Health Information Technology Advisory Committee

Electronic Prior Authorization RFI Task Force 2022 Virtual Meeting

Meeting Notes | March 3, 2022, 10:00 a.m. – 11:30 a.m. ET

Executive Summary

The focus of the Electronic Prior Authorization RFI Task Force 2022 (ePA RFI TF 2022) was to continue the work of the task force. The TF reviewed its work plan and the Request for Information (RFI) on Electronic Prior Authorization Standards, Implementation Specifications, and Certification Criteria published by ONC on January 24, 2022. Members reviewed comments on its working documents and provided feedback in preparation for the co-chairs' presentation of the TF's work to the HITAC at its March 10, 2022, meeting. There were no public comments submitted by phone, but there were several comments submitted via the chat feature in Zoom Webinar.

Agenda

10:00 a.m.	Call to Order/Roll Call
10:05 a.m.	Welcome Remarks, Review of Plan
10:10 a.m.	Working Documents Review and Discussion
11:20 a.m.	Public Comment
11:25 a.m.	Homework and Next Steps
11:30 a.m.	Adjourn

Call to Order

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:03 a.m. and welcomed members to the meeting of the ePA RFI TF 2022.

Roll Call

MEMBERS IN ATTENDANCE

Sheryl Turney, Anthem, Inc., Co-Chair
Tammy Banks, Individual, Co-Chair
Hans Buitendijk, Cerner
Dave DeGandi, Cambia Health Solutions
Rajesh Godavarthi, MCG Health
Jim Jirjis, HCA Healthcare
Rich Landen, NCVHS
Heather McComas, AMA
Patrick Murta, Humana
Eliel Oliveira, Dell Medical School, University of Texas at Austin
Debra Strickland, NCVHS

ONC STAFF

Mike Berry, Designated Federal Officer

Alex Baker, Federal Policy Branch Chief
Michael Wittie, Public Health Analyst

Key Specific Points of Discussion

TOPIC: WELCOME REMARKS, REVIEW OF PLAN, SUMMARY OF HITAC UPDATE

Sheryl Turney and Tammy Banks, ePA RFI TF co-chairs, welcomed everyone. They thanked TF members for their hard work on the TF's shared documents between meetings and Hans for his presentation at the previous meeting. Sheryl reviewed the agenda for the meeting and the TF workplan. She explained that an additional work session was added for Monday, March 7, 2022, to review the final ePA RFI TF work product prior to the presentation to the HITAC.

TOPIC: WORKING DOCUMENT REVIEW AND DISCUSSION

Tammy reviewed the most recent draft of the ePA RFI TF's overall recommendations document and described updates. She invited members to focus on the content of the document and advised them that wordsmithing would continue to be completed during offline work. TF members reviewed the document.

DISCUSSION:

- Tammy reviewed the recommendations in the Standards & Regulations topic section and invited TF members to submit comments or concerns.
  - Hans Buitendijk asked to change "EMR or other health IT vendor" to "health IT vendor" under the recommendation on Office of the Inspector General (OIG) guidance.
  - Patrick Murta asked to discuss the recommendation that the certification should support the complete PA workflow and be structured to allow both ONC and HIPAA regs to update/change independently but remain harmonized with strong consideration of the status of the other regs. TF members discussed the overall intention of the recommendation and updated it to emphasize that the end goal is certification, though individual components can be certified and implemented incrementally. Jim Jirjis cautioned that, though the TF should advocate for the initial approach to be incremental, they should ensure that vendors or providers do not simply stop with a portion of it. Tammy discussed the recommendations in the section and emphasized that the key thing is to ensure that the standard and regulation changes/considerations are in order. Hans suggested adding "across one or more provider or payer health IT systems" to the second bullet.
  - Rich Landen commented in support of the inclusion of all five bullets but suggested removing "based on the preference of the payer" to avoid misinterpretation. Sheryl voiced her agreement, and other TF members discussed the wording. They decided to move this comment from the Standard & Regulations topic section to the iterative process section.
- Tammy reviewed the recommendations in the Attachments topic section and invited TF members to submit comments or concerns.
  - Hans asked for clarification around the intent of the second bullet, and Tammy suggested adding the word "artifact" after FHIR (Fast Healthcare Interoperability Resources). However, TF members discussed the recommendations and decided to remove the second sentence of the second bullet. Hans asked if "C-CDA or FHIR documents" should be added.
- Tammy reviewed the recommendations in the "Prior Authorization Roadmap to FHIR" topic section and invited TF members to submit comments or concerns. She noted that she removed the attachment bullet from this section and that several caveats would be added.
  - Raj and Patrick discussed the text of the first bullet, which was updated to read "move from a document-driven approach to an event-based and data-driven approach." Sheryl commented that "for example" should be added to the bullet listing key metrics (under the first bullet), as the list is not exhaustive. Heather McComas suggested adding "the percentage of PAs in which the determination can be completed digitally to the list of key

