



SureFHIR™

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SureFHIR® is BNETAL's solution for HL7 Fast Healthcare Interoperability Resources (FHIR®¹), which enables regulatory compliance for healthcare providers, health plans, public health agencies and others, and supports new business needs. Secure access to data by trading partners and end users can now be supported using BNETAL SureFHIR®.

BNETAL SureFHIR® leverages our deep and long experience in healthcare interoperability, security and operational robustness. SureFHIR® engine provides support for the full spectrum of healthcare business use cases. It supports modular and policy driven authentication and authorization (OAuth2, SMART on FHIR), and enhanced privacy and data masking features.

SureFHIR® supports the HL7 FHIR Application Programming Interfaces, and HL7 FHIR Resources including those in the Payer industry based Davinci Project profile, and SMART on FHIR, USCDI+, US Core IG. SureFHIR® empowers our clients to support their HL7 FHIR regulatory compliance needs including the CMS Interoperability Rule (CMS-9115-F) and the new CMS Interoperability and Prior Authorization Rule (CMS-0057-F) in addition to supporting business needs such as exchange of clinical, administrative and public health information with trading partners.

BNETAL's nationally recognized experts in connectivity and security have worked on projects including CDC PHIN (where BNETAL provided secure data exchange solutions that are used nationwide for disease data surveillance over the Internet) can be leveraged by Payers, Providers, Clearinghouses, and Vendors to provide enterprise grade connectivity and security that is scalable, maintainable, and supported by top-notch connectivity and security experts in the industry.

For more information on BNETAL SureFHIR®, please email info@BNETAL.com, or call 770-399-0433.

Key Features:

- ***FHIR data repository and API (R4, 4.0.1)***
- ***Strong security (OAuth2, SMART on FHIR)***
- ***Data masking for privacy***
- ***Backed by health data interoperability, security, regulatory compliance experts***

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Meet the CMS Interoperability and Prior Authorization Rule (CMS-0057-F) Requirements:

The [CMS Interoperability and Prior Authorization rule \(CMS-0057-F\)](#) applies to impacted payers, with an implementation date of January 1, 2027 (some rule requirements have a January 1, 2026 date). Below is a high-level description of the rule requirements and how SureFHIR can help you meet them:

- **Prior Authorization API:** impacted payers are required to implement and maintain a Prior Authorization API using HL7 FHIR 4.0.1 that is populated with its list of covered items and services, can identify documentation requirements for prior authorization approval, and supports a prior authorization request and response.

SureFHIR has robust support for HL7 FHIR 4.0.1 and Da Vinci Prior Authorization Profiles. This includes a FHIR data repository with the APIs needed to meet the prior authorization API requirements such as coverage determination, documentation requirements, and the submission of prior authorization request and receipt of a response. SMART on FHIR authentication and authorization support gives strong layer of security around the FHIR repository.

- **Patient Access API:** impacted payers are required to support HL7 FHIR 4.0.1 standard based access to individual claims and encounter data (without provider remittances and enrollee cost-sharing information); data classes and data elements in USCDI; and specified prior authorization information (excluding those for drugs).

SureFHIR has HL7 FHIR 4.0.1 based FHIR resource storage and API for FHIR resources including patient, claims, encounter information needed to support Patient Access API. In addition to SMART on FHIR, SureFHIR has fine grained access control, and data privacy and masking support for strong data privacy.

- **Provider Access API:** impacted payers are required to make available via HL7 FHIR 4.0.1 standard based Provider Access API, and make this API available to share patient data with in-network providers with whom the patient has a treatment relationship individual claims and encounter data (without provider remittances and enrollee cost-sharing information); data classes and data elements in USCDI; and specified prior authorization information (excluding those for drugs).

SureFHIR has robust support for HL7 FHIR 4.0.1 for FHIR resources including patient, claims, encounter information.

- **Payer-to-Payer API:** impacted payers are required to make available via HL7 FHIR 4.0.1 Payer-to-Payer API to make available claims and encounter data (excluding provider remittances and enrollee cost-sharing information), data classes and data elements in the USCDI and information about certain prior authorizations (excluding those for drugs).

SureFHIR has robust support for HL7 FHIR 4.0.1, and Payer Data Exchange (PDex) profile from the DaVinci project.

Meet the CMS Interoperability Rule (CMS-9115-F) Requirements using SureFHIR:

The Interoperability and Patient Access final rule (CMS-9115-F) has a heavy reliance on the use of HL7 FHIR R4 (4.0.1) for interoperable and secure exchange of healthcare data. By offering a robust and secure implementation of HL7 FHIR R4 (4.0.1), SureFHIR helps you meet these requirements. Below is a high-level description of the rule requirements and how SureFHIR can help you meet them:

- **Patient Access API:** CMS regulated payers are required to support HL7 FHIR 4.0.1 standard based access to patient data including claims, encounters etc. SureFHIR has robust support for HL7 FHIR 4.0.1 for all patient, claims, encounter information related FHIR resources. SureFHIR provides strong security around these FHIR resources using SMART on FHIR, fine grained access control, and data privacy and masking support.
- **Provider Directory API:** CMS regulated payers are required to publish practitioner information and support lookups using HL7 FHIR 4.0.1 standard. SureFHIR has robust support for HL7 FHIR 4.0.1 including the Argonaut profile for practitioner data lookups.
- **Payer-to-Payer Data Exchange:** CMS regulated payers are required to support patient data exchange from payer-to-payer, in support of payer enrollment changes, using HL7 FHIR 4.0.1 standard. SureFHIR has robust support for HL7 FHIR 4.0.1, and also the Payer Data Exchange (PDex) profile from the DaVinci project.
- **Dual Eligibility Experience Improvement:** States are required to support improvement in dual eligibility (Medicare and Medicaid) experience by notifying CMS of dual eligibilities, using HL7 FHIR 4.0.1 standard. SureFHIR has robust support for HL7 FHIR 4.0.1 including patient (enrollee) information and its exchange.
- **Digital Contact Information:** CMS regulated providers are required to publish their contact information using HL7 FHIR 4.0.1 standard. SureFHIR has robust support for HL7 FHIR 4.0.1 including provider information publication APIs.
- **Admission, Discharge and Transfer Event Notifications:** CMS regulated providers are required to send ADT event notifications to other providers that provide continuity of care, using HL7 FHIR 4.0.1 standard. SureFHIR has robust support for HL7 FHIR 4.0.1 including event notifications for ADT.

Disclaimer: while SureFHIR is a robust platform that serves as a key building block to implement your health data exchange automation needs and to meet both regulatory requirements, business analysis, integration with existing systems and testing with trading partners to ensure end-to-end functionality will be needed to support client business needs. This can be best accomplished by engaging BNETAL.