

CMS final rule to streamline Prior Authorization





Objective Streamline the PA Process into Provider Workflows

Prior Auth API

Compliance date: JAN 1, 2027
Build an API for Providers
to query a Payer's Prior
Auth requirements,
submit requests, and
receive Payer's response.
Streamline everything
within the Provider's
workflow.



Objective Faster Timelines

Prior Auth Decision Timeframes

Respond within 72 hours of receiving urgent requests and seven days for standard requests.



Objective Increase Transparency on PA Decisions

PA Denial Reason Specificity

Compliance date: JAN 1, 2026

Include a specific reason for denying a Prior Authorization request.



Objective Improve Transparency into PA Outcomes

Prior Auth Metrics

Publish metrics about Prior Authorization processes and outcomes. Include % of requests approved, denied, average review time, etc.

Payers need to streamline and simplify their processes starting now

In addition to building FHIR APIs, Payers will have to perform several other complex, time-consuming implementations....



...to streamline PA process in Provider workflow

CRD Server

CQL Rules

EHR Integration

SMART on FHIR Apps

CDS Hooks

EHR App Gallery

FHIR Questionnaires

спк Арр Gallery

X12-FHIR Transformer

...to shorten TAT & improve transparency

Evidence-based CDS

Gold Card Providers

Al-enabled Missing Information Alert

Intelligent Prior
Auth Processing

Intelligent Routing for Clinical Review

GenAl-based Clinical Review

Configurable Payer Rules Repositories

Analytics & Reporting