

Fixing Prior Authorization

Providers' costliest administrative transaction¹

Prior authorizations are costly and labor intensive

79%

Prior Authorizations (PA) are partly or all manual²

94%

Providers say PA delays access to necessary care³

85%

Providers say PA puts a high burden on clinicians and staff⁴

2 Days

Time providers spend weekly on PAs⁵

The R1 Patient Experience platform automates prior authorization processing

Move clinical and financial clearance up front to the point of referral/order



Electronically ingest orders via patient experience platform

Enable highly-automated, rules-based processing that:



STEP 1

Runs insurance validation in real time:

- Eligibility Check
- Network Check
- Plan Check



STEP 2

Applies algorithms and rules to determine likelihood of PA requirement



STEP 3

Obtains PA, if required, moves to "schedule-ready" status



STEP 4

Immediately schedules the patient

Results: Save time, reduce cost and accelerate care delivery



60%

Average time savings per PA transaction⁶

\$417M

Annual industry savings using fully electronic PA⁷

\$13.40
cost of manual PA⁸

vs

\$3.76
cost of electronic PA⁹

=

\$9.64
savings per PA¹⁰

Ready to drastically reduce costs, eliminate waste and improve your patient experience?

Read [Automating Prior Authorizations Enhances the Patient Experience](#) and [contact us](#) today to learn how you can leverage intelligent automation to streamline prior authorization workflows and improve patient access to care.



R1RCM is a leading provider of technology-driven solutions that transform the patient experience and financial performance of healthcare providers. R1's proven and scalable operating models seamlessly complement a healthcare organization's infrastructure, quickly driving sustainable improvements to net patient revenue and cash flows while reducing operating costs and enhancing the patient experience.

Learn more at r1rcm.com or contact us contact@r1rcm.com.