

Your Prior Authorization Vendor Evaluation Checklist

1.

When you quote an automation rate, is that a share of total prior auths or only the subset eligible for an API?

2.

What percentage of denials in your experience trace to documentation gaps, plan limits, or formulary issues?

3.

Who owns denied cases and retroactive-review clawbacks, your team or mine?

4.

Do you review documentation and build medical necessity before submitting?

5.

Which specialties and procedure categories do your reviewers handle directly?

6.

Do you schedule and manage peer-to-peer reviews and write the appeals?

7.

How do you measure impact on downstream billing denials, not just authorization denials?

8.

Do you also handle eligibility, documentation, and billing, or only the authorization itself?

9.

How do you keep documentation audit-ready and HIPAA-secure, not just approvable?

10.

The determination to keep moving forward and pushing through obstacles despite challenges.

