Allegheny Health Network | **HUMATA HEALTH human+data**

Allegheny Health Network partnered with Humata to centralize and automate 200,000+ annual prior authorizations

Looking to improve patient outcomes, Allegheny Health Network implemented prior authorization software that creates an exception-based environment, improves staff efficiency, and accelerates time to care for patients.

BACKGROUND

Headquartered in Pittsburgh, PA., Allegheny Health Network (AHN) is a 14-hospital, multi-state academic medical system. The network operated with a decentralized prior authorization process, in which different locations and specialties managed their own authorizations, and the staff responsible for obtaining prior authorization also supported clinical work, which pulled them away from patient-facing responsibilities.

Greater investment in patient experience has been a top priority for AHN, so they began looking at opportunities to standardize prior authorization to provide even higher-quality care and improve patient outcomes.

DRAMATIC RESULTS

30%

of volume is automatically closed by Humata after discovering that no authorization is required through automation

~19

days-out for prior authorizations to be approved prior to service due to the exception-based workflow

96%

first-pass approval rate due to improved quality of submissions

60%

improvement in peer-to-peer rate; currently performing at 3.5% from a baseline of 8.5% for Neuroscience

THE CHALLENGE

As a starting point, AHN leadership undertook an ambitious project to centralize radiology and imaging prior authorizations in their revenue cycle operations. Their objective was to improve efficiency and performance, develop standardization across the enterprise, increase accountability, create better communication and reduce costs.

To achieve this vision, AHN needed to bring together a new, dedicated team to handle authorizations across the entire enterprise, but they also needed to bring technology solutions that could ensure this team was efficient. They sought a prior authorization software that could:

- ⊗ Provide a scalable workflow that could handle all service lines over time

- ⊗ Leverage automation, machine learning, and augmentation across the full end-to-end authorization continuum to maximize value

- ⊗ Create an exception-based workflow that reduced unnecessary touches

- ⊗ Integrate with clinical documentation to improve the quality of submissions and reduce peer-to-peer rates

THE HUMATA SOLUTION

Understanding that automation needed to be at the forefront of this strategy, AHN partnered with Humata after a successful pilot at their Neuroscience Institute. The pilot demonstrated impressive results with an 11% increase in prior authorization approvals, a 6% reduction in peer-to-peer rates, and 21% faster approvals from the payer. This achievement demonstrated to AHN leadership the benefits of leveraging technology to centralize operations, and the decision was made to begin with the high-volume Imaging service line.

To establish Humata as their cornerstone prior authorization solution, the Humata team facilitated a seamless, real-time bidirectional integration with AHN's Electronic Health Record (EHR) system.

Concurrently to this integration, the transition began towards consolidating prior authorization tasks with a dedicated, centralized team of specialists. This strategic shift aimed to eliminate any conflicting priorities, focusing expertise solely on prior authorization processes. Transitioning from decentralized workflows to a specialized centralized team necessitated comprehensive change management. Both AHN and Humata collaborated closely in training staff to utilize the AI-driven platform, ensuring optimal use of the technology.

Annually, the AHN team processes over 200,000 referrals through their centralized team. Previously, these cases required manual review by AHN staff to simply ascertain whether an authorization was even necessary. With Humata's extensive payer connectivity, the system now employs automation to adopt an exception-based workflow. This approach ensures that AHN staff only need to manage cases that require prior authorization, **eliminating more than 30% of manual interventions previously needed.**
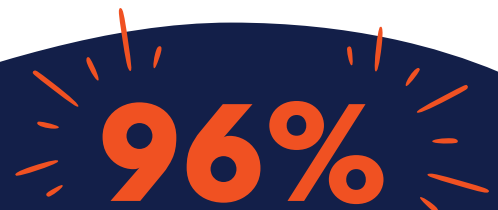
By concentrating efforts solely on cases that necessitate staff involvement, AHN has significantly improved its efficiency. **The team now finalizes prior authorizations on average 19 days ahead of the service date**. This acceleration in processing times has markedly reduced care delays for patients and minimized the frequency of cancellations that were common prior to this partnership.

