



## Thomson Reuters Regulatory Intelligence

### Topical Tracking Service

### **HEALTHCARE AND HEALTH INSURANCE SNAPSHOT**

**June 17, 2024**

The following is a selection of federal and state regulatory actions affecting the healthcare, health insurance and government-funded health insurance sectors for May and June 2024. This bulletin also includes news and analysis from Thomson Reuters Regulatory Intelligence and other Thomson Reuters professional services publications.

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#### **HEALTHCARE**

##### **Recent Legislative Items**

###### **Alabama**

2024 AL S.B. 72 (NS), effective October 1, 2024, adopts uncodified section prohibiting the Alabama Board of Medical Examiners and the Medical Licensure Commission from taking adverse action against a physician who prescribes or recommends off-label medical treatments, unless the physician's recommended or prescribed off-label medical treatment presents a threat of significant harm to his or her patients or to the general public. Latest Update available [here](#).

###### **Arizona**

2024 AZ S.B. 1609 (NS), effective September 27, 2024, adopts AZ ST § 36-2903.14 (Personal health information; duplicative paperwork requirements) requiring Arizona health care cost containment system administration contracted housing program administrators to review and minimize duplicative paperwork requirements for and limit the number of contractors and entities that unnecessarily receive personal health information of members with serious

mental illness who are receiving services. Also prohibits contracted housing program administrators from selling or otherwise sharing any members' personal health information, unless authorized or required by state or federal law, including the Health Insurance Portability and Accountability Act Privacy Standards. Note: The effective date is based on an estimated adjournment date and is subject to change. Latest Update available [here](#).

### **California**

2023 CA S.B. 233 (NS), effective May 23, 2024, adopts CA BUS & PROF § 2076.6, authorizing a physician licensed in Arizona, who meets specified requirements, to practice medicine in California through a registration program under either the Medical Board of California (MBC) or Osteopathic Medical Board of California (OMBC), through November 30, 2024, solely for the purpose of providing abortions and abortion-related care to patients who are Arizona residents traveling from Arizona seeking abortions or abortion-related care in California. A physician registered pursuant to this section shall be deemed to be a licensee of the applicable board for purposes of the laws administered by that board relating to standards of practice and discipline, for the duration of the registration. This section shall become inoperative on December 1, 2024, and, as of January 1, 2025, is repealed. Latest Update available [here](#).

### **Colorado**

- 2024 CO S.B. 68 (NS), effective August 7, 2024, amends several sections in CO ST T. 25, Article 48, End-of-Life Options, updating the procedure for obtaining medical aid-in-dying. Latest Update available [here](#).
- 2024 CO S.B. 121 (NS), effective August 7, 2024, adopts and amends sections relating to the licensure of critical access hospitals. Latest Update available [here](#).
- 2024 CO S.B. 141 (NS), effective June 7, 2024, adopts CO ST § 12-30-124, relating to out-of-state telehealth providers. Latest Update available [here](#).
- 2024 CO S.B. 167 (NS), effective January 1, 2025, adopts and amends sections relating to assisted living facility licensing and training for entry-level healthcare workers. Latest Update available [here](#).
- 2024 CO H.B. 1132 (NS), effective June 3, 2024, adopts and amends sections relating to support for living organ donors. Latest Update available [here](#).
- 2024 CO H.B. 1217 (NS), effective May 28, 2024, adopts CO ST § 27-50-110 (Friends and family input form - rules - definition) requiring the Behavioral Health Administration to create a friends and family input form to allow a patient's family and friends to supply relevant information related to a patient receiving mental health or substance use services. Provides requirements for the form and for the disclosures of a patient's information. Latest Update available [here](#).
- 2024 CO H.B. 1229 (NS), effective August 7, 2024, amends CO ST § 25.5-5-204 (Presumptive eligibility - pregnant person - children - long-term care - state plan) removing the requirement, effective January 1, 2026, that the department fully assess a person in need of long-term services and supports for the appropriate level of care before the person is presumed eligible for the medical assistance program. Requires the person or the person's legal representative to declare any information that may be required pursuant to the federal authorization. Also authorizes the department, effective August 7, 2024, to make any necessary changes to any other federal authorizations that are authorized in order to implement the presumptive eligibility requirements for persons in need of long-term services and supports. Latest Update available [here](#).
- 2024 CO H.B. 1262 (NS), effective June 4, 2024, adopts CO ST § 25-3-131 (Maternal health-care services - discontinuation - required notifications - definition - repeal) requiring hospitals that discontinue maternal health care services to provide notice to the Department of Public Health and Environment, the Primary Care Office, the Governor, the

