

Easing the prior authorization pain point

OptumRx provides streamlined processes for more timely decisions and fewer disruptions to patient care

Making sure patients get the best therapy sometimes requires the extra step of submitting a prior authorization (PA) request. It's a common part of the prescribing process, but **86% of providers see PAs as a high source of administrative burden**.¹ OptumRx understands their concerns and commits to streamlining the PA process for an improved experience.

Here's how:

Avoiding PA requests with realtime benefit checks

The first step for providers to ease the burden of PAs is to take advantage of **OptumRx PreCheck MyScript® (PCMS).** The tool helps avoid unnecessary PA requests altogether It allows doctors to view accurate patient medication cost information within their electronic health records (EHR) system. PCMS calculates the exact cost the patient will pay for medication, displays lowercost options available and PA requirements (if applicable).

Real-time benefits check saves providers on average 50 minutes per prescription by avoiding prior authorizations¹

Essentially, the tool helps make the prescribing process more transparent– right at the point of care. With this real-time information, Providers can easily determine which medications to prescribe, factoring in both cost and therapy needs. Most importantly, the tool allows providers to spend less time on administrative tasks and more time with patients.

Key PCMS benefits:

- Save providers on average 50 minutes per prescription by avoiding prior authorizations¹
- Patients save an average of \$41 per prescription when switched to a lower-cost option²
- Relies on **current formulary data** for coverage accuracy
- Boosts patient adherence and clinical outcomes⁴

Improving electronic PA request processes

Utilizing ePA offers providers the best experience and helps to simplify PA submissions. Also, OptumRx continually works to improve the ePA process for greater efficiency. Important enhancements include:

Real-time auto approvals

With auto approvals, providers enjoy more timely coverage decisions, sometimes within 1-2 minutes of submitting an ePA request. Currently, 63% of PA approvals are autoapproved, which has increased by 12%-13% in the past year.³ That results in time saved not waiting on replies by fax, which means more time for patient care. Utilizing ePA offers providers the best experience for easier PA submissions.

Auto cancellations on unnecessary PA requests

As another timesaver, OptumRx cancels ePA requests that already have a duplicate approval on file and don't require review. Providers are immediately notified of the cancellation, which allows for faster turnaround time for patient medications.

Streamlining PA communications using EHR workflow

Finally, improving how OptumRx communicates with providers throughout the PA process is another key enhancement. It starts by utilizing the EHR system. Engaging providers within their EHR workflow provides more efficient communication that reduces back-and-forth time via fax or phone. It further allows for direct messaging about PA approval and denial notices to ensure providers always have the latest status updates. While PA requests can be a disruption, they do play an important role in managing prescription drug costs. They also help control misuse and protect patient safety to ensure quality therapeutic outcomes.² OptumRx stands committed to easing PA pain points through ongoing process improvements. The goal is to help providers leverage tools within their EHR system, such as ePA and PreCheck MyScript, that help minimize disruptions to patient care.

OptumRx continually works to improve the ePA process for greater efficiency.

How can OptumRx further ease the PA process for you? Please share your thoughts by completing the quick 1-click poll found in this eNewsletter.

Resources to support you

Submit an ePA request

How to submit an ePA

1. UnitedHealthcare Advisory Board. Prior Authorization Trends 2020. 2020.

2 OptumRx. "Improving the prescribing process: PreCheck MyScript." 2020.

3. OptumRx. Internal OptumRx data 2021. 2021.

4. OptumRx data. Measurement of PreCheck MyScript impacted scripts within the diabetes therapeutic class, the statin therapeutic class, and the hypertension therapeutic class. Savings represents a pre/post methodology. Pre period is Oct 2016 - Sept 2017 and post period Oct 2017 - Sept 2018. Population included in the measurement was continuously enrolled.



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