OHIO STATE MEDICAL ASSOCIATION

CMS WISeR Program: Innovaccer Updates

August 11, 2026

Agenda

1. WISeR Model Overview Refresher
2. Current Status
3. Accomplishments & Lessons Learned
4. Resources & Information

WISeR Model Purpose and Goals

Improve Patient Well-Being

Focus health care spending on items and services that improve patient well-being.

Apply Commercial Processes

Apply commercial payer processes that may be faster, easier, and more accurate.

Wasteful and Inappropriate Services Reduction (WISeR) Model

CMS wants to test how enhanced technology can help reduce wasteful, low-value services with little to no clinical, evidence-based benefit. CMS is applying prior authorization and pre-payment reviews to select items and services they believe are more vulnerable to fraud, waste, and abuse (e.g., cervical fusion, deep brain stimulation, epidural steroid injections).

Increase Transparency

Increase transparency on existing Medicare coverage policy.

Reduce Unnecessary Care

De-incentivize and reduce the use of medically unnecessary care.

Reference: WISeR Model Design

Applies technology to select services that:

- May pose patient-safety concerns if delivered inappropriately
- Has existing publicly available coverage criteria (NCD/LCD)
- May involve prior reports of fraud, waste, and abuse

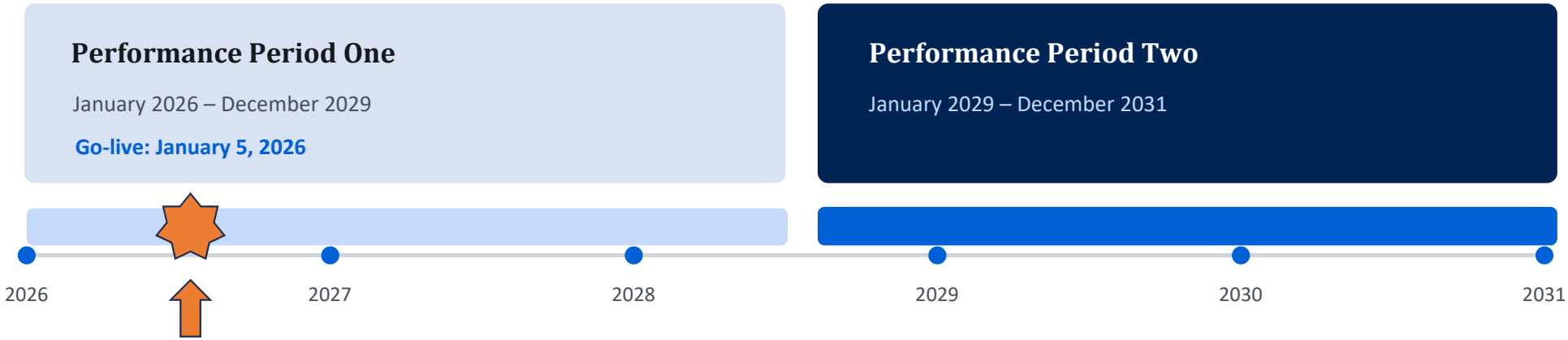
Selected service examples

- Skin and tissue substitutes
- Electrical nerve stimulators
- Knee arthroscopy for knee osteoarthritis

Model excludes:

- Inpatient-only services
- Emergency services
- Services that would pose risk to patients if delayed
- First-line diagnostics and treatments for a medical condition
- Any service/code subject to another Medicare PA program

WISeR Program Timeline



- *Innovaccer started two months later than the other WISeR participants*
- *Our system has logged 45,000 total cases since May, 2026*
- *About 22% are dismissed (code not in scope, provider not eligible, etc.)*
- *We're waiting for medical records on about 15% of cases*
- *We're affirming about 80% of cases*
- *We're receiving roughly 80 to 100 calls, voice mails and emails every week day - 70% of contacts are requests for status updates*

