

## What is Prior Authorizations?

A prior authorization is required by health insurance companies to determine if they will cover a prescribed procedure, service, or medication. The process is intended to act as a safety and cost-saving measure, although they can delay patient treatment and negatively affect outcomes.

## Why are they needed?

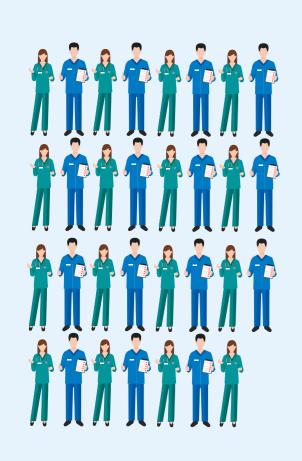
Health plans argue that prior authorization requirements are necessary to control costs and ensure appropriate treatment. Yet these manual, time-consuming processes burden providers and divert valuable resources from direct patient care.



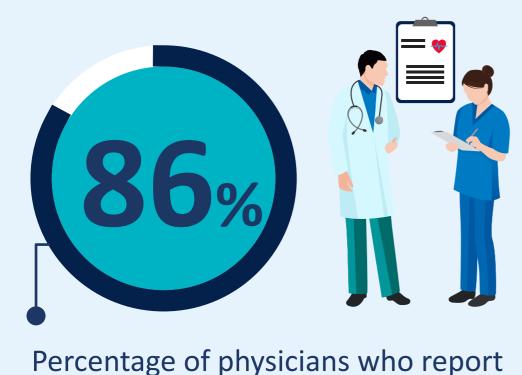
## By The Numbers



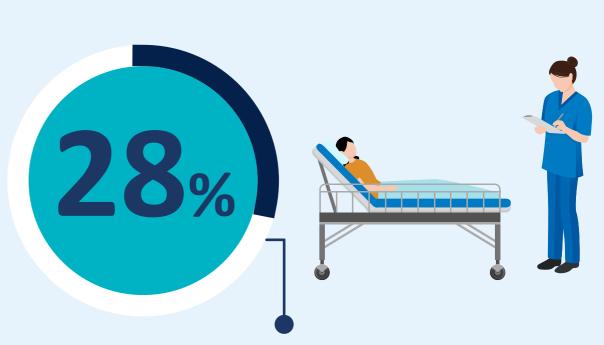
of patients who experience care delays due to prior authorizations



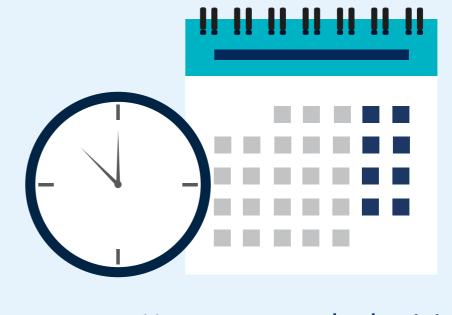
On average, the number of prior authorizations completed per physician per week



prior authorizations as a high or extremely high burden on their practice



Of responding physicians reported that prior authorization delays or denials led to serious adverse events - death, hospitalization, disability, or other life-threatening events - for a patient in their care



Hours per week physicians and staff spend completing prior authorizations



care system.

## The Solution

\$7.5 billion annually by switching to electronic prior authorizations.

It's estimated that health care providers could save





by prior authorization specialists, is a solution that solves

100 percent of your prior authorization headaches, saving
money and eliminating negative patient outcomes.

Infinx's Prior Authorization Software, with exception handling

The software optimizes your workflow, minimizes denials, and maximizes turnaround times. Exceptions are automatically routed to a team of certified prior authorization specialists, who can successfully complete your request on time.



Schedule a demo today and learn how our prior authorization software

solution can simplify your workflow and increase your cash flow.

