Infor Cloverleaf

Transform Prior Authorization: Intelligent Automation with FHIR®

Prior authorization is essential, but often inefficient. Manual processes frustrate providers, delay care, and drive up costs.

To address these challenges, Centers for Medicare & Medicaid Services (CMS) released CMS-0057, requiring payers to automate prior authorization workflows using standardized APIs starting January 2026.

Infor Cloverleaf™ helps payers comply with the mandate by delivering FHIR®-based real-time data exchange and intelligent automation. Built on HL7® Da Vinci standards, it enables secure, scalable interoperability—without costly system overhauls.

> ~50M PA decisions were made by Medicare Advantage plans in 2023 with 3.2M (6.4%) fully or partially denied.[1]

Unlock faster, smarter prior authorizations

With **Infor Cloverleaf™** bring prior authorization into the modern era to reduce provider frustrations and care delays.

Modernize Your System

Connect payer and provider systems using standards-based data exchange and plug-and play integration.

Reduce Administrative Waste

Ensure providers send complete, accurate submissions with built-in clinical rules to streamline documentation and authorization.

Achieve CMS Compliance

Meet CMS-0057 requirements with end-to-end API workflows, real-time visibility, and comprehensive audit support.

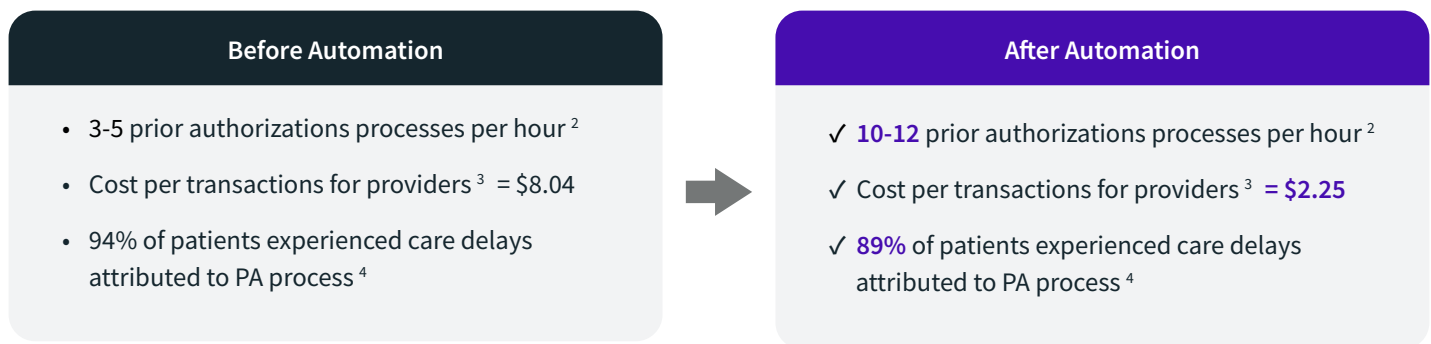| Why Infor Cloverleaf	Ranked **#1** Interoperability Solution by Black Book for **7 years**	**20+** years of experience	Close to **500** customers nationwide

[1] American Medical Association. (2025). *2024 AMA Prior Authorization Physician Survey*. https://www.ama-assn.org/system/files/prior-authorization-survey.pdf

Capabilities that go beyond compliance

- **EHR-agnostic integration:** Works across Epic, Cerner, MEDITECH, and specialty or legacy systems.

- **Standards-flexible architecture:** Supports HL7 v2, CDA, X12, and FHIR for seamless data exchange.

- **Comprehensive CMS-0057 support:** Delivers out-of-the-box coverage for all required regulatory workflows: CRD, DTR, PAS, Patient Access, and Payer-to-Payer exchange.

- **SMART on FHIR App:** Launches payer-specific workflows within the EHR to retrieve clinical data and pre-fill prior authorization requests using payer rules.

- **Electronic submission and tracking:** Sends requests and receives responses electronically—no fax, no follow-up calls.

- **Flexible deployment options:** Supports cloud-native, managed services, or hybrid environments to match your operational model.

- **Support for future initiatives:** Lays the groundwork for longitudinal data sharing, gap closure programs, and more.

The impact of automation

Before Automation	After Automation
• 3-5 prior authorizations processes per hour [2]	✓ **10-12** prior authorizations processes per hour [2]
• Cost per transactions for providers [3] = $8.04	✓ Cost per transactions for providers [3] **= $2.25**
• 94% of patients experienced care delays attributed to PA process [4]	✓ **89%** of patients experienced care delays attributed to PA process [4]

[2] MCG Health. (2024). *CMS Final Rule on prior authorization.* https://www.mcg.com/blog/2024/05/29/cms-final-rule-prior-authorization-interoperability/

[3] CAQH. (2024). *2023 CAQH Index Report.* https://www.caqh.org/hubfs/43908627/drupal/2024-01/2023_CAQH_Index_Report.pdfmcg.com

[4] AMA. (2024). *Exhausted by prior auth.* https://www.ama-assn.org/practice-management/prior-authorization/exhausted-prior-auth-many-patients-abandon-care-ama-survey

About Infor

Infor is a global leader in business cloud software products for companies in industry-specific markets. Infor builds complete industry suites in the cloud and efficiently deploys technology that puts the user experience first, leverages data science, and integrates easily into existing systems. Over 67,000 organizations worldwide rely on Infor to help overcome market disruptions and achieve business-wide digital transformation.

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Improve interoperability and care coordination with Infor Cloverleaf

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