Hello Ryan,

Thank you for contacting the CMS Health Informatics and Interoperability Group (HIIG). We apologize for the delay in sending this response.

No. A payer may not require an application to register to use the Provider Directory API, as this API is not accessing PHI. In the Interoperability and Patient Access final rule, 85 FR 25632, at 422.119 Access to published provider directory information, the first paragraph references the technical requirements at 422.119(c), which specifically exclude the security protocols related to user authentication and authorization and any other protocols that restrict the availability of this information to particular persons or organizations. The Provider Directory API endpoint must be made publicly accessible. Specifically, the rule requires payers make the Provider Directory API accessible via a public-facing digital endpoint on their website to ensure public discovery and access. As this is not PHI, and generally publicly available information at this time, restrictions are not permitted (see 85 FR 25560 through 25564). Payers may put this information behind an initial firewall in order to protect against things like a denial of service attack, much as they would currently protect data for any website, but otherwise this must be a truly public and unrestricted digital endpoint.

We hope this resolves your inquiry. However, should you need further clarification on this or other CMS interoperability matters, please do not hesitate to reach back out.

Best regards,

Kinjel Vyas
On behalf of,
Health Informatics & Interoperability Group (HIIG) | Office of Burden Reduction & Health Informatics
Centers for Medicare & Medicaid Services (CMS)

E-MAIL: CMSHealthInformaticsOffice@cms.hhs.gov
WEB: https://www.cms.gov/About-CMS/Components/HIO/HIO-Landing

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Please feel free to share this information with your constituent members, organizations, or interested parties.
Hello:

In reference to “Section § 422.120 Access to published provider directory information” which says:

(a) An MA organization must implement and maintain a publicly accessible, standards-based Application Programming Interface (API) that is conformant with the technical requirements at § 422.119(c), excluding the security protocols related to user authentication and authorization and any other protocols that restrict the availability of this information to particular persons or organizations, the documentation requirements at § 422.119(d), and is accessible via a public-facing digital endpoint on the MA organization’s website.

The CARIN Alliance is requesting CMS clarify the following question:

- Can a payer require an application to register in order to use the provider directory API? Registration would imply the application has a valid client ID and client secret and if the application did not have a valid client ID and client secret then the application would not be able to access the provider directory API.

Thank you!

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