

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>)

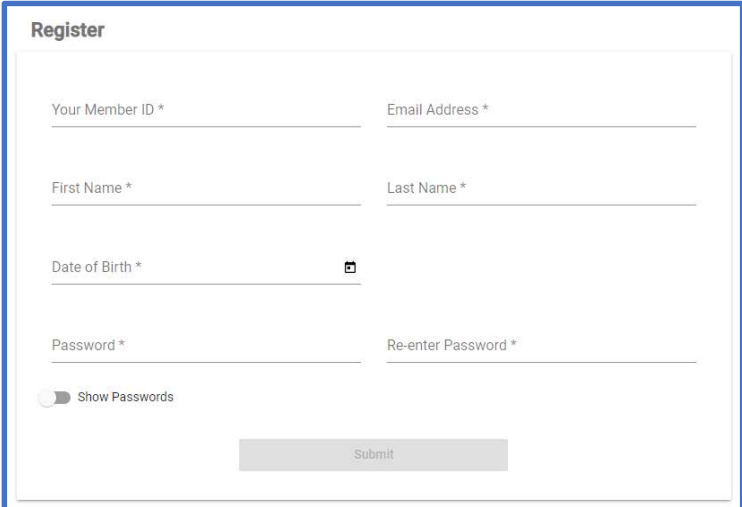
In support of that act, American Health Advantage of Indiana is working along with its respective vendors to provide you, the member, with greater access to your health insurance data. As a part of the first phase of this initiative, American Health Advantage of Indiana and its vendors are providing members with the ability to connect to their health insurance data using standardized Patient Access APIs.

To connect to your health plan information, you will need to select a compatible third-party Electronic Health/Medical Record (EHR/EMR) application that is FHIR compatible. Once a third-party application has been selected, then you will need to create a profile on the Member Access Portal at <https://ahpmember.prod.healthaxis.net/>.

As a user, you can allow third party applications access to your health information, otherwise accessible only through your insurance company. To gain access to your health insurance information, you will need to first register through the Member Portal and create a user account before connecting to your account via the third-party application of your choosing.

Member Registration

Member register at <https://ahpmember.prod.healthaxis.net/>



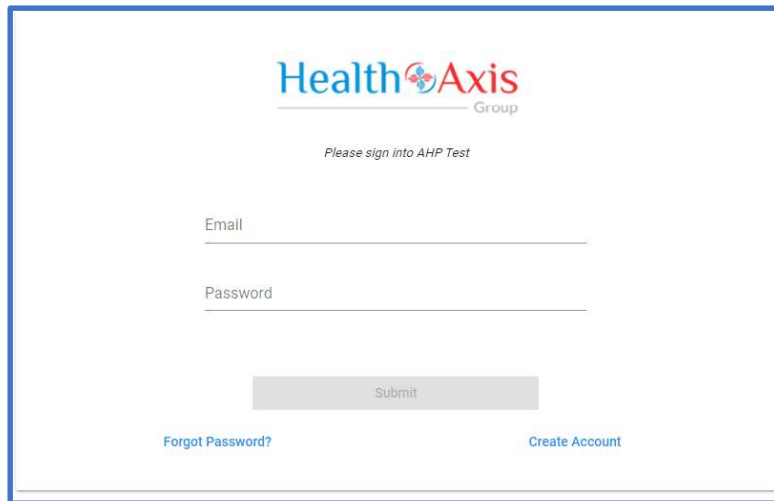
The image shows a web form titled "Register" with the following fields and controls:

- Your Member ID *
- Email Address *
- First Name *
- Last Name *
- Date of Birth * (with a calendar icon)
- Password *
- Re-enter Password *
- Show Passwords (toggle switch)
- Submit button

Note - Once the member account is created, then the member will access their third-party application and follow the third party application’s prompts necessary to connect.

Member Login – Informational Only

Note - Member does not need to be logged into the Member Portal in order to access their health information via their selected third-party application.



HealthAxis
Group

Please sign into AHP Test

Email

Password

Submit

[Forgot Password?](#) [Create Account](#)

If you have any questions, please call Customer Service 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 Endpoint Information

Secure FHIR API registration and information for member data:

<https://fhir.prod.healthaxis.net/developer>

Public FHIR API for Provider Directory:

<https://fhir.prod.healthaxis.net/api/unrestricted/ahpmember.prod.healthaxis.net/Fhir/Practitioner>

Public FHIR API for Pharmacy Directory:

<https://fhir.prod.healthaxis.net/api/unrestricted/ahpmember.prod.healthaxis.net/Fhir/HealthcareService>

American Health Advantage of Indiana (HMO I-SNP), offered American Health Plan of Indiana, Inc. is a Health Maintenance Organization (HMO) with a Medicare contract. American Health Advantage of Indiana 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).