



The Compounding Value of Pharmacy Intelligence

Six leading health systems describe how improving the patient journey with Latent impacts care capacity and financial resilience.

01

Capacity

Find the patients a pharmacist should see today.

02

Capture

Keep the specialty fill inside the system.

03

Clinical time

Return pharmacist hours to the bedside.

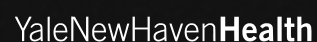
04

Access

Move prior authorizations in hours, not days.

FOUR DIMENSIONS OF VALUE

SIX HEALTH SYSTEMS



Health systems are operating at the edge of their capacity. Median health system operating margins are under 2% ⁷ while an aging population demands more care. Inefficiencies, poor patient adherence, and low capture volume in pharmacy have contributed to the problem. Health systems building intelligent pharmacy operations with Latent are turning the tide.

For 50+ U.S. health systems, Latent's enterprise pharmacy intelligence platform is at the heart of efforts to centralize operations, streamline processes, and create greater visibility into pharmacy performance. As teams deploy Latent across the patient journey, they're realizing value across four dimensions:

01

Expanding the capacity of existing teams



02

Capturing dispenses inside the system



03

Reclaiming lost clinical time



04

Improving patient access



StLuke's®

“We’re on track to save about half a million dollars in labor expenses just in the first year. And an additional two million dollars in EBITDA.”

Josh Weber, Senior Director and Associate Chief Pharmacy Officer, St. Luke’s Health System, Latent Customer

\$500K

Labor expense savings, year one

\$2M

Additional EBITDA

01

Expanding the capacity of existing teams

With Latent, health systems can automate the transactional work of prior authorizations, intake triage, denial management, and more. This reduces the administrative burden on clinical and pharmacy staff, boosts throughput, and defers new hires in a talent market that can’t keep up with demand.



+45.1%

PA submission capacity,
zero added headcount ¹

StLuke's

+1,200

added PA capacity/month,
same team; 7-day to 3-day
turnaround (57% faster) ²

YaleNewHavenHealth

+109%

PA throughput per team
member ³

St. Luke's prior authorization turnaround

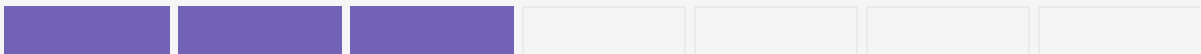
Before

– 7 days



After

– 3 days

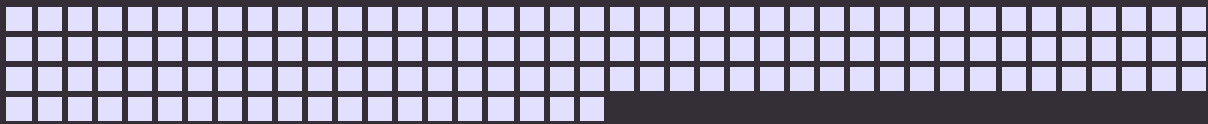


57% faster

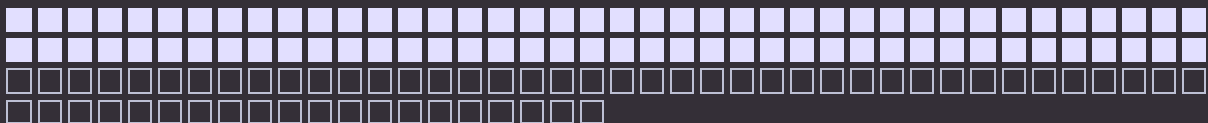
The pharmacist deficit

Health systems need more pharmacists than ever, but the pipeline supplying them is shrinking. Hiring more staff isn't just expensive. In many cases, it's impossible.

14,000 projected openings a year ⁸



8,000 pharmacy graduates a year ⁹



■ 1 dot = 100 pharmacists □ unfilled

6,000 fewer graduates a year than openings



“It used to take us about 30 minutes to complete each individual prior authorization. And now we’re down to the eight- to ten-minute time frame, which just means that I can do more with the same number of staff... I’ve been able to add on 14 new clinics without adding a single FTE.”

Kristen Kruszewski, Chief Pharmacy Officer, Cone Health.



“Anything I do with AI, I’m not looking to replace FTEs. I’m looking to replace the openings we’ve had for three months that we cannot find.”

