

Care Providers & Payers

InterQual Authorization & Connectivity Solutions

InterQual Connect™
Enable automation of authorizations requiring medical review, within your existing workflow

What is the impact of the prior authorization process on your organization? The total cost of an authorization is \$35-\$100 when faxes, phone calls, clinical time and other aspects are considered¹. This manual workflow is inefficient, time-consuming and redundant—with both providers and payers conducting duplicative medical reviews—being costly to everyone.

Existing utilization and care management (UM/CM) systems can automate authorizations to a point, based on limited payer rules. But when a medical necessity review is needed, you're back to the inefficient, manual process.

With InterQual Connect™, payers can easily automate all authorization requests, even those requiring medical review, within their existing systems. Providers receive quicker authorization approvals for most requests and payers only need to touch the exceptions that can't be approved automatically—no more duplicative medical reviews or wasting precious staff time on routine authorizations.

InterQual Medical Review & Authorization

InterQual Connect is a flexible SaaS solution, integrated into payer and provider health information systems. It pairs the leading InterQual criteria, now available as a web service, with proven and secure connectivity.

- **A unique solution:** The only integrated solution to enable full auto authorization, including medical review.
- **Uses existing IT infrastructure:** No new hardware, software or IT staff required.
- **Is easy to implement:** Time to value can be as little as 60 days when using a certified McKesson Alliance Partner.
- **Provides fast, secure connectivity:** Uses the proven InterQual authorization gateway.
- **Keeps users in existing workflows:** Providers submit an authorization request, and payers receive the request and medical review from within their current UM/CM workflow.
- **Delivers real-time InterQual access:** Just-in-time content from our cloud platform helps ensure you get the latest version, but you can choose when to make the switch.
- **Aligns with InterQual hospitals:** Payers benefit from the shared clinical language with 3,700 InterQual hospitals plus a direct connection to 1,000+ hospitals already connected to the InterQual Connect cloud.
- **Supports payer/provider collaboration:** Helps reduce the costs and hassle of prior authorization, while providing full transparency of payer criteria to providers.

Enhancing Existing Capabilities

InterQual Connect can fill the gap in your current UM/CM system, so you can use your existing IT Infrastructure for full authorization automation.

Payer's UM/CM system provides:

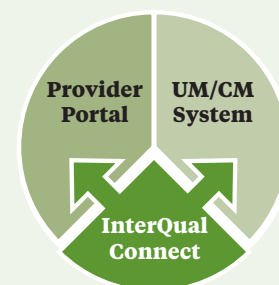
- Payer user interface and workflow
- Payer rules
 - Business rules
 - Eligibility
 - Benefits and coverage
 - Network steerage
- Authorization determination
 - Automated authorization
 - Pended for review

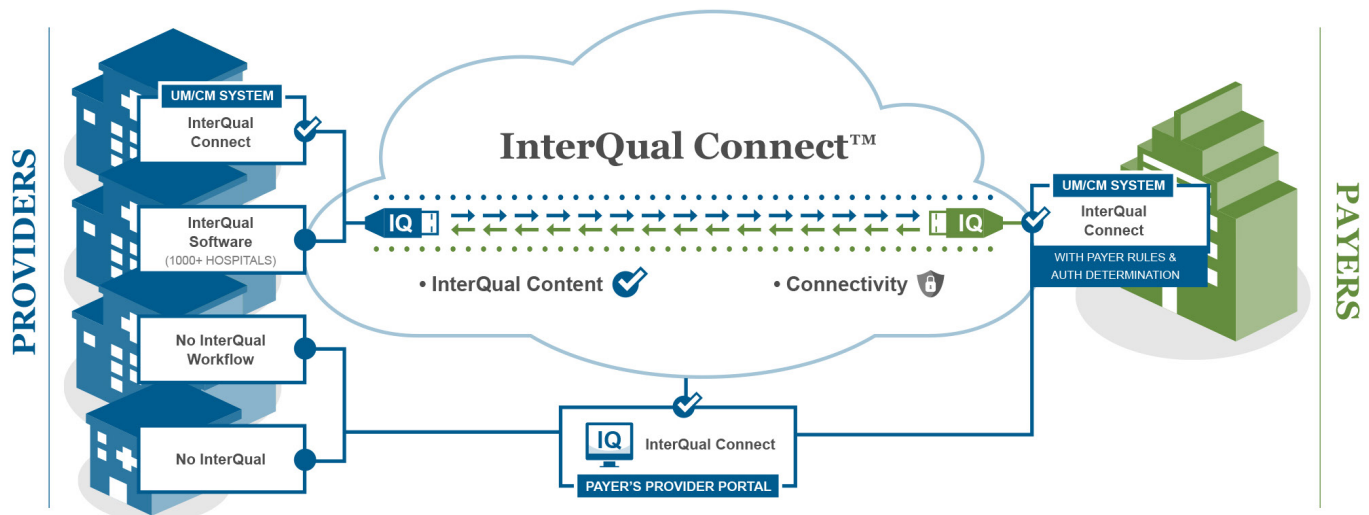
Provider's UM/CM system and payer's portal provides:

- Provider user interface and workflow
- Authorization notification

InterQual Connect provides:

- Interactive medical review for medical necessity
- Connectivity to securely send/receive the medical review and clinical information

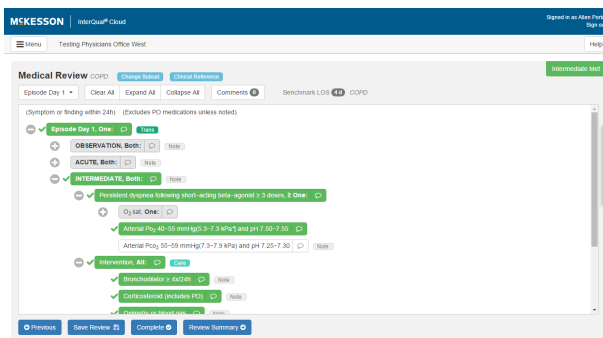




InterQual Connect creates a connected ecosystem for medical review and authorization, no matter what system providers use, or no system at all.

InterQual Medical Review Service

Optimized for integration, this web service delivers seamless access to the InterQual medical review within your UM/CM system or payer’s provider portal. You get the same leading evidence-based InterQual Criteria combined with our modern, user-friendly interface.



The medical review service provides an integrated, browser-agnostic solution with a modern, user-friendly interface.

networked system, such as a multi-hospital and outpatient network or multi-location payer. The medical review service works with any modern browser.

InterQual Connect can also work with the InterQual medical review available in our legacy installed application (CareEnhance® Review Manager).

The SaaS platform helps you reduce your IT burden, providing real-time access to content. You receive software and content upgrades automatically without waiting for installation and validation, but still maintain control of when to switch to the newer content. You also gain the freedom to make the medical review service available throughout a

Secure Authorization Connectivity

Our cloud platform and authorization gateway enable the creation of a secure network of connected payers and providers by providing a common language, standard API protocols, access controls and routing rules.

Providers transmit an authorization request, complete with an InterQual medical review, through the gateway directly to a payer. The payer system then applies business rules and the InterQual criteria to this request, and instantly delivers the authorization status back through the gateway to the provider.

The gateway has been deployed as part of our cloud solutions, and currently supports thousands of authorization transactions per week between connected payers and providers. It is optimized for our interoperable (XML) medical review format, and can also support the HIPAA X12 278 transaction standards.

¹ McKesson 2014 study conducted with CAQH index data.

McKesson Health Solutions
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