public and any affected patients and providers at least 90 days before services are discontinued. Provides notice requirements and definitions. Latest Update available [here](#).

- 2024 CO H.B. 1471 (NS), effective June 3, 2024, amends CO ST § 13-20-403 (Restrictions on electroconvulsive treatment - rights of minors) authorizing electroconvulsive treatment (ECT) to be performed on a minor who is fifteen years of age or younger only if certain specified requirements are met. Makes clarifying and conforming changes. Latest Update available [here](#).

### **Connecticut**

- 2024 CT S.B. 202 (NS), effective May 30, 2024, amends CT ST § 19a-17d (Prohibition on automatic reciprocal discipline based solely on the termination of a pregnancy) removing pharmacists from the scope of the statute. Latest Update available [here](#).
- 2024 CT H.B. 5001 (NS), effective July 1, 2024, adopts and amends sections supporting Connecticut seniors and the improvement of nursing and home-based care. Latest Update available [here](#).
- 2024 CT H.B. 5046 (NS), effective June 4, 2024, amends several sections relating to nursing home and assisted living facility licensing. Latest Update available [here](#).
- 2024 CT H.B. 5198 (NS), effective June 4, 2024, amends and repeals sections relating to telehealth services. Latest Update available [here](#).
- 2024 CT H.B. 5524 (NS), effective July 1, 2024, amends CT ST § 19a-490ee (Provision of educational materials by birthing hospitals) updating terminology by replacing "postpartum person" with "postpartum mother or person" and "pregnant and postpartum persons" with "expectant and postpartum mothers and persons." Makes other clarifying and conforming changes. Latest Update available [here](#).

### **District of Columbia**

2023 DC L.B. 823 (NS), effective June 7, 2024, amends DC CODE § 14-307 (Confidential information) clarifying the language in subsection (d)(2) by replacing the phrase "confidential information" with the phrase "confidential information of a victim" in its place. Latest Update available [here](#).

### **Florida**

- 2024 FL S.B. 644 (NS), effective July 1, 2024, amends FL ST § 395.1041 (Access to and ensurance of emergency services; transfers; patient rights; diversion programs; reports of controlled substance overdoses) requiring rural emergency hospitals to provide emergency services and care for any emergency medical condition under certain circumstances. Amends FL ST § 395.602 (Rural hospitals) updating the definition of the term "rural hospital." Adopts FL ST § 395.607 (Rural emergency hospitals) establishing the requirements for a qualifying hospital to be designed as a rural emergency hospital. Latest Update available [here](#).
- 2024 FL H.B. 1259 (NS), effective July 1, 2024, amends FL ST § 395.1055 (Rules and enforcement) requiring the Agency for Health Care Administration to adopt rules that allow a Level I Adult Cardiovascular Services program to use certain tools and treatments, including rotational or other atherectomy devices, electrophysiology and treatment of chronic total occlusions. Latest Update available [here](#).

### **Iowa**

2023 IA H.F. 2673 (NS), effective July 1, 2025, amends sections relating to privacy, nursing home facility licensing and patient rights. Latest Update available [here](#).