Ryan Mezinger, SVP and Chief Pharmacy Officer, MetroHealth

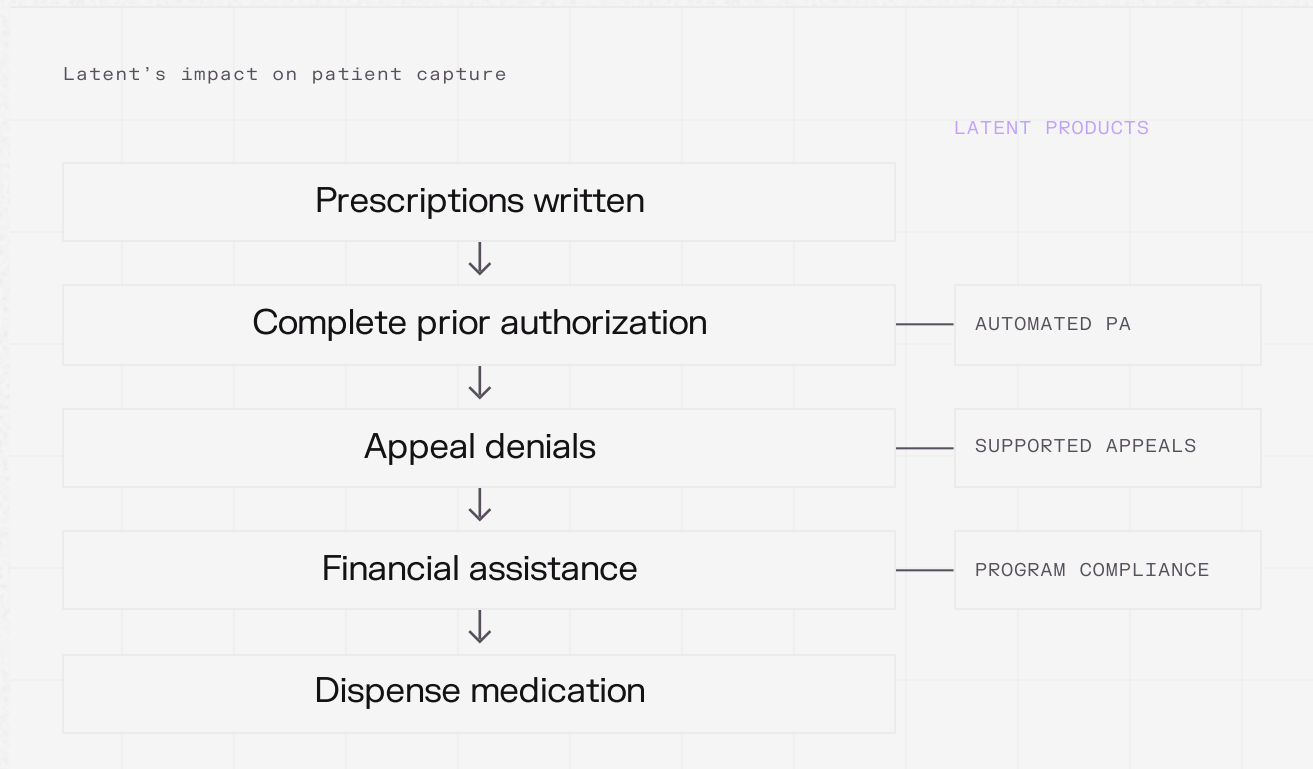
Capturing dispenses inside the system

Prior authorization is the top of the funnel. Some dispenses leak out of the system due to factors beyond control, including payer lockout, limited distribution networks, and patient choice.

But automating pharmacy operations (often in concert with a broader centralization effort) improves patient capture at every step between the prescription and the final dispense. Cleaner submissions raise first-pass approvals, denials route into appeals instead of dead ends, and every approved patient hears from the system's own pharmacy about filling with them.

This delivers a seamless patient experience while plugging the leakage, diversifying revenue, and supporting better follow-through on treatment for the patients who need additional support.

The same platform gives leaders clear analytics on pharmacy performance, including the distribution of approvals by payer, so capture becomes a managed number instead of a mystery.



Secured

\$50M

in copay assistance for its patients and lifted its specialty fill capture rate above 85%⁴

StLuke's

Avoided

~\$300K

in annualized labor cost and saw close to a multi-million dollar net-new revenue impact by routing more specialty fills back to its own pharmacies⁴

The prior auth paradox

Health systems are spending more on prior authorizations, but a massive percentage of patients never complete treatment. Realizing the total value of improved pharmacy operations requires addressing the full patient journey.

\$35B

spent annually on PA administration, excluding the cost of delays, denials, and abandoned treatment (Health Affairs Scholar).¹⁰

78%

of physicians say prior authorization leads patients to abandon treatment (AMA).¹¹

StLuke's®

“The ROI is compelling, but the bigger point is that [Latent] helps us deliver mission-driven care in a financially sustainable way.”

