

5 prior authorization updates

HB 421

Prior Authorization

HB 425

Medicaid; require managed care organizations to use certain level of care guidelines in determining medical necessity.

HB 586

Medicaid; telehealth services provided by FQHCs, rural health clinics and community mental health centers reimbursed at same rate as face-to-face encounters.

HB 419

Health care certificate of need law; bring forward code sections related to.

HB 420

Mississippi Prior Authorization Reform Act; create.

SB 2064

Health Care Certificate of Need Law; Repeal.

SB 2583

Health Care Certificate of Need Law; repeal.

SB 2618

Health insurance; Commissioner of Insurance must approve rate filings containing an increase in premiums.

SB 2622

An act to enact the mississippi prior authorization reform act; to establish the legislative findings of the act; to provide the applicability and scope of the act; to require health insurance issuers to maintain a complete list of services for which prior authorizations are required; to require health insurance issuers to make any current prior authorization requirements and restrictions readily accessible and posted on its website; to set requirements for the clinical review criteria of health insurance issuers; to prohibit health insurance issuers from denying a claim for failure to obtain prior authorization if the prior authorization requirement was not in effect on the date of service on the claim; to require health insurers to make certain prior authorization statistics available on their website; to require health insurance issuers to make available a standardized electronic prior authorization request transaction process by january 1, 2024;