MMIT Analytics: Streamlining Patient Access and Reducing Coverage Denials

Overview

A health system was facing significant hurdles in understanding and navigating drug coverage and restrictions, leading to inefficiencies and increased costs. The client was aiming to:

- ✓ Reduce administrative burden
- ✓ Improve patient care efficiency
- ✓ Minimize claim denials

Challenge

Frequent claim denials, particularly for high-cost treatments, were costing the client money. Long wait times for authorization approvals were delaying patient access to therapies and impacting care quality.

Solution

MMIT Analytics provided an all-encompassing platform that allowed the client to:

- Quickly understand patient coverage and barriers to accessing treatment.·
- Access parsed, easy-to-read data on step therapies and prior authorizations for specific payer policies.·
- Streamline patient access by identifying coverage restrictions and preferred drugs.·
- Guide contracting teams with payer-specific insights to improve negotiation outcomes.

Outcome

With MMIT Analytics, the client reduced claim denials. A streamlined authorization process with parsed-out PA and ST data allowed staff to validate therapy requirements without manual searches. The client also got high-level insights into drug coverage preferences by payer/PBM for specific indications. MMIT Analytics enabled clinicians to easily identify covered alternatives when a drug was not approved, ensuring continuity in patient care. The platform eliminated time-consuming manual research, lowering administrative costs, and faster review of treatment plans for authorization requirements freed up resources for direct patient care.

MMIT Analytics empowers hospitals and healthcare systems to streamline access, reduce costs, and improve patient care with unparalleled drug coverage insights.

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