§ 170.315(g)(32) Provider prior authorization API – documentation templates and rules

Test Procedure

This Test Procedure illustrates the test steps required to certify a Health IT Module to this criterion. Please consult the most recent ASTP/ONC Final Rule on the Certification Regulations page for a detailed description of the certification criterion with which these testing steps are associated. ASTP/ONC also encourages developers to consult the Certification Companion Guide in tandem with the test procedure as it provides clarifications that may be useful for product development and testing.

Note: The tests step order does not necessarily prescribe the order in which the tests should take place.

Revision History

Version #	Description of Change	Version Date
1.0	Initial publication	9/5/2025

Regulation Text

§ 170.315(g)(32) Provider prior authorization API – documentation templates and rules

Support the capability for users to request and populate prior authorization documentation using templates and rules as a "Full DTR EHR" according to at least one of the versions of the implementation specification adopted in § 170.215(j)(2), including:

(i)   Registration. Support registration capabilities applicable to a "Full DTR EHR."

(ii) Authentication and authorization. Support system authentication and authorization as a client in accordance with the "Backend Services" section of at least one of the versions of the implementation specification adopted in § 170.215(c).

(iii) Full DTR EHR capabilities. Support all requirements and required capabilities applicable to a "Full DTR EHR."

Standard(s) Referenced

Applies to entire criterion

§ 170.215(j)(2)(i) HL7 FHIR® Da Vinci—Documentation Templates and Rules (DTR) Implementation Guide, Version 2.0.1—STU 2

Paragraph (g)(32)(ii)

§ 170.215(c)(1) HL7 FHIR® SMART Application Launch Framework Implementation Guide Release 1.0.0

§ 170.215(c)(2) HL7 FHIR® IG: SMART Application Launch Framework, v2.0.0

Required Tests

Paragraph (g)(32)

System Under Test	Test Lab Verification
The health IT developer demonstrates the Health IT Module supports the following capabilities as a "Full DTR EHR" in accordance with an implementation specification at § 170.215(j)(2): 1. DTR-1: Registration with a "DTR Payer Service" to enable the required client capabilities with the "DTR Payer Service" including authentication, authorization, and FHIR operations as described in the "Full DTR EHR Capability Statement." 2. DTR-2: Authentication and authorization as a client with a "DTR Payer Service" using "Backend Services" in accordance with an implementation specification at § 170.215(c). 3. DTR-3: Population of "Standard Questionnaires" received from a "DTR Payer Service" including support for the "$questionnaire-package" operation. 4. DTR-4: Population of "Adaptive Questionnaires" received from a "DTR Payer Service" including support for the "$questionnaire-package" and "$next-question" operations. 5. DTR-5: Value set expansion for questionnaires in accordance with the "$expand" operation. 6. DTR-6: Execution of Clinical Quality Language (CQL) to support pre-population of questionnaires. 7. DTR-7: Display of pre-populated questionnaires to the user for review and completion. 8. DTR-8: Storage of completed questionnaires in the Health IT Module.	The tester verifies the Health IT Module supports the following capabilities as a "Full DTR EHR" in accordance with an implementation specification at § 170.215(j)(2): 1. DTR-1: Registration with a "DTR Payer Service" to enable the required client capabilities with the "DTR Payer Service" including authentication, authorization, and FHIR operations as described in the "Full DTR EHR Capability Statement." 2. DTR-2: Authentication and authorization as a client with a "DTR Payer Service" using "Backend Services" in accordance with an implementation specification at § 170.215(c). 3. DTR-3: Population of "Standard Questionnaires" received from a "DTR Payer Service" including support for the "$questionnaire-package" operation. 4. DTR-4: Population of "Adaptive Questionnaires" received from a "DTR Payer Service" including support for the "$questionnaire-package" and "$next-question" operations. 5. DTR-5: Value set expansion for questionnaires in accordance with the "$expand" operation. 6. DTR-6: Execution of Clinical Quality Language (CQL) to support pre-population of questionnaires. 7. DTR-7: Display of pre-populated questionnaires to the user for review and completion. 8. DTR-8: Storage of completed questionnaires in the Health IT Module.

Testing Tool

Inferno Framework (link to be provided at a later date)

Test Tool Documentation (link to be provided at a later date)