

1 H.31

2 An act relating to claim edit standards and prior authorization requirements

3 It is hereby enacted by the General Assembly of the State of Vermont:

4 Sec. 1. 18 V.S.A. § 9418a is amended to read:

5 § 9418a. PROCESSING CLAIMS, DOWNCODING, AND ADHERENCE  
6 TO CODING RULES

7 \* \* \*

8 (c) Adherence to the edit standards in subsection (b) of this section is not  
9 required:

10 (1) when necessary to comply with State or federal laws, rules,  
11 regulations, or coverage mandates; ~~or~~

12 (2) for edits that the payer determines are more favorable to providers  
13 than the edit standards in subsection (b) of this section or to address new codes  
14 not yet incorporated by a payer's edit management software, provided the edit  
15 standards are:

16 (A) developed with input from the relevant Vermont provider  
17 community and national provider organizations;

18 (B) clearly supported by nationally recognized standards, guidelines,  
19 or conventions approved by the Commissioner of Financial Regulation; and

20 (C) available to providers on the plan's websites and in its  
21 newsletters or equivalent electronic communications; or



1       Sec. 3. EFFECTIVE DATES

2           (a) Sec. 1 (18 V.S.A. § 9418a) shall take effect on January 1, 2026.

3           (b) Sec. 2 (18 V.S.A. § 9418b) shall take effect on passage and shall be  
4       implemented by all health plans as soon as reasonably practicable after that  
5       date, but in no event later than January 1, 2026.

6           (c) This section shall take effect on passage.