Cohere Health

AI-driven clinical intelligence platform for health plans, automating prior authorization and utilization management to improve care access and reduce administrative costs.

https://www.coherehealth.com/utilization-management-suite

Overview

Cohere Health is a clinical intelligence company that provides the Cohere Unify™ platform, specializing in AI-powered prior authorization (PA) and utilization management (UM) solutions for health plans and risk-bearing providers. The platform is designed to transform the traditionally manual and burdensome PA process into a strategic asset, aligning physicians and health plans on evidence-based care paths.

Key Features and Capabilities

AI-Powered Prior Authorization Automation: The platform automates up to 90% of prior authorization requests, significantly accelerating decision-making and patient access to care.
Utilization Management Suite: Offers comprehensive solutions for UM, including in-house, delegated (Cohere Complete™), and hybrid deployment models to fit a health plan's specific operational needs.
Clinical Intelligence and Decision Support: Leverages responsible AI, machine learning, and deep clinical expertise to provide real-time, evidence-based guidance and 'nudges' to providers, improving care decision accuracy and reducing avoidable hospitalizations.
Payment Integrity (PI) Solutions: The platform unifies UM and PI data to offer proactive payment accuracy solutions (e.g., Cohere Validate™), reducing dependency on opaque, high-contingency-fee PI vendors and strengthening provider relationships.
Regulatory Compliance: The platform is proven to support compliance with CMS-0057-F and other interoperability standards through mature APIs (Cohere Connect™).

Benefits and Outcomes

Cohere Health's solutions have demonstrated significant results, including a 47% reduction in administrative costs, a 61% reduction in provider input time, and a 35-40% reduction in clinical review time. The platform maintains a high provider satisfaction rate (93%) and a strong Provider Net Promoter Score (NPS 64-67).

Key Features

- AI-Powered Prior Authorization Automation
- Utilization Management (UM) Suite
- Clinical Intelligence and Decision Support
- CMS-0057-F Compliance Support
- Payment Integrity (PI) Solutions
- Flexible Deployment (In-house, Delegated, Hybrid)
- Real-time Analytics and Reporting

Pricing

Model: enterprise

Pricing is not publicly disclosed and is based on an enterprise model, typically structured around the scope of utilization management services, deployment model (in-house, hybrid, or delegated), and volume of prior authorization requests.

Target Company Size: enterprise

Integrations

EHRs (Electronic Health Records), Availity, NaviNet

Compliance & Certifications

HITRUST r2, HIPAA, GDPR, NCQA Utilization Management Accreditation, URAC Health Utilization Management Accreditation