## **Kansas**

- 2023 KS S.B. 28 (NS), effective May 9, 2024, amends KS ST 65-180 (Educational, screening, testing and follow-up program concerning phenylketonuria, congenital hypothyroidism, galactosemia, maple syrup urine disease and certain other genetic diseases; registry of cases; food and treatment products; reimbursement of cost; eligibility; newborn screening programs; Kansas newborn screening fund; transfers from medical assistance fee fund; limitations) limiting the amount to fund the newborn screening fund to \$5,000,000 in fiscal years 2024, 2025 and 2026. Latest Update available [here](#).
- 2023 KS S.B. 287 (NS), effective July 1, 2024, adopts the No Patient Left Alone Act to establish the essential caregiver visitation requirements for when a patient care facility is providing end-of-life care. Provides definitions. Amends unrelated provisions. Latest Update available [here](#).
- 2023 KS H.B. 2749 (NS), effective July 1, 2024, amends KS ST 65-445 (Termination of human pregnancy; records; annual reports; confidentiality of information, exceptions; criminal penalties for violations) requiring medical facilities to biannually submit a written report of all pregnancies that are lawfully terminated within their facility to the Secretary of Health and Environment. Requires each patient to be asked, prior to termination of the patient's pregnancy, what reason was the most important factor in their decision to seek an abortion. Provides an exception for medical emergency. Establishes what information must be included in the biannual report. Extends the sunset provision to July 1, 2029. Requires the biannual report to be issued no later than 30 days after the end of the reporting period. Provides a severability clause. Makes technical changes. Latest Update available [here](#).

## **Louisiana**

- 2024 LA S.B. 55 (NS), effective August 1, 2024, adopts LA R.S. 40:1124.1 (Discharge information: hospital and birthing center requirements) requiring hospitals and birthing centers that provide labor and delivery services to prior to discharge following birth, provide the mother and her family members information about post-birth warning signs, including symptoms and available resources. Requires the Department of Health to make the information available to hospitals and birthing centers and to include the information on the Department's website. Latest Update available [here](#).
- 2024 LA S.B. 296 (NS), effective May 23, 2024, amends multiple sections relating to licensing of emergency medical services practitioners. Latest Update available [here](#).
- 2024 LA S.B. 325 (NS), effective August 1, 2024, adopts LA R.S. 40:1061.31 (Compatible with Love Empowerment Act) requiring specified information to be made available to women who are pregnant mothers who have received a diagnosis of a fetal abnormality, including information on fetal abnormalities and financial assistance. Latest Update available [here](#).

## **Maryland**

- 2024 MD H.B. 149 (NS), effective October 1, 2024, amends MD HEALTH GEN § 4-403 relating to the retention and destruction of medical records. Latest Update available [here](#).
- 2024 MD H.B. 461 (NS), effective October 1, 2024, amends MD HEALTH GEN § 5-608.1 (Medical Orders for Life-Sustaining Treatment) renaming the State Advisory Council on Quality Care at the End of Life to the State Advisory Council on Serious Illness Care. Latest Update available [here](#).
- 2024 MD S.B. 1099 (NS), effective October 1, 2024, amends MD CTS & JUD PRO § 5-603 (Emergency medical care) regarding immunity from civil liability for any act or omission in giving any assistance or medical care for certain licensed individuals. Provides that

- immunity from civil liability applies to an individual when administering naloxone in response to a known or suspected drug overdose. Latest Update available [here](#).
- 2024 MD H.B. 1143 (NS), effective July 1, 2024, adopts MD HEALTH GEN § 20-2405 regarding requests for data from the Maryland Emergency Department Wait Time Reduction Commission. Requires hospitals and other health care providers promptly transmit data to the Commission for data that does not contain personally identifiable information. Establishes requirements for data that contains personally identifiable information. Note: This Act sunsets at the end of June 30, 2027. Latest Update available [here](#).