> **"Automating prior authorization is a critical step towards improving revenue cycle management. It enables us to optimize operational workflows, reduce errors, and ultimately, deliver better financial outcomes for our organization while ensuring our patients receive the best possible care. When I think about Humata, I hone in on the 30% of referral volume they are automating so our staff doesn't need to touch them."**

- Morgan Kroskie, Corporate Director, Central Authorization Department - Allegheny Health Network

By leveraging Humata's integration into multiple AHN electronic document management systems, all clinical documents—including internal records, scans, and external documentation—are centralized in one location. This comprehensive arrangement simplifies the process of aligning clinical documentation with payer medical necessity policies, ensuring that the necessary documentation is included. Over time, Humata's platform evolves to proactively recommend components for the clinical documentation bundle. This advanced feature significantly reduces the manual effort and time traditionally required by staff to compile these documents. By leveraging this technology, **AHN now has a first-pass approval rate of 96%**.

Building on this foundation of streamlined document management, a critical component of AHN's operations has been managing Peer-to-Peer reviews. Through the data curated by Humata's platform, AHN gains valuable insights into provider, plan, and service trends requiring reviews. This ongoing analysis enables AHN to continuously optimize their processes, enhancing efficiency and effectiveness in handling complex cases.

96%
First-pass approval rate
thanks to Humata Health

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"The reporting for our Peer-to-Peer reviews through Humata's platform has brought a whole new level of transparency to our management processes. Previously, we lacked clear visibility, which made strategic improvements difficult. Now, we can see exactly what's happening and devise targeted action plans to enhance our operations continuously."

- Kelly Carr, Manager of Patient Access Services - Allegheny Health Network

After submission, Humata diligently statuses prior authorizations on a daily basis, retrieving information directly from the payer at the CPT-code level. Upon approval of an authorization, AHN implemented Humata's Post Authorization Monitoring (PAM) capability. This technology continues to track the authorization for up to 14 days post-service to detect any changes—such as in coverage, location, CPT codes, or visit dates—that might result in a downstream denial. If such changes are identified, the case is promptly surfaced to the authorization specialist for review. During a recent six-month span, **10% of volume was triggered by PAM and brought back to staff for review - primarily for additional CPT code additions or coverage changes.**

CENTRALIZATION INSIGHTS

Centralizing prior authorization processes can lead to significant improvements in efficiency and patient care. Below are six key focuses for organizations considering prior authorization centralization:

Centralizing Through Technology
Identify and integrate advanced automation technology to serve as the foundation of your centralized prior authorization processes. This technology should support an exception-based workflow, where only cases requiring manual review are escalated to staff. By automating routine and repetitive tasks, you can significantly reduce the workload on your team, enabling them to focus on more complex cases that require human intervention.

Strategic Staffing and Training
Conduct a thorough staffing analysis to determine the specific roles and number of personnel required. It is crucial to prioritize hiring individuals with previous experience in prior authorization processes to leverage their expertise. Implement a robust training program to further equip staff with the necessary skills and tools, and seek to limit their responsibilities to solely prior authorization.

Metrics for Success
Define clear, measurable success metrics upfront, using baseline data to track progress. This allows for objective assessment of the centralization's impact and identification of areas for improvement.

Phased and Planned Implementation
Adopt a phased approach by centralizing operations one specialty or service line at a time. This method helps manage risks and allows for adjustments based on early learnings. Develop a long-term strategy for subsequent integration of additional service lines.

Accountability and Engagement
Establish measurable accountability standards and maintain regular engagement with all stakeholders. This includes continuous feedback mechanisms and performance reviews to ensure all employees are aligned and achieving set goals.

Patient-Centric Approach and Change Management
Maintain a strong focus on improving patient outcomes and managing the human aspects of change. Communicate the benefits of centralization clearly and consistently, highlighting improvements in patient care to foster positive acceptance and engagement across the organization.

By focusing on these key areas, organizations can effectively manage the transition to a centralized prior authorization process, leading to enhanced operational efficiencies and better patient care.

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> "Centralizing our prior authorization process using Humata's automation technology has been extremely beneficial for our revenue cycle management. By creating a centralized, technology-driven workflow, we've significantly reduced manual touches and enhanced our operational efficiency. This shift not only accelerates our approval times but also ensures that our patients experience fewer delays in their care. This strategic approach is crucial for driving better financial outcomes and delivering superior care to our patients."

Rene Jacinto, Manager of Customer Engagement, Renown Health

"I am incredibly proud of what we've achieved with AHN, particularly our role in enabling a centralized model that enhances their operations and patient care. Our collaboration has not only streamlined AHN's prior authorization processes but has also set a benchmark for what can be accomplished with the right technology and partnership. This success exemplifies our commitment to transforming healthcare administration and improving the lives of patients and providers alike."

- Jeremy Friese, Founder & CEO - Humata Health

Ready to see how Humata can solve your PA problem?
Contact us today at **info@humatahealth.com** for a free demo.