

Fixing Prior Authorization

A costly and burdensome process for providers

Prior authorizations delay care and waste time

74%

Prior Authorizations (PA) are partly or all manual¹

93%

Providers say PA delays access to necessary care²

88%

Providers say PA puts a high burden on clinicians and staff³

2 Days

Time providers spend weekly on PAs⁴

R1 Entri™, an intelligent patient experience solution, automates prior authorization processing

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



Electronically ingest orders via patient experience solution

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



16 min

Average time savings per PA transaction⁵

\$437M

Annual industry savings using fully electronic PA⁶

\$14.49
cost of manual PA⁷

vs

\$3.50
cost of electronic PA⁸

=

\$10.99
savings per PA⁹

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.



R1 RCM 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.

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