metrics." Hans suggested adding the eventual goal that no human intervention would be needed. TF members discussed the wording and decided to finish wordsmithing during work on the shared Google document.

- Eliel Oliveira recommended adding a bullet that stated that the return on investment and review and analysis should be done independently/by another group. TF members voice support and discussed the wording.
- Hans commented that the second bullet under the second recommendation should be reworded to indicate that the eventual goal should cover beyond a singular health IT system. Tammy offered to refine the wording during offline work.
- TF members discussed the first bullet under the second recommendation that the phased, iterative path provides certification specifications contained within each implementation guide (IG) with a timeline, based on the maturity of the functional specifications within the Da Vinci Project's IGs and the speed of the industry's ability to comply, which includes the Committee on Operating Rules for Information Exchange (CAQH CORE) timeliness operating rules. Tammy stated that she would cite the applicable rule, and Hans inquired if the operating rules are a FHIR-based environment or based on an X12 set of interactions. Hans and Tammy discussed the speeds of these environments, and Hans will update the wording after reviewing the rule. The TF could discuss this item at its next meeting.
- Rich asked about the TF's intended timeline for the recommendations in this section, and Tammy responded that she would use language from the final rule around the timeliness of response. Tammy will update this bullet for clarity and could, potentially, pull information into a new bullet.
- Hans asked for clarity around the recommendation in the final sub-bullet ("Includes uniformity with current and future regulations/requirements"), and Tammy explained that she followed a previous comment to remove mentions of specific legislation. They discussed the wording (e.g., "consistency" versus "alignment") and decided on the wording "Maintains alignment with current and future regulations/requirements."

- Tammy asked TF members to review the bullets with recommendations on how to manage a rollout of a PA plan, and she explained that members have not discussed these items on a call, only during offline work. Sheryl commented the TF's recommendation should not say, "No requirements rolled out" and recommended "No certification enforcement," with an indication that an alignment of the standards is needed over time. Sheryl discussed the intent behind the bullets and asked TF members to consider how to bring the various levels of provider maturity and electronic medical record (EMR) systems into the on-ramp, which could be through a phased approach. She asked members to consider what the target or goal should be in terms of certification requirements. Patrick suggested adding a sub-bullet to advocate for the ability to roll out individual components as they are ready that are fully tested through individual components leading to implementation IGs.
  - Sheryl asked if the TF should add any recommendations related to the fact that some vendors are already talking about adopting the Da Vinci Prior Authorization Support (PAS) IG without the Coverage Requirement Discovery (CRD) and Documentation Templates and Rule (DTR) IGs. Patrick commented that no vendors have implemented all three IGs; anything that has been implemented has provided enormous value. Hans added that the HIMSS Electronic Health Record Association (EHRA) discussed this situation and determined that implementing the CRD and PAS IGs creates a more straightforward interaction. He recommended this as a starting point and asked how the TF could add a recommendation that would create intent and incentive to move forward using tools that are in place across the overall ecosystem. He suggested looking at the CMS rules and that there should be a target to create a roadmap that includes, but does not only focus on, certification and incentives using "bonus points." As a result of his comments and discussion with Tammy, a rough recommendation was added to work with CMS to balance out/look at/focus on stages of harmonization/what CMS-provided incentives to payers and providers, and to provide guidance where focus on the use of the standards.

