October 13, 2025

Anna Taylor
Chair
HL7 Da Vinci Project Steering Committee
3300 Washtenaw Avenue
Suite 227
Ann Arbor, MI 48104

Dear Ms. Taylor:

The undersigned physician organizations write to convey our urgent concern over the escalating threat to the technology designed to deliver real-time adjudication of prior authorizations, as mandated under the Centers for Medicare & Medicaid Services (CMS) Interoperability and Prior Authorization Final Rule.

Prior authorization reform is a top priority for our organizations, as this onerous process threatens both patient clinical outcomes and practice sustainability. A standardized, automated approach to prior authorization promises to benefit both patients and their physicians through minimization of care delays and administrative burdens. However, recent industry proposals would significantly reverse the progress made towards that goal.

Physicians consistently identify lack of transparency and wide variation between health plans as two major challenges with the current prior authorization process. While CMS regulation specifically calls for new technology to directly mitigate these problems, current industry push-back seeks to undermine these critical reforms. Specifically, we harbor grave concerns regarding proposals to:

- **Shift coverage information exclusively to the back office:** CMS intended for new technology to offer point-of-care transparency into prior authorization requirements. Downgrading this functionality solely to the physician practice's back office would block physicians from accessing essential prior authorization and coverage information at the point of ordering, removing their ability to have informed, patient-centered conversations during the office visit. This would delay timely treatment for sensitive conditions in ambulatory care, leading to clinical deterioration and avoidable hospitalizations.[1]

- **Create payer- and vendor-specific companion guides:** As initially envisioned, new prior authorization standards would create a uniform process, with a consistent "look and feel," across the myriad payers with which physician practices do business. In contrast, using companion guides—meaning proprietary payer or vendor specifications—would create inconsistent payer implementations, increase administrative burdens, and undermine interoperability.

[1] https://www.ama-assn.org/system/files/prior-authorization-survey.pdf

We urge the Da Vinci community to reject these changes that jeopardize the success of the Administration's prior authorization reform efforts. Instead, Da Vinci and HL7 leadership should reaffirm commitment to a unified, standards-based solution that will reduce administrative burden, improve interoperability, and ensure patients receive timely access to care.

Thank you for considering these concerns. We look forward to working together to ensure that our shared vision of an automated, end-to-end prior authorization process that benefits patients and physicians becomes a reality.

Sincerely,

American Medical Association
American Academy of Allergy, Asthma & Immunology
American Academy of Dermatology Association
American Academy of Family Physicians
American Academy of Hospice and Palliative Medicine
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Otolaryngic Allergy
American Academy of Physical Medicine and Rehabilitation
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American College of Allergy, Asthma and Immunology
American College of Chest Physicians
American College of Gastroenterology
American College of Obstetricians & Gynecologists
American College of Physicians
American College of Rheumatology
American College of Surgeons
American Gastroenterological Association
American Osteopathic Association
American Psychiatric Association
American Society for Clinical Pathology
American Society for Dermatologic Surgery Association
American Society of Anesthesiologists
American Society of Cataract & Refractive Surgery
American Society of Retina Specialists
American Thoracic Society
Association of American Medical Colleges
Congress of Neurological Surgeons
Endocrine Society
International Pain and Spine Intervention Society
Medical Group Management Association
Renal Physicians Association

Society for Cardiovascular Angiography and Interventions
Society of Hospital Medicine
The Association for Clinical Oncology

Cc: Ryan Bohochik, Vice Chair, HL7 Da Vinci Project Steering Committee
Viet Nguyen, MD, Chief Standards Implementation Officer, HL7 International
Alix Goss, Project Manager, HL7 Da Vinci Project