All of this is substantially more volume than we projected

Program Status

Middle of Performance Year One (2026) with two quarters under our belt

Phase One

Go-live: January 5, 2026

- Tuned data exchanges with CGS & CMS Source Systems
- Tuned AI to find specific information across submitted charts
- Began processing prior authorizations
- Began prepayment reviews
- Began returning affirm/non-affirm decisions

Phase Two

Q1/2 2026

- Launched Provider Portal to manage workflow for Prior Authorizations & Pre-Pay processes
- Stood up Provider Call Center & grew/trained peer review organization
- Refined clinical criteria based on provider feedback
- Built out CMS required reporting functionality – operational and outcomes reports

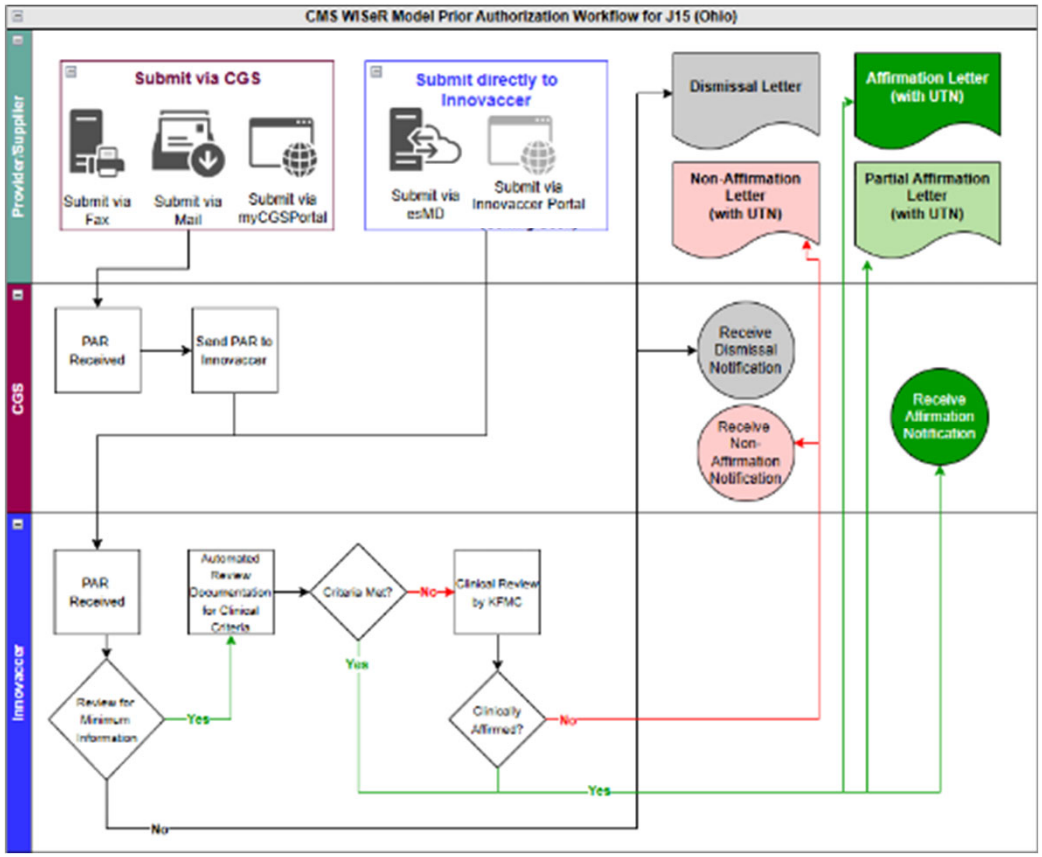
Next Up

Q3/Q4 2026 Plans

- Developing more robust internal operational management tools – key basis for improvement
- Working more proactively and systematically with providers - disseminating education more effectively & distilling feedback into application improvements
- Enhancing INV WISeR portal processing status communications for both Prior Authorization and Pre-Pay cases
- Scaling up operations to support additional in-scope CMS codes
- Preparing for Gold Carding/Exemption Program going live in early 2027