### **Minnesota**

- 2023 MN S.F. 4097 (NS), effective October 1, 2024, adopts MN ST § 62J.806 (Policy for collection of medical debt) requiring a health care provider to make available to the public the health care provider's policy for collecting medical debt by posting the policy on the health care provider's website or providing a copy of the policy upon request. Specifies the content for the policy. Effective October 1, 2024, adopts MN ST § 62J.807 (Denial of health treatment or services due to outstanding medical debt) prohibiting the denial of medically necessary health treatment or services because of outstanding medical debt. Allows the health care provider to require the patient to enroll in a payment plan as a condition of treatment and specifies requirements for the payment plan. Latest Update available [here](#).
- 2023 MN S.F. 4399 (NS), effective August 1, 2024, is an omnibus human services policy bill. Latest Update available [here](#).

### **Mississippi**

2024 MS S.B. 2873 (NS), effective May 13, 2024, amends sections relating to retention of medical records. Latest Update available [here](#).

### **Oklahoma**

2023 OK S.B. 1491 (NS), effective November 1, 2024, adopts OK ST T. 63 § 1-522.1 establishing the requirements for expedited partner therapy. Expedited partner therapy means to prescribe, administer, dispense or otherwise provide antimicrobial drugs to a sexual partner of a patient clinically diagnosed by a health care provider as infected with a sexually transmitted infection without a physical examination of such sexual partner. Amends OK ST T. 63 § 1-532.1 (Minor's consent to examination and treatment for sexually transmitted infections) replacing references to a "licensed physician" with "health care provider." Latest Update available [here](#).

### **South Carolina**

2023 SC S.B. 558 (NS), effective May 20, 2024, adopts SC ST § 44-31-40 to establish the requirements for tuberculosis testing in congregate care facilities. Latest Update available [here](#).

### **Recent Administrative Items**

#### **Arizona**

2024 AZ REG TEXT 647486 (NS), effective June 26, 2024, adopts 9 AZ ADC Ch. 22, Art. 18, Provider Exclusion Rules, authorizing the Arizona health care cost containment system administration to exclude individuals or entities from participation in the system for certain

specified conduct, including those who pose an undue risk of fraud, waste and abuse. Latest Update available [here](#).

### **Colorado**

- 2024 CO REG TEXT 664523 (NS), effective July 1, 2024, amends 6 CO ADC 1011-1:4-3 (Department Oversight) increasing hospital application, renewal license, change of ownership, provisional license and off-campus locations fees. Latest Update available [here](#).
- 2024 CO REG TEXT 664525 (NS), effective July 1, 2024, amends 6 CO ADC 1011-1:7-3 (Department Oversight) increasing licensing, change of ownership and other license fees for assisted living residences. Latest Update available [here](#).
- 2024 CO REG TEXT 664533 (NS), effective July 1, 2024, amends 6 CO ADC 1011-1:21-14 (License fees) increasing the license fees for hospices for initial and annual license renewal, workstation and change of ownership. Latest Update available [here](#).

### **Delaware**

2024 DE REG TEXT 659686 (NS), effective June 11, 2024, amends 24 DE ADC 2500-5.0 (Dispensing) adding an effective date of 6 months after the effective date of the regulation to Subsections 5.1.5.1 and 5.1.5.2. Further amends Subsection 5.1.5.2 to require that the written agreement must be between the dispensing pharmacy and the ordering physician or facility. Latest Update available [here](#).

### **Florida**

2024 FL REG TEXT 657095 (NS), effective June 5, 2024, amends 59 FL ADC 59A-36.011 (Staff Training Requirements and Competency Test) updating the training requirements for staff of assisted living facilities providing specialized Alzheimer's services. Removes the existing requirements and instead requires that training must be in accordance with FL ST § 430.5025 (Alzheimer's disease and related forms of dementia; education and training). Latest Update available [here](#).

### **Illinois**

2024 IL REG TEXT 644808 (NS), effective May 3, 2024, amends several sections related to hospital licenses and services. Latest Update available [here](#).

