- Educational gaps
- Cultural considerations
- Prescription changes

These insights enable tailored, immediate support to address specific patient needs.

## Comprehensive Support Solutions

Intelligent automation connects patients to customized solutions, such as:

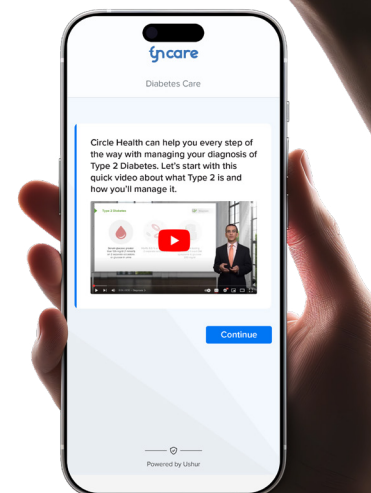
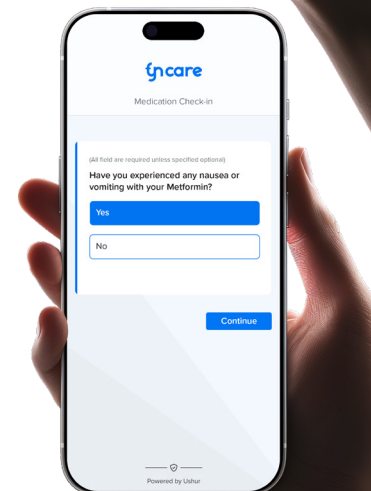
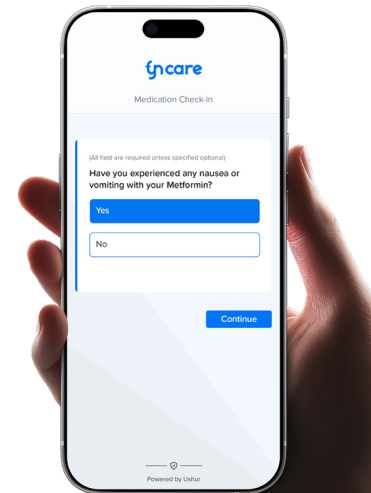
- Providing educational resources to emphasize medication importance
- Coordinating transportation, mail-order pharmacy services, 90 day fills
- Enrolling in financial assistance programs, recommending generic options where appropriate

## Personalized Adherence Management

AI-driven interventions ensure medication compliance through:

- Customized dosing reminders
- Automated side effect monitoring with follow-up guidance
- Real-time issue escalation
- Regular engagement check-ins
- Clear treatment instructions

This approach provides care teams with actionable data while keeping patients supported and engaged.





## The Future of AI and Automation

Pharmacy Benefit Managers stand at a crossroads. Rising costs, manual workflows, and member expectations are squeezing margins and straining relationships with providers and health plans. To thrive, PBMs must deliver both efficiency and differentiated service.

Ushur provides the platform to make that possible. With **Invisible App™**, a user-friendly, HIPAA-compliant digital channel that enables secure two-way communication without downloads or logins, PBMs can engage members and providers seamlessly. Backed by **AI Agents** that deliver empathetic, 24 x 7 multilingual support to address open-ended inquiries, Ushur automates prior authorization, benefit verification, refill reminders, and adherence programs at scale.

The result: **lower operating costs, stronger rebate protection, and high-touch experiences** that help PBMs win and retain contracts. Ushur turns PBM challenges into competitive advantage—accelerating time to therapy, improving member outcomes, and securing long-term growth.



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