Kate Fowler, VP, Chief Financial Officer, St. Luke's Health System

03

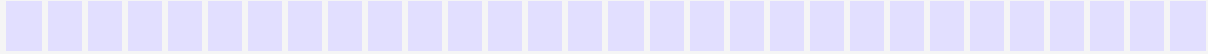
Reclaiming lost clinical time

Ask any clinic how prior authorization gets done and you'll hear about shadow work. Medical assistants spend 30 minutes on a single PA between patient visits. Providers finish documentation on their own time at night. Physicians get pulled into peer-to-peer reviews to argue medical necessity with an insurer's doctor. None of it is billable, and all of it comes at the expense of seeing patients.

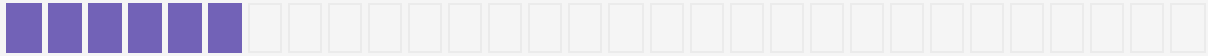
Latent takes that work off clinical teams entirely. Dedicated teams complete it faster and more accurately because it's all they do, while clinicians get their hours back. The payoff shows up in throughput, morale, and retention, because nobody went into medicine to fill out forms.

OchsnerHealth Appeal drafting time ⁵

Before – 30+ minutes



With Latent – 7.2 minutes



universityhealth®

Nursing hours reclaimed every week ⁶

~400

HOURS PER WEEK

StLuke's®

“In a lot of health systems, the work just grows quietly, and it becomes kind of this invisible tax on clinics... if your providers are in the in-basket an hour or less a day, how many more patient visits can we get across our ambulatory clinics?”

Josh Weber, Senior Director and Associate Chief Pharmacy Officer, St. Luke's Health System

04

Improving patient access

Faster access to therapy is the difference between a patient starting treatment and a patient abandoning it. Latent bridges the gap between diagnosis and treatment by automating prior authorization, intake, and benefits verification instead of routing paperwork through a queue. Speed supports retention. Patients who start therapy sooner are more likely to stay in the system and feel supported through their care.

YaleNewHaven**Health**

“Across our enterprise, physicians, nurses, pharmacists are really trying to accelerate care overall. Part of that includes medication and medication access, but we believe that this is a mission-critical part of care that drives patient experience, patient resilience, prevention, and curative therapies...”

- Marjorie Lazarre, VP and Chief Pharmacy Officer, Yale New Haven Health System



Healthier patients, healthier finances

The four dimensions of value compound.

THE DIMENSION	MEASURED EFFECT
01 Teams process more work with the staff they already have.	+45.1% PA submission capacity
02 More dispenses stay inside the system.	85%+ specialty fill capture
03 Clinicians get their hours back for patient care.	~400 nursing hours a week
04 Patients start therapy sooner and stay on it.	19.6% more prescriptions filled

Σ One platform holds it all together.

a single data set

Together, they drive the operating margin health systems need to care for more people.

Deployed in months. Measured in the first quarter.

Health systems deploy Latent in months and see measurable financial impact within the first quarter of go-live.

Pharmacists and clinicians do the work they trained for, more patients get the treatment their doctors prescribed, and an operation that has been leaking revenue becomes a durable source of financial health.

Today, more than two million patients a year access their medications faster because of Latent, now serving 50+ leading US health systems.

To learn what Latent can do for yours, reach out here.

Reach out here: latenthealth.com



Sources

1. MetroHealth case study
2. St. Luke's Health System case study
3. Yale New Haven Health case study
4. MetroHealth and St. Luke's: Proving AI ROI announcement
5. Ochsner Health appeal drafting case study
6. Latent centralization playbook
7. Kaufman Hall, National Hospital Flash Report: median hospital operating margin
8. U.S. Bureau of Labor Statistics, Occupational Outlook Handbook: Pharmacists (~14,200 projected openings per year)
9. KSMU, reporting UMKC and UHSP research: ~8,000 PharmD graduates projected for 2026
10. Health Affairs Scholar: Perceptions of prior authorization burden and solutions
11. American Medical Association 2023 prior authorization physician survey



The Compounding Value of Pharmacy Intelligence

Latent

Enterprise pharmacy intelligence

latenthealth.com

Featured: Cone Health / Ochsner Health / St. Luke's / MetroHealth / Yale New Haven Health / UHHC.

Third-party figures attributed to Kaufman Hall, BLS, KSMU, Health Affairs Scholar, and the AMA. See Sources above.