### **Iowa**

2024 IA REG TEXT 661397 (NS), effective July 1, 2024, amends IA ADC 645-208.3(147) (Telehealth visits) clarifying that a licensee engaged in a telehealth visit must utilize technology that is secure and HIPAA-compliant, pursuant to the Health Insurance Portability and Accountability Act of 1996, PL 104-191, August 21, 1996, 110 Stat. 1936 and any amendments as of December 8, 2023, and that includes, at a minimum, audio or video equipment or both, that allows two-way real-time interactive communication between the licensee and the patient. Also corrects reference to occupational therapy assistant. Latest Update available [here](#).

### **Nebraska**

- 2024 NE REG TEXT 638912 (NS), effective June 2, 2024, amends 175 NE ADC Ch. 16 (Hospice Services) to update requirements for criminal background and registry checks for prospective employees; update requirements for standards of operation, care and services; and modify general requirements. Other changes include removing duplicative statutory language and repetitive language; updating definitions, terminology and formatting; and restructuring the regulatory chapter. Latest Update available [here](#).

- 2024 NE REG TEXT 658031 (NS), effective May 29, 2024, amends 175 NE ADC Ch. 12 (Skilled Nursing Facilities, Nursing Facilities and Intermediate Care Facilities) updating requirements for standards of operation, care and services; clarifying language; updating definitions, terminology, section headings and formatting; and restructuring the regulatory chapter. Latest Update available [here](#).

### **New Jersey**

2024 NJ REG TEXT 657195 (NS), effective May 20, 2024, adopts NJ ADC 13:35-6.28 (Furnishing of self-administered hormonal contraceptives by pharmacists) and NJ ADC 13:39-14, Self-Administered Hormonal Contraceptives, authorizing pharmacists to furnish self-administered hormonal contraceptives pursuant to standardized procedures and protocols jointly developed by the Board of Medical Examiners and Board of Pharmacy. Requires a pharmacist to take a four-hour training program on patient screening, selection of self-administered hormonal contraceptives and patient counseling regarding self-administered hormonal contraceptives. Latest Update available [here](#).

### **Oregon**

2024 OR REG TEXT 665283 (NS), effective May 15, 2024, amends and repeals sections relating to hospital licensing. Latest Update available [here](#).

### **Pennsylvania**

2024 PA REG TEXT 601781 (NS), effective May 18, 2024, adopts and amends sections relating to physician licensing, fees and patient rights. Latest Update available [here](#).

### **South Dakota**

2024 SD REG TEXT 665143 (NS), effective June 2, 2024, amends, adopts and repeals various rules in SD ADC Article 20:51, Pharmacists. Changes include certain fee increases for pharmacists; updated wording, references and compounding standards; and changes in intern and technician vaccine administration standards. Latest Update available [here](#).

### **Vermont**

2024 VT REG TEXT 658249 (NS), effective May 15, 2024, amends VT ADC 12-5-102:6.0 (Clinical Care and Management Requirements for OBOTs) updating requirements for providers prescribing Medication for Opioid Use Disorder (MOUD) to treat patients, including clarifying the informed consent requirements. Latest Update available [here](#).

### **Virginia**

2024 VA REG TEXT 638064 (NS), effective April 23, 2024, relating to licensing of pharmacists. Latest Update available [here](#).

### **West Virginia**

- 2024 WV REG TEXT 636228 (NS), effective May 3, 2024, readopts without change, WV ADC s 69-12-17 (Patient Rights), regarding patient rights for office-based medication-assisted treatment (OBMAT) programs. Latest Update available [here](#).
- 2024 WV REG TEXT 646279 (NS), effective May 3, 2024, amends, rennumbers and repeals sections relating to pharmacist licensing. Note: These amendments were previously adopted by emergency rulemaking (2023 WV REG TEXT 646224 (NS)). Latest Update available [here](#).

## **News and Insights**

- **U.S. DOJ announces new healthcare antitrust task force** (June 6, 2024) available [here](#).

