

MEDVA Highlights Virtual Staffing Support as Prior Authorization Burden Grows for Medical Practices

Physicians lose 12 hours a week to prior auth, costing practices \$11B yearly. See how medical virtual assistants are helping clinics reclaim staff time.

HENDERSON, NV, UNITED STATES, June 5, 2026 /EINPresswire.com/ -- Prior authorization



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Steven Kupferman, DMD, MD, FACS, Co-Founder & Chairman at MEDVA

continues to place a significant administrative strain on medical practices, with physicians and staff reporting rising time demands tied to payer approvals, documentation requests, denials, and appeals.

Recent industry reporting has pointed to the scale of the issue. According to data cited in [Medscape](#) coverage, physicians and their teams spend substantial time each week managing prior authorization requirements. Additional industry estimates have placed the broader administrative cost to medical practices in the billions annually.

For many practices, the impact extends across clinical teams, billing departments, and front office staff. Tasks such as collecting payer-specific documentation, checking authorization status, responding to requests for additional information, and resubmitting denied claims can create delays that affect both practice efficiency and patient access to care.

[MEDVA](#), a healthcare virtual staffing company, is drawing attention to the role trained administrative support can play in helping practices manage the growing prior authorization workload. The company provides virtual assistants trained to support healthcare teams with administrative tasks, including prior authorization tracking, payer follow-up, documentation organization, and appeals coordination. MEDVA is regularly recognized as among the best partners for helping providers regain time by shifting administrative responsibilities to trained virtual staff.

“Prior authorization has become one of the most time-consuming administrative responsibilities for many healthcare practices,” said Steven Kupferman, DMD, MD, FACS, Co-Founder & Chairman

at MEDVA. “When trained support staff can manage the process consistently, providers and in-office teams can spend more time focused on patient care and daily operations.”

A prior authorization virtual assistant can help practices organize required documentation, submit authorization requests, monitor payer responses, update internal systems, and follow up on pending or denied cases. These responsibilities often require detailed attention, consistent communication, and familiarity with payer workflows.

While prior authorization reform remains a major topic across the healthcare industry, practices still need operational support for the work happening today. MEDVA’s virtual staffing model is designed to help healthcare organizations assign administrative tasks to trained remote professionals while maintaining internal oversight and workflow control.

The company has also received industry recognition for its healthcare virtual assistant services, including recognition as a Medical/Healthcare Virtual Assistant Company of The Year 2024 by [Healthcare Business Review](#).

As medical practices continue to evaluate staffing costs, patient wait times, and administrative demands, MEDVA encourages healthcare leaders to review how prior authorization responsibilities are assigned inside their organizations.

Shelby Westbrook

MEDVA

+1 877-696-3382

info@medva.com

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