

RÉSUMÉ DIGEST

ACT 432 (SB 112)

2022 Regular Session

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New law requires every health insurance issuer authorized to do business in this state to maintain a program that allows for the selective application of reducing prior authorization requirements based on the stratification of healthcare providers' performance and adherence to evidence-based medicine. Requires the program to promote certain standards for both the issuer and provider. Provides criteria for participation by providers and services included in the program; excludes pharmacy services. Further requires participants to submit a report to the La. Dept. of Insurance that includes a full narrative description, the criteria for participation, a listing of the procedures and services subject to the selective application of prior authorization, and the number of providers participating in the program.

New law defines "health insurance issuer".

New Law requires the La. Dept. of Insurance to provide a form and manner of filing by rule in accordance with the APA. Requires an issuer to provide an initial filing by July 1, 2023, and each time thereafter when the issuer files an annual report in accordance with prior law (R.S. 22:571).

Effective June 16, 2022.

(Adds R.S. 22:1020.61)