



Points of Light

Points of Light 2025 Case Study 25

Removing Inefficiencies During Prior Authorization Using an Al-Enabled Clinical Reasoning Engine



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Executive Summary

Healthcare Organization 25's prior authorization processes were creating an administrative burden on office staff and delaying patient care. Healthcare Organization 25 began working with Payer Organization 25 to find better solutions. The organizations partnered with HealthHelp, a WNS company, for utilization management and with Anterior for Al. The stakeholders collaborated on an Al-driven prior authorization solution that led to a 99% reduction in the time needed for authorization approvals, a high clinical accuracy rate, and increased savings.

The Collaborators

Healthcare Organization 25

Anonymous **Location:** PA

Sizing: 10 hospital campuses, 2 research centers, 1 college of medicine

Payer Organization 25

Anonymous **Location:** PA

Sizing: 550,000 members



Headquarters: TX

Segment: Utilization management



Headquarters: NY Segment: Al



Points of Friction—Challenges to Be Solved

Inefficiencies in the prior authorization process that burdened both payer and healthcare organizations with delays, high costs, and administrative friction: For WNS-HealthHelp (Payer Organization 25's utilization management partner), it was costly to manually review millions of prior authorization requests annually, as each case required intake staff, nurses, and sometimes, physicians. Ultimately, review costs were around \$50-\$100 per case, and more than 95% of requests were ultimately approved, suggesting opportunities for improvement and automation in the process. For Healthcare Organization 25, the prior authorization process was also a major pain point and a source of clinician abrasion. They often experienced delays in approvals, leading to disrupted care, treatment abandonment, and worsened patient outcomes. The administrative burden increased clinician frustration, damaged payer relationships, and reduced operational efficiency.



Action Plan—How the Collaborators Worked Together to Reduce Friction

- Healthcare Organization 25 and Payer Organization 25 engaged WNS-HealthHelp and utilized Anterior's Al tools to improve their prior authorization process: All stakeholders aimed to automate prior authorization approvals with high clinical accuracy, to improve clinician and patient experiences, and to ensure Al deployment with human oversight. The stakeholders partnered with Anterior to use their Florence Al tool (a clinical reasoning engine powered by a large language model) to increase efficiency for authorization requests. Initially deployed for a defined sample of outpatient cases, the tool instantly approves high-confidence prior authorization requests, reducing manual workload and accelerating patient access to care. The Al reasoning is embedded into the WNS-HealthHelp clinician portal, WebConsult, where users can submit and track their requests; this enables clinicians to receive approval at the point of care. Cases that require further review are automatically escalated to the WNS-HealthHelp clinicians for manual review to ensure safety and compliance.
- WNS-HealthHelp and Anterior took a hands-on, consultative approach to implementation to ensure a measured, effective deployment that aligned with stakeholders' goals: Anterior guided WNS-HealthHelp's team through every stage of the deployment, including strategy, integration, validation, and ongoing refinement. WNS-HealthHelp's team met weekly with Anterior to validate Al performance and refine decision pathways. Together, they identified a high-impact subset of prior authorization requests where automation could deliver the most value (many of which covered services used in cancer screenings). WNS-HealthHelp provided deep expertise on medical-necessity criteria and offered critical feedback that helped ensure Florence's recommendations were aligned with payer-specific guidance and training. Both stakeholders' IT and operations teams worked together to integrate the solution directly into the payer and provider workflows to avoid workflow disruptions and eliminate the need for extensive change management.
- Anterior's clinician-led implementation team worked with WNS-HealthHelp's physicians and nurses to ingest their medical-necessity
 guidelines into Florence, which converted them into structured decision trees: Throughout the process, stakeholders conducted multiple
 validation cycles in a sandbox environment so they could receive detailed QA reports and address concerns in real time. This helped build trust
 with the clinical organization.

- Anterior committed to responsible AI deployment by providing ongoing monitoring and support: Beyond the go-live, Anterior provided ongoing monitoring and support as their clinicians continually audited a sample of cases, shared insights, and refined the system to maintain clinical rigor. Anterior equipped WNS-HealthHelp's leaders with real-time analytics to track performance, accuracy, and impact to ensure they had full visibility and control.
- Healthcare Organization 25 actively participated in iterative improvement cycles to refine the point-of-care PA process: Their input helped shape a streamlined, user-friendly system that is now highly rated across the board.



Points of Light-Outcomes Achieved Through Collaboration

- Almost immediate approvals for many prior authorization requests with an easy process for clinicians: Previously, clinicians would submit a prior authorization request and wait days for a determination. Now, many cases receive approval within a few minutes. Clinicians who have been involved in the new process highlight the ease of use, indicating that the tool feels invisible as it works. Preliminary data suggests that around 75% of inbound requests are automatically approved by Florence, resulting in a 99% savings in time.
- Decreased costs for Payer Organization 25 as less clinician time is spent on reviews
- High clinical accuracy of the Al tool: Other Al solutions are benchmarked at around 60%-80% accuracy. Florence significantly outperformed expectations, achieving over 95% clinical accuracy within weeks. Through ongoing collaboration with WNS-HealthHelp's clinical team, Anterior further refined their alignment, leading to a 99.24% accuracy today.



Lessons Learned—What Best Practices Can Other Organizations Replicate?

- A controlled, incremental rollout builds confidence in and trust between stakeholders: The successful implementation of individual pieces of the system leads to efficient, accurate processes, which aids in the new system's long-term success as stakeholders can recognize ROI and buy in throughout the process.
- Clinical teams are critical for helping refine AI reasoning and inform the process: AI reasoning needs to follow payer in-house decisionmaking regulations. By regularly consulting with clinicians, the stakeholders ensured the Al tool would learn to navigate the gray areas of clinical reasoning that come with unwritten rules and interpretation styles. This process improves Al accuracy and clinician trust in automation while maintaining high clinical rigor. Clinicians should be actively involved every step of the way, including the validation processes to ensure the process is working right.
- Be clear up front about what success means and develop a measurable metric for it: Work to understand the payer and healthcare organizations' expectations from the outset. Track accuracy relative to competitors' performance. Understand the metrics of success in the utilization management space (e.g., F1 score, precision and recall scores) so that performance can be closely monitored.
- Ensure a clear cadence to communication during the collaboration: A regular cadence of communication helps ensure all stakeholders remain aligned on goals, outcomes, and Al safety and governance throughout development and implementation processes.
- Find the right team to deploy new technologies: Out-of-the-box Al solutions don't exist. Collaboration and customization are always part of the iterative process, so stakeholders need teams who are agile, innovative, and willing to pivot. Pressure-test new technologies, and be cautious when it comes to go-lives.



What's Next?—Vision for the Future

- **Anterior plans to expand use cases for the solution:** Prior authorization is a starting point for relieving the healthcare administrative burden. Long term, Anterior wants to continue relieving administrative burdens in healthcare by expanding to risk adjustment, care management, and payment integrity use cases.
- WNS-HealthHelp plans to scale the technology across other utilization management programs.