

## HPMS E-Mail

**Date:** December 14, 2020

**Subject:** Improving Prior Authorization Processes and Promoting Patients' Electronic Access to Health Information Proposed Rule Listening Session - December 16

Wednesday, December 16 from 1:30 to 3 pm ET

Register for this [Medicare Learning Network event](#).

On December 10, CMS released a proposed rule, building on the CMS Interoperability and Patient Access final rule (CMS-9115-F) that would require certain CMS-regulated payers to improve the electronic exchange of health care data via Application Program Interfaces (APIs) and streamline the prior authorization process to reduce burden on payers, providers, and patients. This proposed rule applies to:

- State Medicaid, Children's Health Insurance Program (CHIP), and Medicare Fee-for-Service (FFS) programs
- Medicaid managed care plans
- CHIP managed care entities
- Qualified Health Plan issuers on the federally-facilitated exchanges

We encourage you to review the [proposed rule](#) prior to the call.

Target Audience: All Medicare FFS providers and industry-wide stakeholders.

