



Healthcare providers | Product sheet

TriZetto Provider Prior Authorization Solution

Adopting standardized prior authorization APIs and replacing outdated tools improves data exchange, coordination of care and overall efficiency.

Healthcare providers face significant challenges due to fragmented payer-provider collaboration that leads to inefficiencies and burnout. Providers spend nearly 28 hours per week on administrative tasks, leading to revenue leakage and delayed or denied claims.¹ These issues undermine patient satisfaction, staff morale and financial outcomes.

Prior authorizations play a crucial role in patient experience and access to timely care. Today's processes lead to significantly negative impacts on healthcare outcomes. The requirements and submission methods for requesting prior authorizations vary greatly across a provider's payer mix, making it difficult for offices to submit, track and manage authorizations effectively. On average, providers spend 11 minutes per transaction, resulting in a \$317M cost-saving opportunity for providers alone.²

¹<https://www.chiefhealthcareexecutive.com/view/administrative-work-takes-up-bulk-of-week-for-clinicians-medical-office-staff-poll>

² 2023 CAQH Index Report

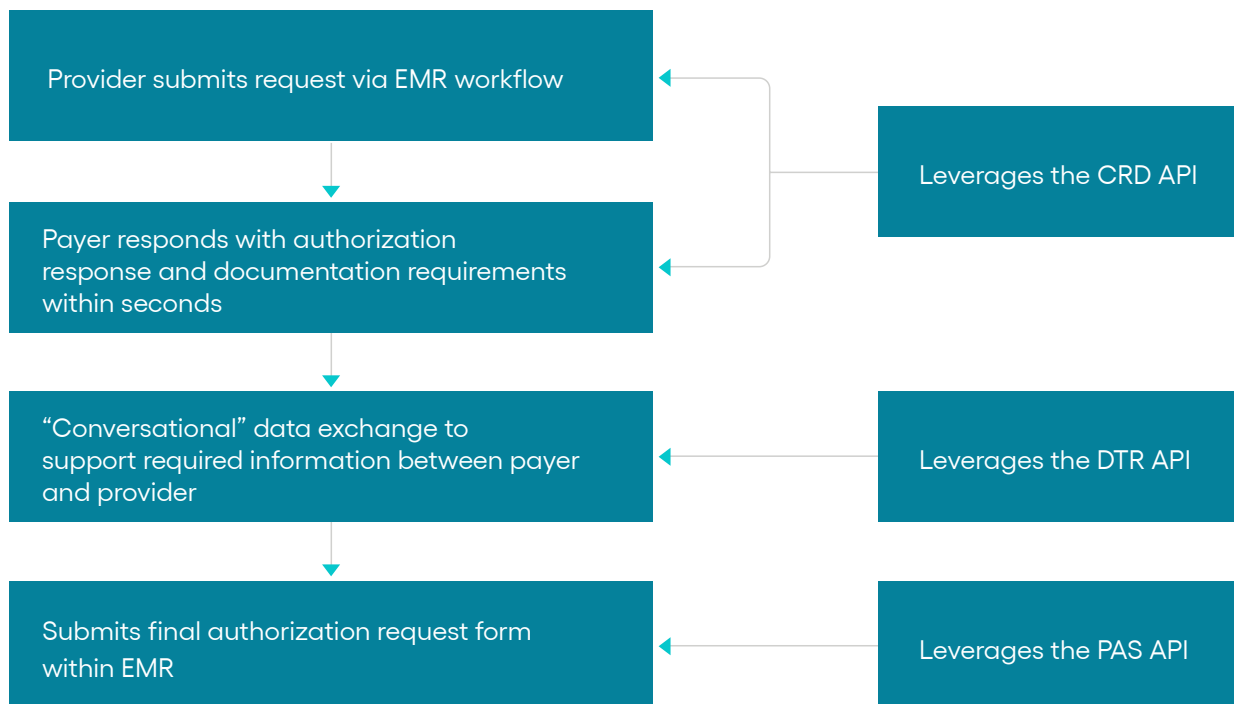
A solution for better prior authorization outcomes

Cognizant's TriZetto® Provider Prior Authorization Solution addresses these challenges by providing real-time payer data and workflow guidance within the office workflows. This enables providers to navigate complex payer demands more effectively, reducing friction and enhancing collaboration. By identifying payer requirements and documentation needs before creating the prior authorization, our solution validates that providers have the necessary approvals in place without extensive manual effort. Additionally, the TriZetto Provider Prior Authorization Solution implements FHIR® interoperability standards into EMR systems that align payer and provider workflows, reducing misaligned processes, minimizing disputes and improving overall efficiency.

Bridging the payer-provider gap

Our prior authorization solution utilizes three essential FHIR-based APIs to effectively bridge the payer-provider gap. The Coverage Requirements Discovery (CRD) API quickly determines whether a prior authorization is required, providing a clear yes, no or uncertain response within seconds, thus eliminating guesswork and reducing delays. The Documentation, Templates and Rules (DTR) API identifies the necessary supporting documentation and facilitates the collection of additional information through HL7® FHIR questionnaires, ensuring all required data is accurately gathered and shared. Lastly, the Prior Authorization Support (PAS) API enables the digital submission of prior authorization requests and provides real-time status updates from payers, significantly accelerating the authorization process. These APIs enhance transparency, streamline workflows and foster a more collaborative and efficient relationship between payers and providers, ultimately improving patient care outcomes.

TriZetto Provider Prior Authorization Solution workflow



Addressing fragmentation

The TriZetto Provider Prior Authorization Solution adopts standardized APIs and data exchange protocols mandated by regulatory bodies to ensure compliance and facilitate smoother interactions between providers and payers. It also replaces outdated communication methods like fax machines, phone calls, and payer portals with modern, integrated solutions, improving the speed and accuracy of data exchange. The solution transforms EMRs to become active enablers of outcomes, reimbursements and provider efficiency, ultimately improving the overall healthcare experience for providers, payers and patients.

Cognizant's TriZetto Provider Prior Authorization Solution enables providers to:

- Connect with numerous payers through a single connection
- Identify upfront which services require prior authorizations at the time of care
- Expedite authorization approvals by increasing awareness of documentation requirements
- Improve patient experiences by providing quicker access to care

70% reduction in the need to submit prior authorization requests due to CRD transactions*

*Cognizant data analysis



Cognizant (Nasdaq:100: CTSI) engineers modern businesses. We help our clients modernize technology, reimagine processes and transform experiences so they can stay ahead in our fast-changing world. Together, we're improving everyday life. See how at www.cognizant.com or @Cognizant.

World Headquarters

300 Frank W. Burr Blvd.
Suite 36, 6th Floor
Teaneck, NJ 07666 USA
Phone: +1 201 801 0233
Fax: +1 201 801 0243
Toll Free: +1 888 937 3277

European Headquarters

280 Bishopsgate
London
EC2M 4RB, England
Tel: +44 (0) 20 7297 7600

India Operations Headquarters

5/535, Okkiam Thoraiappakkam,
Old Mahabalipuram Road,
Chennai, 600 096 India
Tel: 1-800-208-6999
Fax: +91 (0) 44 4209 6060

APAC Headquarters

1 Fusionopolis Link,
Level 5 NEXUS@One-North,
North Tower, Singapore 138542
Phone: +65 6812 4000

© Copyright 2025–2027, Cognizant. All rights reserved. No part of this document may be reproduced, stored in a retrieval system, transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the express written permission of Cognizant. The information contained herein is subject to change without notice. All other trademarks mentioned here in are the property of their respective owners.