

Google Cloud Unveils New AI-enabled Claims Acceleration Suite to Streamline Health Insurance Prior Authorization and Claims Processing, Helping Experts Make Faster, More Informed Decisions

Blue Shield of California and Bupa are implementing the solution to drive greater efficiencies, and improved provider and patient experiences

SUNNYVALE, Calif., April 13, 2023 /PRNewswire/ -- Google Cloud today announced a new AI-enabled Claims Acceleration Suite that streamlines health insurance prior authorization and claims processing. The solution, leveraging the newly created Claims Data Activator, will help health plans and providers reduce administrative burdens and costs by converting unstructured data into structured data, enabling experts to make faster, more informed decisions that improve patient care. AI-enabled prior authorization is available to Google Cloud customers today, and other features of the Claims Acceleration Suite will be available later in the year.

Google Cloud launches AI-enabled tool to help health insurance experts make faster prior authorization decisions.

The current prior authorization process takes 10 days on average, according to the [Centers for Medicare & Medicaid Services](#) (CMS). During this process, healthcare providers check the benefit coverage of their patients to see if prior authorization is required for a recommended procedure, medication or device, and submit the supporting information required. The health plan then receives and organizes this information for review by their physicians. The purpose of this process is to manage

quality and to ensure members are receiving safe, necessary care. This results in both providers and payers investing significant resources because of the manual administrative intervention required. Now with advanced technologies, what has been a heavily manual process can be modernized. Information being shared in unstructured formats, such as PDF documents converted from faxes, images and other health record data can be transformed into a structured format. Technology can significantly reduce time-consuming administrative prior authorization work, accelerating time-to-decision and access to care. Prior authorization contributes \$25 billion in cost of care annually in the United States, and introducing more automation could save \$454 million per year ([Council for Affordable Quality Healthcare estimate](#)), freeing up resources for providers and health plans to continue to advance their efforts in more direct care and care management programs.

"It's time to modernize the prior authorization process, leverage current technology to improve access to care, and extract value to better serve the people in our communities," said Amy Waldron, director, Global Health Plans Strategy and Solutions, Google Cloud. "Our Claims Acceleration Suite is a great example of Google Cloud's AI driving much needed operational efficiencies by reducing the manual administrative work for providers; allowing payers to focus their time on clinical evaluation and review, improving speed to care; and extracting value from a process without disrupting the roles experts play in claims decisions."

In addition to the business benefits of AI-enabled prior authorization, CMS is actively working to create an environment for the marketplace to develop new solutions with its updated regulatory requirements around interoperability and prior authorization, which will include leveraging Health Level 7 Fast Healthcare Interoperability Resources (HL7 FHIR) application programming interface (API). Google's Claims Acceleration Suite will help health plans meet current and proposed requirements, and it will enable health plans to extract greater value from data as a strategic asset to improve provider and member experiences.

Blue Shield of California aims to have a positive impact on the health of their 4.8 million members by using digital technology to create experiences that are personalized, holistic, and high-tech and high-touch.

"Streamlining the prior authorization process is one important part of Blue Shield of California's journey to enable a more real-time exchange of data and provide more retail-like experiences. We want to help ease the administrative burden on our healthcare providers so they have more time to deliver the best care possible," said Lisa Davis, senior vice president and chief information officer at Blue Shield of California. "Leveraging Google Cloud technologies and artificial intelligence, we are working to ensure our members get timely access to clinically necessary care and services. What sets Google Cloud apart is their commitment not only to technical capabilities but also to connecting the healthcare ecosystem through interoperability and using open standards."

Bupa, an international healthcare company serving over 43 million customers across the world, is also an early

adopter of the Claims Acceleration Suite.

"We want to be the world's most customer-centric healthcare company and AI-enabled tools will help us on this ambitious journey," said Cibele Cardin, IT director for Care Plus, a subsidiary of Bupa in Brazil. "The Claims Acceleration Suite's AI-enabled prior authorization will help us more quickly meet the needs of the people we serve in Brazil, improving overall experience through frictionless access to care.

Jose Luis Revuelta, Chief Information Officer at Sanitas and Bupa Europe and Latin America says "We are working with our global colleagues to make the AI-tooling available to Bupa's operations in Poland and Spain."

Claims Data Activator

Google Cloud's Claims Acceleration Suite optimizes prior authorization, with its newly created Claims Data Activator that establishes data interoperability, intelligent analytics, and smart reporting by using Document AI, Healthcare Natural Language API, and Healthcare API to convert unstructured data to structured data. The tool also uses analytical tools, BigQuery for real-time analytics and machine learning, and Looker for data visualization.

Claims Data Activator enables faster time-to-insights, easy integration with rule-systems and AI models to parse prior authorization requests and reduce manual data entry time. Claims managers and caregivers can search patient records with a medical semantic search experience that allows for faster access to information within patients' records and medical utilization guidelines to quickly find what they need. Ultimately, Claim Data Activator's ability to create structured interoperable data available in FHIR format enables experts to make faster, more informed decisions and provides additional benefits to health plans by helping them unlock the value of data in this process. It also allows them to create efficient processes that comply with pending and current regulatory requirements, and prepare for future AI innovations.

Google Cloud brought this newly built tool into a workflow alongside [Myndshft's](#) and [Pega's](#) technologies, running on Google Cloud, to streamline the provider submission and prior authorization review processes. Customers can leverage Accenture, a key delivery partner, or Google Cloud's professional services, to integrate these technologies or to customize Claims Data Activator with existing processes and technology to reduce manual administrative burdens with little-to-no workflow disruption.

Submitting prior authorizations

The Claims Acceleration Suite's AI-enabled prior authorization submission process enables quick and seamless submission of prior authorization requests. In this area Google Cloud partnered with Myndshft, built on Google Cloud technology, to support near real-time benefits verification, including an accurate calculation of out-of-pocket costs using healthcare providers' contracted rates and patients' exact benefits; pre-check of prior authorization requests for errors, missing information, and medical necessity; submission through the health plan's preferred submission path; and status monitoring.

Reviewing prior authorizations

The Claims Acceleration Suite's prior authorization review augments human-based workflow to expedite manual review of prior authorization requests. At this stage of the process, Claims Data Activator integrates with Pega Care Management, which is available through Google Cloud Marketplace and Pega Marketplace. Pega's intuitive user interface and guided workflow tools deliver line-of-sight into the intake and authorization; reduces data entry through intuitive search and automated integrations; generates system-driven potential readmission flags to clinicians; automates duplicate identification and letter generation; and communicates near real-time accurate, and compliant prior-authorization decisions with documentation. It also can maintain and author policies for medical necessity and offer solutions to simplify the prior-authorization review process.

Claims Acceleration Suite privacy and security

Privacy and security are of the utmost importance in all aspects of Google Cloud's Claims Acceleration Suite. Through the implementation of Google Cloud's reliable infrastructure and [secure data storage](#) that support HIPAA compliance—along with each customer's layers of security, privacy controls and processes—customers are able to protect the access and use of patient data.

For more information on the Claims Acceleration Suite, visit cloud.google.com/solutions/claims-acceleration-suite.

About Google Cloud

Google Cloud accelerates every organization's ability to digitally transform its business. We deliver enterprise-

grade solutions that leverage Google's cutting-edge technology – all on the cleanest cloud in the industry. Customers in more than 200 countries and territories turn to Google Cloud as their trusted partner to enable growth and solve their most critical business problems.

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