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2012 -- H 7326

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2012

AN ACT

RELATING TO HEALTH AND SAFETY - HEALTH CARE SERVICES

<u>Introduced By:</u> Representatives Corvese, Ajello, Handy, Walsh, and Malik <u>Date Introduced:</u> February 02, 2012 <u>Referred To:</u> House Corporations

It is enacted by the General Assembly as follows:

1	SECTION 1. Chapter 23-17.12 of the General Laws entitled "Health Care Services -
2	Utilization Review Act" is hereby amended by adding thereto the following section:
3	23-17.12-18. Prospective assessment form. – (a) Notwithstanding any other provision
4	of law, on and after January 1, 2013, a payor shall accept only the prospective assessment form
5	developed pursuant to subsection (c) of this section when requiring prospective assessment for
6	any benefits provided under a payor's health insurance plan.
7	(b) If a payor fails to utilize or accept the prospective assessment form, or fails to respond
8	within the statutory response period set forth in section 23-17.12-9 of the General Laws upon
9	receipt of a completed prospective assessment request from a provider pursuant to the submission
10	of the prospective assessment form developed as described in subsection (c), the prospective
11	assessment request shall be deemed to have been granted.
12	(c) On or before July 1, 2012, the department of health and the office of the health
13	insurance commissioner shall jointly develop a uniform prospective assessment form.
14	Notwithstanding any other provision of law, on or after January 1, 2013, or six (6) months after
15	the form is developed, whichever is later, every provider shall use such prospective assessment
16	form to request prospective assessment and every payor shall accept such form as sufficient to
17	request prospective assessment.
18	(d) The prospective assessment form developed pursuant to subsection (c) shall meet the
19	following criteria:

- 1 (1) The form shall not exceed two (2) pages;
- 2 (2) The form shall be made electronically available by the department and the payor;
- 3 (3) The completed form may be electronically submitted from the provider to the payor;
- 4 (4) The department of health and the office of the health insurance commissioner shall
- 5 develop the form with input from interested parties from at least one public meeting; and
- 6 (5) The department of health and the office of the health insurance commissioner, in
- 7 <u>development of the standardized form, shall take into consideration the following:</u>
- 8 (i) Existing prior authorization forms established by the federal Centers for Medicare and
- 9 <u>Medicaid Services; and</u>
- 10 (ii) National standards pertaining to electronic prior authorization.
- 11 SECTION 2. This act shall take effect on January 1, 2013.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO HEALTH AND SAFETY - HEALTH CARE SERVICES

1 This act would require the department of health and the office of the health insurance 2 commissioner to develop a standardized form for providers to use when requesting prospective 3 assessments from payors.

4 This act would take effect as of January 1, 2013.

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