

Interoperability Information Sheet

The Centers for Medicare and Medicaid Services (CMS) established the *Interoperability and Patient Access* rule (CMS-9115-f)(85 FR 25510) to support the *21st Century Cures Act* and executive Order in 2019 as a means to “to improve the quality and accessibility of information that Americans need to make informed health care decisions, including data about health care prices and outcomes, while minimizing reporting burdens on affected health care providers and payers.” (<https://www.cms.gov/files/document/cms-9115-f.pdf>)

In support of that act, American Health Advantage of Indiana is working along with its respective vendors to provide you, the member, with greater access to your health insurance data. As a part of the first phase of this initiative, American Health Advantage of Indiana and its vendors are providing members with the ability to connect to their health insurance data using standardized Patient Access APIs. Members (or users) cannot register themselves. Members will be added by the payor interoperability administrator. Once registered, members will receive an email to activate their registration.

To connect to your health plan information, you will need to select a compatible third-party developer Application API that is FHIR compatible. As a user, you will allow the third-party application vendor access to your health information, otherwise accessible only through your insurance company. Here is the list of available application vendors to choose from: <https://api-ahp-prd.safhir.io/v1/api>

Once you have registered with a third-party API application vendor, then you will need to contact the payor interoperability administrator at 1-844-657-0447. You will need to provide the administrator with a valid email address so that they can send you an email to reset your password to the API application. Once this is completed you will have access to your health plan information.

If you have any questions, please call Member Services toll-free at 1-844-657-0447 (TTY/TDD users should call 1-833-312-0046), 8 a.m. to 8 p.m. October 1st through March 31st, seven days a week; 8 a.m to 8 p.m. April 1st through September 30th, Monday to Friday.

Application Developer API and Member Endpoint Information

Provider Directory / Plannet API: <https://api-ahp-prd.safhir.io/v1/api/provider-directory/metadata>

Developer portal registration: <https://portal.safhir.io/accounts/login/>

Available APIs for AHP: <https://api-ahp-prd.safhir.io/v1/api>

Onyx API Documentation: https://docs.safhir.io/onyxos_api_documentation.html

Member / Developer app registration:
https://docs.safhir.io/safhir_developer_portal_documentation.html

American Health Plan of Indiana, Inc., doing business as American Health Advantage of Indiana, is a Health Maintenance Organization Institutional Special Needs Plan (HMO I-SNP) with a Medicare Contract. American Health Advantage of Idaho complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATTENTION: If you speak limited English, language assistance services, free of charge, are available to you. Call 1-844-657-0447 (TTY/TDD: 1-833-312-0046).