Act No. 3 (H.31). An act relating to claim edit standards and prior authorization requirements

Subjects: Health; health insurance; prior authorization; health care providers; primary care providers; claim edits; place of service

This act exempts claims for health care services delivered outside Vermont from standards that health insurers are required to follow when editing health care claims unless the insurer and out-of-state health care provider agree that one or more of the edit standards will apply. The act also specifies that the definition of "primary care," for purposes of an exemption from health insurance prior authorization requirements for most services ordered by a primary care provider, means a health care provider who is contracted and enrolled with the health plan as a primary care provider.

Multiple effective dates, beginning on March 5, 2025