Appian for Healthcare Payers

CLINICAL PRIOR AUTHORIZATION

- Quickly and accurately determine medical necessity
- Easily share data and collaborate with providers
- Reduce the frequency of medical claim denials
- Lower administrative cost

When healthcare payers work with providers to determine medical necessity and cost-efficiency before a member’s treatment, countless interactions—and oftentimes manual handoffs—take place between the two parties.

While the purpose of prior authorization is to optimize treatment and manage costs, the manual process is often error-laden and expensive.

*How can health insurers quickly and accurately determine prior authorization decisions the first time to improve member health and satisfaction throughout the digital care continuum?*

**MEET THE CHALLENGE**

Prior authorization applications built on Appian enable efficient processing, smooth information review, and collaboration to support clinical decisions.

- Appian makes determining in-network coverage and medical necessity easier for care managers by integrating data from all relevant systems into a single interface.
- Appian’s leading process management capabilities can automate key steps and intelligently route escalations as needed.
- Real-time digital collaboration with providers allows health plans to make confident authorization decisions.

With this, payers can ensure the most appropriate and affordable care for their members. And, providers are less likely to face claim denials and file appeals, since supporting information has already been reviewed by the payer.
Clinical Prior Authorization

FOCUS
With a next generation prior authorization application, your clinical care operations can run smoothly, enabling health insurers to focus on:

• Freeing nurses and care managers from administrative tasks
• Collaborating with providers to ensure the most appropriate and cost-efficient care
• Improving transparency and satisfaction for plan members

TAKE CONTROL
Appian gives organizations the ability to quickly build, deploy, and scale enterprise clinical care applications for:

• Clinical Policy Management
• Referral Management
• Health Risk Assessments
• Care Coordination and Care Management
• Disease Management
• Member Engagement and Monitoring
• Clinical Contact Center
• Utilization Management

PREPARE FOR THE FUTURE
The future of healthcare depends upon the ability to quickly adapt and provide quality and convenience for providers, payers, and most importantly, members.

It takes speed and power to deliver transformational healthcare solutions. The Appian low-code application platform provides both.

With Appian, organizations can build web and mobile apps faster, run them on a HIPAA-compliant cloud, and manage complex processes, end-to-end, without limitations.

HEALTHCARE ORGANIZATIONS TRUST APPIAN:

BMI Healthcare  KAISER PERMANENTE  NuLifeMed  SHARP

pSHEALTH  benendenhealth  UNITEDHEALTH GROUP  CIHI

Appian provides a leading low-code software development platform that enables organizations to rapidly develop powerful and unique applications. The applications created on Appian’s platform help companies drive digital transformation and competitive differentiation.

For more information, visit www.appian.com