

Payment Partner Evaluation Checklist

Choosing the right healthcare payment partner is a strategic decision. This checklist is designed to help leadership teams evaluate vendors consistently, identify risk, and compare solutions side by side.

Use it during demos, procurement reviews, or board discussions to ensure nothing critical is overlooked.



Vendor name:

Company website / URL:

Primary product(s) evaluated:

Evaluation date:

Evaluator(s):

Department / role(s):

Current vendor (if applicable):

Stage of evaluation: Initial review Shortlist
 Finalist Renewal review

Implementation model: Standalone Replacing existing
 Integrated with PMS/EHR

Estimated contract term:

Additional notes/context:

1. COMPLIANCE & ACCOUNTABILITY (NON-NEGOTIABLE)

Your payment partner must protect both cardholder data and protected health information (PHI).

Required capabilities

- HIPAA-compliant payments
- PCI-compliant payments
- Provides a signed Business Associate Agreement (BAA)
- Documents regular security testing and risk assessments
- Maintains clear audit trails for payment-related data
- Enforces role-based access and authentication
- Documented breach detection, response, and notification procedures

Validation questions

Is your platform designed and purpose-built for the healthcare industry?

Do you have independent assessments verifying HIPAA and PCI compliance?

How does your platform protect PHI?

How does your platform support breach investigation and incident response if PHI is exposed?

Additional notes:

2. CONNECTIVITY & AUTOMATION

Disconnected systems create manual work, errors, and compliance exposure. Automation should reduce – not shift – administrative burden.

Required capabilities

- Seamless PMS/EHR integration
- Automated payment posting and reconciliation
- Real-time visibility into payment status and exceptions
- Minimal manual intervention for staff

Validation questions

What parts of AR are fully automated – and what still require manual work?

How does the solution eliminate manual posting for staff?

What level of effort is required to implement and maintain integrations?

Additional notes:

3. WORKFLOW DESIGN FOR HEALTHCARE

Healthcare payments require workflows built specifically for clinical environments – not retrofitted retail tools.

Required capabilities

- No manual rekeying of payment data
- PHI-safe links, portals, and communications
- Payment workflows designed for healthcare use cases
- Clear separation of clinical and financial data

Validation questions

Where do staff still need to “bridge the gaps” manually?

How does the solution reduce operational risk in daily workflows?

Additional notes:

4. SCALABILITY & CHANGE READINESS

Payment systems should support growth – not slow it down.

Required capabilities

- Designed for organizations of all sizes
- Easy onboarding and role management
- Ongoing training and support resources
- Ability to adapt as regulations evolve
- Provides ongoing training and compliance education for staff

Validation questions

Will this platform scale as our organization grows or changes?

How does the solution adapt to evolving HIPAA and state requirements?

What support is available for onboarding and ongoing training?

How do you help our team stay compliant as workflows and regulations evolve?

Additional notes:

5. DEMONSTRATED OUTCOMES

Claims matter less than results. Evidence builds confidence.

Required proof

- Documented improvements in collections or cash flow
- Measurable workflow efficiency gains
- Demonstrated compliance posture improvements
- Verified customer reviews and references

Validation questions

Do you have case studies for organizations like ours?

What ROI should we expect – and over what timeframe?

Where can we find unbiased third-party reviews?

Additional notes:

ADVANCED CRITERIA: REIMBURSEMENT AUTOMATION (DIFFERENTIATOR)

Patient payments are only half of accounts receivable. Reimbursement automation completes the AR cycle.

Value-add capabilities

- Electronic ingestion of EOPs
- Automated matching of payments to claims
- Automatic posting to patient accounts
- Real-time identification of underpayments or discrepancies

Why it matters:

When patient payments and reimbursements are automated together, AR becomes faster, cleaner, and far more predictable.

FINAL EVALUATION

- Meets all non-negotiable compliance criteria
- Reduces manual work across AR
- Supports growth and regulatory change
- Demonstrates measurable outcomes
- Positions payments as a strategic advantage – not just a function