CERTIFICATION OF ENROLLMENT

ENGROSSED SECOND SUBSTITUTE SENATE BILL 5267

63rd Legislature 2013 Regular Session

Goodman, Secretary o of the State o do hereby certify tha d is ENGROSSED SECON. SENATE BILL 5267 a see Senate and the Houstatives on the date orth.
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ENGROSSED SECOND SUBSTITUTE SENATE BILL 5267

AS AMENDED BY THE HOUSE

Passed Legislature - 2013 Regular Session

State of Washington 63rd Legislature 2013 Regular Session

By Senate Ways & Means (originally sponsored by Senators Becker, Keiser, Conway, Ericksen, Bailey, Dammeier, Frockt, and Schlicher)

READ FIRST TIME 03/01/13.

- AN ACT Relating to developing standardized prior authorization for medical and pharmacy management; creating new sections; and providing
- 3 an expiration date.

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- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- NEW SECTION. Sec. 1. (1) A work group is formed to develop criteria to streamline the prior authorization process for prescription drugs, medical procedures, and medical tests, with the goal of simplification and uniformity.
 - (2) The work group shall be cochaired by the chair of the senate health care committee and the chair of the house of representatives health care committee, and membership of the work group shall be determined by the cochairs, not to exceed eleven participants.
- 13 (3) The work group shall examine elements that may include the 14 following:
- 15 (a) National standard transaction information, such as HIPAA 278 16 standards, for sending or receiving authorizations electronically;
- 17 (b) Standard transaction information and uniform prior 18 authorization forms;

- 1 (c) Clean, uniform, and readily accessible forms for prior 2 authorization including determining the appropriate number of forms;
- 3 (d) A core set of common data requirements for nonclinical 4 information for prior authorization and electronic prescriptions, or 5 both;
- 6 (e) The prior authorization process, which considers electronic 7 forms and allows for flexibility for health insurance carriers to 8 develop electronic forms; and
- 9 (f) Existing prior authorization forms by health insurance carriers 10 and by state agencies, in developing the uniform prior authorization 11 forms.
 - (4) The work group must:

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- 13 (a) Establish timelines for urgent requests and timeliness for 14 nonurgent requests;
 - (b) Work on a receipt and missing information time frame;
- 16 (c) Determine time limits for a response of acknowledgment of receipts or requests of missing information;
- 18 (d) Establish when an authorization request will be deemed as 19 granted when there is no response.
- 20 (5) The work group must submit their recommendations to the appropriate committees of the legislature by November 15, 2013.
- 22 (6) This section expires January 1, 2014.
- NEW SECTION. Sec. 2. The insurance commissioner shall adopt rules implementing only the recommendations of the work group established in section 1 of this act. The rules must take effect no later than January 1, 2015.

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