- Eliel commented that the overall section should emphasize the development of an informed and industry-vetted, iterative rollout plan in collaboration with stakeholders. It will allow for adoption and maturity at scale of a fully functional PA workflow by setting/service. Tammy added the comment, and Hans offered to update the wording during offline work. Raj commented that the intent of this statement was captured elsewhere in the document, so TF members refined the wording and intent.
- Raj discussed the second sub-bullet and suggested removing the second sentence from it, as it is an example. Heather stated that the example is useful, while Raj commented that a more general example could be added. Tammy suggested adding "e.g., ambulatory practices" to the first sentence and removing the second sentence. The TF updated the wording to the third bullet to include mentions of the PAS, DTR, CRD, and IGs.

- Tammy reviewed the recommendation in the "Governance" topic section and invited TF members to submit comments or concerns. The recommendation is to create a Burden Reduction Subcommittee with the notice of proposed rulemaking (NPRM) that examines PA adoption, standards maturity, and scalability from a multi-stakeholder perspective and makes recommendations for annual certification. Stakeholders need the ability to come together to match the same requirements and ensure API conformity. She stated that this could be similar to a workgroup of the Interoperability Standards Advisory (ISA) or could overlap with work underway by the Da Vinci Project.
  - Hans voiced his agreement with the overall suggestion, but he was unsure if the ISA should be involved and how to determine readiness (e.g., are four of five bullets in a section on the rating?). The recommendation should more clearly define the focus of the group.
  - Rich stated that some of the terms (governance, Burden Reduction Subcommittee) need to be clarified. Would this be a subcommittee of ONC/the HITAC? Sheryl explained that this was the original intent during early discussion. Raj commented that the focus should be on PA maturity and adoption. Heather agreed with the need for an operational oversight group that evaluates the iterative process on an ongoing, structured basis. Tammy updated the text to refer to an oversight process with the NPRM. TF members discussed the intent and wording of the recommendation, keeping in mind ONC's role and the TF's charge. Sheryl suggested creating an oversight process that advises on the adoption lifecycle, and Hans suggested that the recommendation should be to establish a review and advisory process. Eliel suggested that a recognized coordinating entity (RCE) could be used to manage the rollout. Can ONC use an RCE to manage this work (similar to how they have worked with the Sequoia Project in the past)?
- Tammy reviewed the working Google document the ePA RFI TF used to compile member comments and asked for feedback on the following items:
  - What language can the TF use to indicate that any specific criteria included are just a guide? Hans and Dave suggested language and offered to wordsmith the recommendation that ONC should work with Da Vinci and other key stakeholders to determine the correct level of granularity in finalizing the iterative plan to leading toward adoption of the IGs. They emphasized that the model could mature as the industry matures. Eliel commented that patients should be among the stakeholders included. TF members discussed ways to include information from the spreadsheet in their working Google document, and Sheryl suggested including it as an appendix to the report to the HITAC. Heather offered to add information around the recommendation related to when a patient wants to self-pay for service.
  - Review the recommendation around an EHR native solution (vs. a SMART on FHIR solution), and Dave reviewed the comments he added to the working document, noting that the best option is to have the functionality native to the EHR. He stated that this is not the only solution. Patrick stated that some of the information and examples included in the TF's document were too specific and suggested that it would be better suited for inclusion in an IG. Hans commented that the focus of the recommendations and IGs should be what interactions are needed for certification and not how systems should do it, specifically

(focus on interoperability). Raj commented that the TF should focus on the "what" level, as the "how" level is and should be addressed in the IGs. Tammy asked if the illustrative examples included in the TF's recommendations could provide guidance, and members agreed that they should only be included to provide clarity. Several TF members offered to work on the wording during offline work. Heather asked if the TF could submit recommendations on the IGs that are currently being balloted, and Dave stated that, as a member of the Da Vinci Project, he is signed up on the ballot and registered to submit comments.