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## **HEALTH INSURANCE**

### **Recent Legislative Items**

#### **Alabama**

2024 AL H.B. 21 (NS), effective October 1, 2024, creates the Alabama Genetic Data Privacy Act. Latest Update available [here](#).

#### **Colorado**

- 2024 CO S.B. 68 (NS), effective August 7, 2024, amends CO ST § 10-7-103 (Life insurance policies--prohibition) by adding that a life insurance company must not deny or alter benefits otherwise available to an individual with a terminal disease based on the availability of medical aid-in-dying. Enacts new CO ST § 10-16-167 (Medical aid-in-dying - carrier prohibitions). Prohibits a carrier from denying or altering benefits otherwise available to an individual with a terminal disease based on the availability of medical aid-in-dying. Prohibits the attempt to coerce an individual with a terminal disease to make a request for medical aid-in-dying medication. Latest Update available [here](#).
- 2024 CO S.B. 80 (NS), effective June 5, 2024, adopts two new sections, CO ST § 10-16-168 (Carriers - health care - price transparency - violation - rules - legislative declaration - definitions) and CO ST § 10-16-169 (Carriers - prescription drug coverage - transparency - violation) providing requirements for transparent pricing in prescription and provider rates, definitions, reporting requirements and penalties for violations. Latest Update available [here](#).
- 2024 CO S.B. 175 (NS), effective June 5, 2024, amends CO ST § 10-16-104 (Mandatory coverage provisions--definitions--rules--applicability) by adding coverage requirements for doula services. Provides applicability provisions for large employer health benefit plans and for individual and small group health benefit plans. Provides definitions and allows the Commissioner to promulgate rules. Latest Update available [here](#).
- 2024 CO S.B. 205 (NS), effective May 17, 2024, enacts new Part 17 in Title 6 (Consumer and Commercial Affairs), Article 1 (Colorado Consumer Protection Act) regarding consumer protections in interactions with artificial intelligence systems. Amends CO ST § 6-1-105 (Unfair or deceptive trade practices) by making a violation of the new Part 17 an unfair or deceptive trade practice. Latest Update available [here](#).
- 2024 CO H.B. 1036 (NS), effective August 7, 2024, amends CO ST § 10-16-116 (Catastrophic health insurance--coverage--premium payments--reporting requirements--definitions--short title) by applying provisions regarding premium payments, tax exclusions and withholding premium payments from wages to "before January 1, 2025" and repealing provisions on December 31, 2028. Latest Update available [here](#).
- 2024 CO H.B. 1045 (NS), effective August 7, 2024, adopts and amends sections relating to treatment for substance use disorders. Latest Update available [here](#).
- 2024 CO H.B. 1130 (NS), effective July 1, 2025, adopts new CO ST § 6-1-1314 (Biometric data and biometric identifiers - controllers - duties and requirements - written policy - prohibited acts - right to correct biometric identifiers - right to access biometric identifiers - remedies and civil actions - definitions). Amends CO ST § 6-1-1303 (Definitions) by adding the definitions of "biometric data" and "biometric identifier." Amends CO ST § 6-

1-1304 (Applicability of part) by noting that the part applies to controllers who control or process biometric identifiers or biometric data, regardless of the amount controlled or processed annually. Provides for an exception. Latest Update available [here](#).

