Utilization Management Partner

Buyer checklist and comparison worksheet

Define the operational problem before comparing partners. Evaluate ownership, capacity, quality, timing, implementation, and total operating cost together.

Organization / team

Date

Operational problem and evidence of the bottleneck

Review stages, case mix, specialties, volumes, and urgency

Models to compare: internal, outsourced, hybrid; work retained internally

Before you invite proposals

- [ ] Clinical, operations, and compliance colleagues agree on the scope.
- [ ] Required and preferred capabilities are separated.
- [ ] The same scenarios and evidence requests will be used for each partner.
- [ ] Decision authority, notices, records, and escalation responsibilities are identified.

Must-have requirements / unresolved scope questions

Use the same checklist for every vendor. Check a box only after the item is confirmed; keep evidence references in your approved procurement records.

Evaluate the partner

Check only after reviewing evidence. An unchecked item is an open question, not an automatic failure.

Partner name / legal entity

Reviewer / date

Workflow ownership

- [ ] Intake, assignment, clarification, decisions, delivery, and corrections have owners.
- [ ] Routing rules and system handoffs avoid unclear ownership or duplicate work.

Capacity and coverage

- [ ] Availability has been tested against case mix, arrival times, and peak demand.
- [ ] Backup coverage, surge limits, notice periods, and escalation are documented.

Quality and reporting

- [ ] Sample outputs and pre-delivery checks have been reviewed by the clinical team.
- [ ] Clarification, correction, recurring issues, and improvement measures are defined.

Timeliness

- [ ] Start, pause, stop, urgency groups, exclusions, and periods are comparable.
- [ ] Reporting includes late cases, unresolved work, and escalation responsibilities.

Implementation

- [ ] Access, security review, integration, training, and milestones have owners.
- [ ] A controlled start, acceptance criteria, and early performance review are planned.

Cost and transition

- [ ] Base fees, extras, integration, oversight, and rework costs are identified.
- [ ] Termination, record access, and transition arrangements are understood.

Evidence reviewed / open gaps (no patient details)

Compare evidence and decide

Use S = supported, P = partial, G = gap, or N/A. Ratings summarize evidence; they are not a compliance score.

	Partner A	Partner B	Partner C

Evaluation area	A	B	C
Workflow ownership			
Capacity and coverage			
Quality and reporting			
Timing definitions			
Implementation readiness			
Cost and transition			

Priority gap / evidence still needed

Next action and owner

Due date

Decision / conditions to resolve before contracting

Sources and companion guide:

NCQA: Utilization Management

Read the online buyer guide