Prior Authorization: Process Overview & Learnings

How prior authorization requests are submitted and evaluated

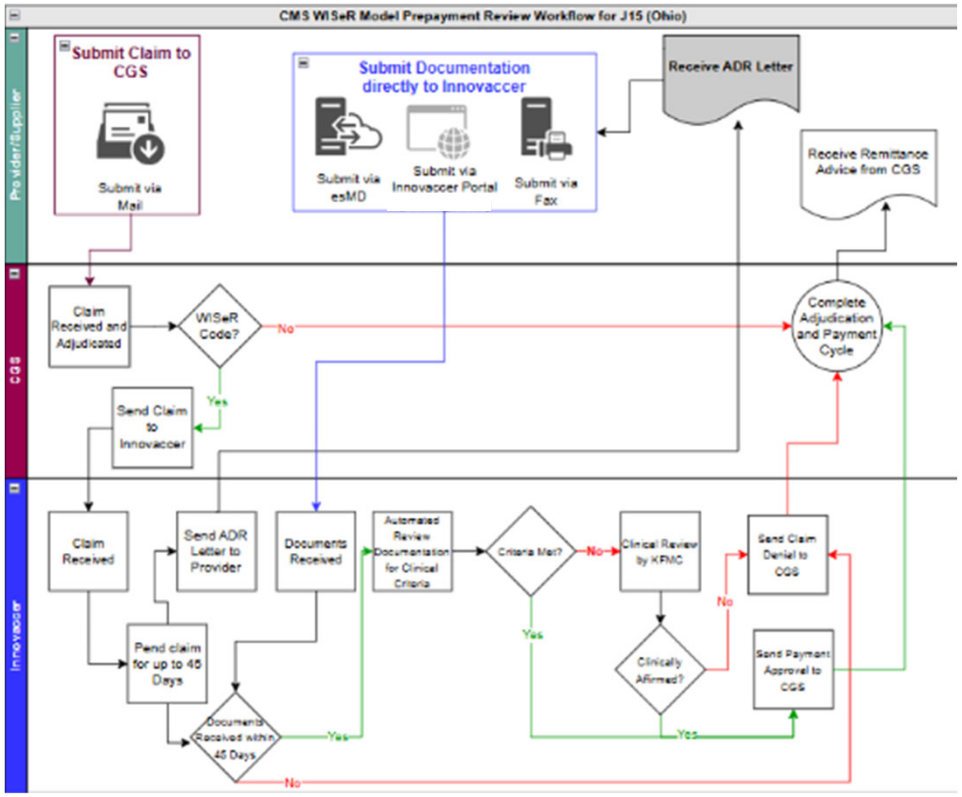


Key Learnings:

- Live clinical operations surface edge cases that planning could not anticipate
- AI-based tool use can be misinterpreted:
  - We use multiple AI tools
  - We're finding better tools (OCR, for example)
  - We can do better explaining how we use AI with our stakeholders - and what we don't do with AI
- We've intentionally provided multiple submission options but processing works smoothest when cases go directly into our Portal

Prepayment Review: Process Overview & Learnings

How prepayment reviews are submitted and evaluated



Key Learnings:

- We have two challenges with US Mail:
  - high volumes of returned mail
  - inability to really manage chain of custody records mailed to u
  - We no longer take mailed medical records
- Education is needed to let retrieval vendors know that their costs will not be reimbursed by Medicare or WISeR participants
- Decision hand-offs within pre-pay processing depends on airtight data exchange — consistent format, timing, and confirmation of data integrity

QUESTIONS?

Helpful Information Sources about WISeR

For more information, please see the following:

- WISeR (Wasteful and Inappropriate Service Reduction) Model | CMS
- Innovaccer CMS WISeR Page
- CGS WISeR Information Page
- WISeR Model Fact Sheet
- WISeR Model Frequently Asked Questions
- CMS Provider and Supplier Operational Guide
- PAR 457- WISeR Prior Authorization Form