2023 PATIENT ACCESS TRENDS

The healthXchange team gathered patient access leaders from more than 100 organizations over the course of 2023 to discuss the challenges and opportunities their teams face in ensuring access to the right care, at the right place, and at the right time. Throughout the meetings, attendees and panelists came back to five challenges that were found across the industry:

High Rates of Denials

Denials stemming from front-end access issues continue to pressure the industry, with participants discussing a wide range of challenges including prior authorization related denials, increasing demands for medical necessity documentation or ADRs, and concerns related to payer-related changes. From root cause analysis and continuous improvement to team collaboration, this is an issue that is being tackled in many different ways by healthcare leaders.

Prior Authorization Timelines

The timeline to secure prior authorization has undeniably increased, with many healthcare executives indicating timelines reaching 21-days or more, up from what had been 14 days. These delays in-turn impact patient care, with longer waiting times, in addition to complications with scheduling. In addition, certification for new and complex treatment plans continues to cause challenge, in addition to addressing retro-authorizations or last-minute add care additions.

Eligibility Verification Issues

In the complex environment of health insurance, providers must take considerable care to ensure that patient eligibility is up-to-date and that the correct plans have been identified and selected. As coverage continues to shift with changes in benefits and employment, registration teams are embracing real-time eligibility technology, as well as exploring additional coverage opportunities for those self-pay or under-insured populations.

Automation & Technology

As health systems continue to adopt and implement technology aimed at streamlining the administrative burden associated with patient access, teams are also adapting roles and workflows, and considering the impact on both budgets, and hiring. For many organizations, balancing the cost of hiring new FTEs needs to be balanced against technological investments, to decipher the ultimate return on investment.

Culture & Leadership

Throughout the many discussions, there was also a focus on the need for strong leadership within revenue cycle teams, at every level, but starting at the top. Clearly communicating priorities and creating open dialogue across the revenue cycle but also with providers and external payers was also discussed, as was the need for both technical and soft-skills training and development, to ultimately ensure the next generation of patient access leaders are prepared for the challenges ahead.