Action Items and Next Steps

Before next meeting, ePA RFI TF members were asked to:

- Review the entire "2.24.22 DRAFT PA RFI TASK FORCE COMPILED COMMENTS – Master Draft" (uploaded in Google docs) and add any additional comments/revisions for clarity.
- The co-chairs add their work and will make the report available to all TF members by the end of the day on Friday, March 4.
- TF members who have offered to do offline work should complete it as soon as possible.
- Because of the deadline for the RFI, all work must be final by the time the TF presents to the HITAC. A voice vote will be held to determine if the recommendations are approved, after which, they will be transmitted to the National Coordinator for Health IT.
- The co-chairs will ensure that all TF members can access all Google documents as soon as possible.

On Monday, March 7, the TF will finalize its recommendations to the HITAC. Then the co-chairs will present the TF's final recommendations, including the transmittal letter and presentation materials, at the March 10, 2022, meeting.

Public Comment

QUESTIONS AND COMMENTS RECEIVED VIA PHONE

There were no public comments received via phone.

QUESTIONS AND COMMENTS RECEIVED VIA ZOOM WEBINAR

Hans Buitendijk: Suggest to use "certification program".

Michael Berry: Good morning, everyone and welcome to the ePrior Auth RFI task force. Please remember to change your chat setting to "Everyone" if you would like everyone to see your chat. Thanks!

Heather McComas: Agree with Hans . . . need to make sure all of the pieces work together if multiple vendors involved.

Jim Jirjis: Here here

Jim Jirjis: Hans +1

David Degandi: For the ROI review and analysis -- we need to clarify what independent means

Patrick Murta: agree Dave... usually this is self-reported data

Hans Buitendijk: @PAtrick: They do not. It is X12 interaction focused. So it seems that the rules need to re-assessed in context of a set of FHIR interactions.

Alix Goss: alignment?

Rich Landen: .Perhaps this language: ".with no mandatory adoption until the standards has been tested in that practice …."

Rich Landen: We want to have a bias that encourages innovation: do not structure to preclude early movers, but do not mandate anything until most affected entities are ready.

Sheryl Turney: Rich agree *[sic]*

Patrick Murta: an informed and industry vetted scheduled

Rich Landen: Development of an iterative rollout plan based on a market readiness assessment and environmental scan.

Rich Landen: Another example of an oversight process might be the advisory council that recommends annually what health screenings should be covered benefits.

Hans Buitendijk: I'm submitting comments into ballot as well on the three guides along these lines, and then the community can drive consensus on where to start to draw the boundaries.

Hans Buitendijk: As HITAC TF I believe we have to be careful to ge *[sic]* too specific on the building blocks as there is still much too learn.

David Degandi: I am thinking that we will ask Da Vinci to include guidance on points of certification

David Degandi: on the IG's

Patrick Murta: Hans, Raj, Dave.... we are getting a Google Doc version tomorrow to review?

Sheryl Turney: yes patrick

Hans Buitendijk: @David: Yes. I'll be entering JIRAs as well on every IG to that end.

Sheryl Turney: i will ocncur *[sic]* with my vote on IGs

QUESTIONS AND COMMENTS RECEIVED VIA EMAIL

There were no public comments received via email.

Resources

ePA RFI Webpage
ePA RFI – March 3, 2022 Meeting Webpage
ePA RFI – March 3, 2022 Meeting Agenda
ePA RFI – March 3, 2022 Meeting Slides
HITAC Calendar Webpage

Meeting Schedule and Adjournment

Sheryl and Tammy thanked everyone for their participation.

The co-chairs described the schedule for the next meeting, which will be held on Monday, March 7, 2022.

The meeting was adjourned at 11:30 a.m. E.T.