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H.31

An act relating to claim edit standards and prior authorization requirements

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

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

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

* * *

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

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

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

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

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

(C) available to providers on the plan's websites and in its 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.