Electronic Prior Authorization

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Community Health Network

"The pharmacist is on the phone, trying to secure prior authorization. Do you want to wait? He shouldn't be more than an hour."

Community Health Network: Statistically Speaking

Total patient encounters	>2 million
Hospitals / staffed beds	10 / >1,200
Inpatient admissions	53,400
Inpatient surgeries	11,200
Outpatient visits	>1 million
Outpatient surgeries	84,900
ER visits	243,100
Births	7,300
Ten-county market share	25%

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- More than 200 total sites of care in central Indiana

- Ten acute care and specialty hospitals

- Nine ambulatory surgery and endoscopy centers

- Thirteen ambulatory pavilions

- 200+ ambulatory locations

- 600+ employed providers

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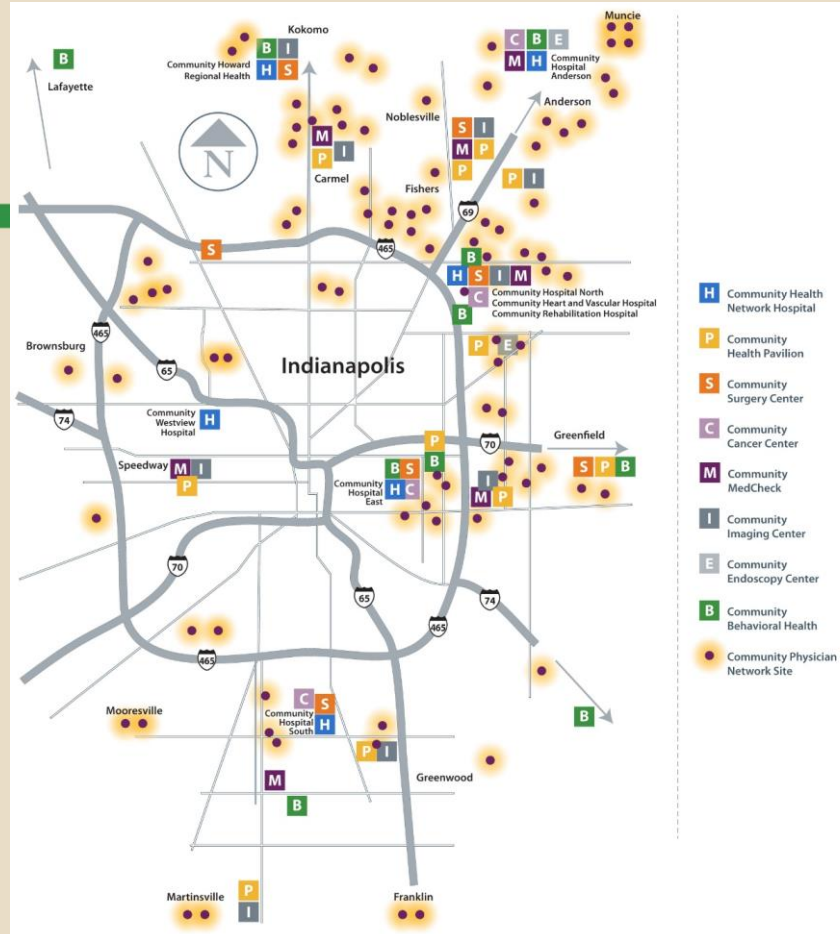
ePA - Provider Perspective

Why Electronic Prior Authorization?

- Provider Perspective
  - Time
  - Within current EMR workflow
  - Standardization
  - Prospective or Retrospective
- Increasing shift from pharmacy responsible prior authorization to the providers/offices

Project Timeline

- ePA Project Plan – 129 days total
- Phases
  - Initiation – 24 days
    - Build project team, discuss with 3rd party vendor
  - Discovery – 43 days
    - Informatics process mapping, determine clinical staff responsible for ePA and workflow

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Project Timeline – cont.

- ePA Project Plan – 129 days total
- <u>Phases</u>
  - EMR Build – 35 days
  - EMR Testing – 10 days
  - Training – 35 days
    - Development of training tools, eLearning videos
  - Go-Live Pilot – 30 days

Project Timeline - Pilot Sites

- Geist Family Medicine and Pediatrics
- Fall Creek Family Medicine
- East Washington Pavilion
- Eagle Valley
- Olio Road Family Medicine
- Fortville Family Medicine
- Carmel Pavilion
- Cardiology South

Project Timeline - Current State

- Performance Excellence Team performed process maps for our 8 pilot sites
  - Demonstrated wide variation in who is performing Prior Authorization

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Project Timeline - Current State

- Common findings across sites
  - Inconsistent staff performing Prior Authorization
    - "All hands on deck" approach
    - MAs, RN, Site Coordinator, Xray tech
  - Various approaches
    - Paper (fax), Telephone, Web portals
  - Multiple phone calls required
    - Pharmacy, PBM, Patient (several)
  - Time to complete
    - 60 min to 72 hours – start to finish

Project Timeline - Who is Involved?

- Project Management
- Clinical Informatics
- EMR team
  - Analysts
  - EMR Vendor
  - Training
- Surescripts
- Providers and Clinical Support Staff
- Clinical and Operational Leadership

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How's it going….

- Contributions to a successful launch at CHNw
  - Many of early adopter challenges had been resolved
  - High percentage of CHNw covered lives with PBM participation in ePA
    - Express Scripts – 42%
    - Caremark – 21%
    - Optum – 8%
  - Consider analyzing payer mix prior to launch ePA
    - Unique to the product you choose
    - Based on last 120 days of eligibility response via Surescripts network

How's it going….

- 61 providers live in ePA pilot
  - Day 1 – 30 ePA messages sent from CHNw
    - Compared to other sites: took several days to send 1-2 messages
  - Week 1
    - 29/61 providers sent ePA message
      - CHNw: 25-40 messages per day

How's it going....

- Data to date (since 3/8):
  - 291 ePA requests
  - 44 returned question sets (15.2% which is about 2% higher than national average)
  - 115/291 – "PA Not Required" (39.5%)
  - 28 of 44 – approved, denied or pending payer approval

ePA Advantages and Barriers

- Reduction in waste
  - Vs. Portal Solution
    - Approximately 25-50% ePA messages returned "PA not required"
    - 25% returned "not PA processor"
      - Future enhancement coming – Surescripts intercepts message and sends to 3rd party processor
- Health Plan Participation

ePA Advantages and Barriers

- At this time, **not all** Payers are participating in the ePA process.
  - Will still receive a **fax** or a **call** from a Pharmacy
  - Requires staff to "live in two workflows"
  - As more Payers participate, we **anticipate** the faxing/calling process to **decrease**.

- R**efill** and **telephone encounters** do not go through the same process as **Office Visits** in regards to an automatic benefit query running each morning.
  - **Verify Rx Benefits** query <u>manually</u> will be **required**.

Future Usage for ePA

- Specialty medications
- Inpatients being discharged home
- Medication Assistance Program

EPIC ePA Slide Demo