Infor Cloverleaf

Streamline prior authorizations and simplify CMS-0057 compliance with FHIR-based automation

While prior authorization was originally intended as a cost-control measure, it has become a bottleneck, slowing care, increasing manual work, and frustrating both providers and patients.

To address these challenges, the Centers for Medicare & Medicaid Services (CMS) released CMS-0057, which requires healthcare providers to utilize certain standardized FHIR-based APIs beginning January 1, 2027.

Infor Cloverleaf™ streamlines prior authorization through real-time, FHIR®-based data exchange and intelligent automation. Built on HL7® Da Vinci standards, it embeds business rules and actionable guidance into existing workflows, helping providers reduce payer friction and accelerate access to care.

According to the American Medical Association (AMA), staff spend approximately **13 hours weekly** on PA, with some teams dedicated solely to this task.[1]

Unlock faster, smarter prior authorizations

With **Infor Cloverleaf™** bring prior authorization into the modern era to improve the lives of your patients and staff.

Reduce Administrative Burden

Automate end-to-end prior authorization workflows across EHRs and payer systems, reducing manual effort and costs.

Get Patients Care Faster

Leverage real-time prior authorization checks and embedded payer rules to eliminate delays and improve access to timely care.

Simplify CMS Compliance

Meet CMS-0057 requirements with a scalable, plug-and-play solution that minimizes IT effort and accelerates transformation.

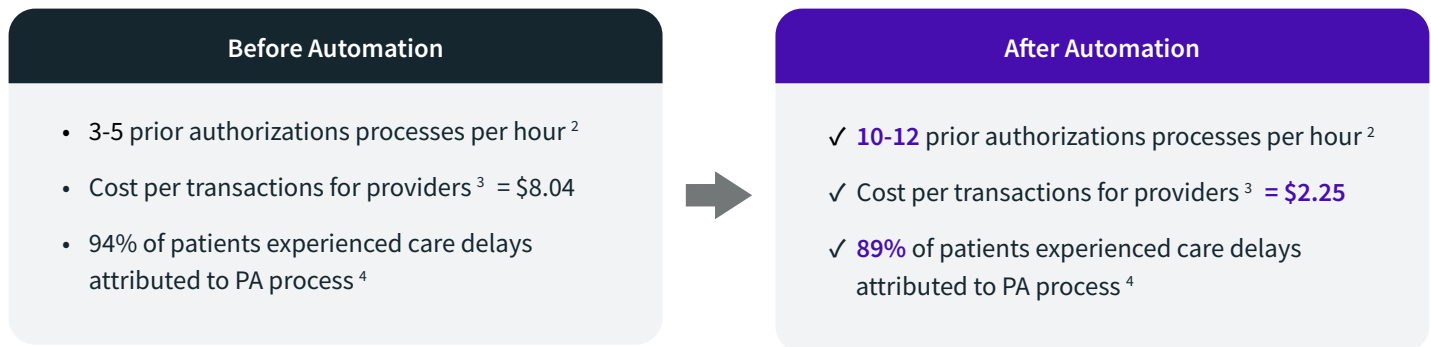| Why Infor Cloverleaf	Ranked **#1** Interoperability Solution by Black Book for **7** years	**20+** years of experience	Close to **500** customers nationwide

[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.

- **Automatic prior authorization detection:** Identifies authorization needs in real time when a provider places an order.

- **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.

The impact of automation

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

After Automation
✓ **10-12** prior authorizations processes per hour [2]
✓ Cost per transactions for providers [3] = **$2.25**
✓ **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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See how Infor Cloverleaf can help you improve patient care

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