

During the 2023-2024 interim, the legislative management shall consider studying prior authorization in the commercial health insurance marketplace. The study shall include:

- The extent to which prior authorization is used by health insurance companies in the state, including the types of services and procedures for which prior authorization is required
- The impact of prior authorization on patient care, including the effects on patient health outcomes, patient satisfaction, healthcare costs and patient access to care
- The impact of prior authorization on healthcare providers and insurers, including the administrative burden, time and cost associated with obtaining prior authorization, and the appropriate utilization of healthcare services
- State and federal laws and regulations that may impact prior authorization
- Input from stakeholders, including patients, providers, and commercial insurance plans

The study may examine issues related to response times, retroactive denial, data reporting, clinical criteria and medical necessity, transparency, waste, fraud and abuse, reviewer qualifications, exceptions, and an appeal process. The legislative management shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixty-ninth legislative assembly.