

CMS Interoperability and Prior Authorization Surveys

- ❖ Jan-Feb 2025
- ❖ Oct 2025



Surveys are in response to the CMS 2.8.24 [0057-F Final Rule](#)



Rule includes: Patient Access, Provider Access, Payer-to-Payer, and Prior Authorization application programming interface (API) requirements.



Impacted payers are required to implement metric reporting by 1.1.26 and the API requirements by 1.1.27.



Jan/Feb survey received **243** responses. Oct survey received **177** responses. Next one-early 2026!

Survey Purpose and Background

Survey was developed
with assistance from the
WEDI Prior Authorization
SWG co-chairs and
attendees

Co-Chairs –Janice Bakos
(CVS Aetna), Rajesh
Godavarthi (MCG Health),
Heather McComas (AMA),
and Michael Lunzer (Itility
Health)

Survey Respondents



Jan/Feb 2025

Oct 2025

ANSWER CHOICES	RESPONSES	TOTAL	ANSWER CHOICES	RESPONSES	TOTAL
Provider	21.4%	52	Provider	14.1%	25
Payer	44.9%	109	Payer	48.0%	85
Clearinghouse	9.5%	23	Clearinghouse	5.1%	9
Vendor	24.2%	59	Vendor	32.8%	58
TOTAL		243	TOTAL		177

CMS-0057-F: Uncertainty Reduced



June 23rd Health Plan Pledge to Support APIs

Release of the HTI-4 Final Rule-APIs Included in EHR Certification

HTI-4 Requires Adherence to the IGs

HHS Focus on Patient-Centered Health Care (Including APIs)

Survey Highlights by Stakeholder Group



Survey Highlights: Payers



Jan/Feb results: For the API requirements, **43%** of payers have not yet started work and **31%** are ¼ completed. **Oct** results: **33%** have not started, **33%** are ¼ complete.



Top 3 payer challenges: Jan/Feb: 1) Determining a cohesive enterprise strategy for interoperability; 2) Digitizing prior authorization policies; and 3) Sufficient funding. **Oct:** 1) Digitizing prior authorization policies; 2) Meeting compliance timelines; 3) Delegating 3rd-parties facing challenges connecting with different systems



Will you include drugs? Jan/Feb: 1) Plan to include-25%; 2) Do not plan to include-27%; 3) Not decided-40%; 4) Unsure/N/A-9%. **Oct:** 1) Plan to include-13%; 2) Do not plan to include-45%; 3) Not decided-33%; 4) Unsure/N/A-9%.



Readiness to report metrics on 1.1.26: Jan/Feb: 1) 100% ready-12% 2) 50-75% ready-22%; 3) 25% ready-27%; 4) Not yet started-25%, 5) Unsure-15% **Oct:** 1) 100% ready-18% 2) 50-75% ready-43%; 3) 25% ready-18%; 4) Not yet started-2%, 5) Unsure-5%; 6) Only in states where required-3%

Survey Highlights: Providers



Jan/Feb: For the API requirements, **52%** of providers reported not yet started work, **14%** are one quarter completed. **Oct:** **47%** had not started and **7%** were ¼ complete



Top 3 provider challenges: Jan/Feb: 1) Sufficient funding, 2) Determining a cohesive enterprise strategy for interoperability, and 3) Sorting out networks and how they interplay (TEFCA/QHIN/HIE, etc.). **Oct:** 1) Developing new workflows; 2) Sufficient internal expertise; 3) Sufficient funding



Rate the level of importance of your organization implement the PA API Jan/Feb: 67% Extremely Important/Very Important, 21% Moderately, 10% Slightly/Not Important, N/A 13%. **Oct:** 56% Extremely/Very Important, 25% Moderately, 6% Slightly/Not Important, N/A 13%



Importance of the majority of your payers implementing the PA API. Jan/Feb: Extremely or Very 78%; 2) Moderately 10%; 3) Not at all 10%. **Oct:** 1) Extremely or Very 75%; 2) Moderately 6%; 3) N/A 19%



Will your organization be assisting payers implement 0057-F?
Jan/Feb: 1) yes-82%; 2) No-2%; 3) Unsure-16%.



Oct: 1) yes-75%; 2) No-2%; 3) Unsure-23%.



Will your organization be assisting providers implement 0057-F?
Jan/Feb: 1) yes-55%; 2) No-23%; 3) Unsure/N/A-22%.



Oct: 1) yes-64%; 2) No-7%; 3) Unsure-29%.

Survey Highlights: Clearinghouses



Plan to conduct PA APIs for your payer customers? Jan/Feb: Yes-84%, No- 5%; Unsure-10% **Oct:** Yes-43%, No- 0%; Unsure-43%; N/A-14%



Plan to conduct PA APIs for your provider customers? Jan/Feb: Yes-57%, No- 0%; Unsure-10% **Oct:** Yes-57%, No- 0%; Unsure-43%; N/A-0%



Question for All Respondents



Support for Staggering Implementation of CRD/DTR/PAS. Jan/Feb: 1) Very Supportive/Supportive 50%; 2) Moderately/Slightly-19%; 3) Not supportive-19%; 4) Unsure N/A-11% **Oct:** 1) Very Supportive/Supportive-56%; 2) Moderately/Slightly-22%; 3) Not supportive-13%; 4) Unsure-9%

**INTRO TO
FINAL RULE**

**GOVERNMENT
RESOURCES**

**wedi
TESTING
DIRECTORY**

**HL7/DAVINCI
RESOURCES**

**INDUSTRY
RESOURCES**

**wedi
RESOURCES**

PAST EVENTS

[9.4.25] Connecting the Dots – Integrating Electronic Prior Auth with External Care Guideline Vendors, UM, Case Management & Claims Systems (Part 2 of 2) Sponsored by Itiliti Health

[8.21.25] CMS-0057: Streamlining Prior Authorization and Delegated Vendor Collaboration (Part 1 of 2) Sponsored by Itiliti Health

[6.11.25] WEDI Spotlight: CMS 0057 Implementation Update- Provider and EHR Perspective

[4.9.25] WEDI Survey Insights: The State of Interoperability & Prior Authorization in Health Care

[3.18.25] WEDI Spotlight: CMS 0057 Implementation Update- Payers and Prior Authorization, sponsored by Itiliti Health

WEDI SURVEY CMS-0057-F



**FALL 2025 INTEROPERABILITY
AND PRIOR AUTHORIZATION
SURVEY**

NOW OPEN



wedi

**INTEROPERABILITY AND PRIOR
AUTHORIZATION SURVEY**

VIEW THE RESULTS

UPCOMING EVENTS



2025 WEDI National Conference

Washington DC, November 3-6, 2025

Sessions on CMS-0057-F implementation, testing and more. Hear from Payers, Providers, Solutions Vendors.



**Policy in action: End-to-end traceability and automation
for CMS-0057-F, sponsored by Cohere Health**
Virtual November 18th, 1-2PM ET

Join Cohere Health's clinical and technical leaders to learn how plans can use policy digitization, AI-driven data extraction, and clinically intelligent automation to go beyond compliance.

Join the Workgroup!

Prior Authorization SWG:
3rd Tuesday of every month
From 2-3pm ET



Interested in
participating? Contact
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