- 2024 CO H.B. 1132 (NS), effective June 3, 2024, adopts CO ST § 25-59-104 (Organ donation - benefits and recognition - legislative declaration) identifying certain allowed and prohibited actions that will benefit living organ donors. Amends CO ST § 10-16-104 (Mandatory coverage provisions - definitions - rules - applicability) by replacing the definition of "health care services" with "health care services related to living organ donation." Modifies the definition of "living organ donor." Adds a new definition of "organ donation recovery operation. Makes other clarifying updates throughout the section. Latest Update available [here](#).
- 2024 CO H.B. 1149 (NS), effective August 7, 2024, amends CO ST § 10-16-112.5, relating to prior authorization requirements. Latest Update available [here](#).
- 2024 CO H.B. 1258 (NS), effective January 1, 2025, enacts new CO ST § 10-16-105.9 (Health benefit plan - carrier insolvency - covered persons - deductible amounts - rules - definition) which requires a carrier of a new individual health plan to credit all out-of-pocket expenses paid by the covered person in the same plan year if the original health plan exits the individual health insurance market and can no longer provide benefits. Provides definitions, addresses excess amounts, addresses rate filing, requires rule promulgation, explains allowed recoupment and provides procedures for the new health benefit plan. Latest Update available [here](#).
- 2024 CO H.B. 1382 (NS), effective June 3, 2024, amends CO ST § 10-16-104 (Mandatory coverage provisions--definitions--rules--applicability) to require all individual or group health benefit plans issued or renewed in Colorado to provide prophylaxis, diagnosis and treatment of pediatric acute-onset neuropsychiatric syndrome (PANS) and pediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS). Latest Update available [here](#).
- 2024 CO H.B. 1470 (NS), effective June 7, 2024, amends CO ST § 10-16-1206 (Health insurance affordability cash fund--creation--repeal) by allocating premium tax revenues to the fund for certain years. Repeals subsection (1)(c), regarding premium tax revenues deposited into the fund, on July 1, 2025. Adds "repeal" to the title. Amends CO ST § 10-3-209 (Tax on premiums collected - exemptions - penalties - repeal) by changing the title and by specifying the application of the years 2022-23 for the Division of Insurance to transmit funds to the health insurance affordability cash fund. Repeals subsection (4)(a)(III), regarding premium tax revenues deposited into the fund, on July 1, 2025. Latest Update available [here](#).

## **Connecticut**

- 2024 CT H.B. 5198 (NS), effective July 1, 2024, enacts an uncodified section in Section 3, which prohibits health carriers from reducing reimbursement amounts paid to a telehealth provider for covered health care or health care services delivered to a patient through telehealth and not in person. Amends related sections. Latest Update available [here](#).
- 2024 CT H.B. 5290 (NS), effective May 28, 2024, amends CT ST § 38a-479jjj (Contract with 340B covered entity. Prohibited provisions. Reimbursement rates. Regulations) and CT ST § 38a-518v (Mandatory coverage for hospice services provided in the home through a hospice care program to the extent provided for inpatient hospice services) by making minor clarifying language updates throughout each section. Latest Update available [here](#).

## **Florida**

2024 FL H.B. 1611 (NS), effective July 1, 2024, amends several sections under an omnibus insurance bill. Also adopts several new sections. Latest Update available [here](#).

## **Kansas**

2023 KS S.B. 356 (NS), effective January 1, 2028, amends, enacts and repeals several miscellaneous insurance sections. Latest Update available [here](#).

## **Louisiana**

- 2024 LA S.B. 58 (NS), effective May 23, 2024, amends and enacts sections relating to a patient's right to prompt coverage. The provisions of this Act apply to any new policy, contract, program or health coverage plan issued on and after January 1, 2025. Latest Update available [here](#).
- 2024 LA S.B. 219 (NS), effective May 22, 2024, amends sections relating to conversion requirements for health insurers. Latest Update available [here](#).
- 2024 LA H.B. 520 (NS), effective August 1, 2024, amends LA R.S. 22:1964 (Methods, acts and practices which are defined as unfair or deceptive), subsection (14) by adding paragraph (q), which establishes as an unfair claims settlement practice the failure to make the original field adjuster's repair estimate, as well as the identity of the person making any revisions to an estimate, available upon written request of an insured. Latest Update available [here](#).
- 2024 LA H.B. 839 (NS), effective August 1, 2024, amends LA R.S. 22:1053 (Requirement for coverage of step therapy or fail first protocols; prohibitions; definitions) by adding prohibitions and definitions to the section title. Notes that, notwithstanding other contrary provisions, health coverage plans shall not subject ventilator prescriptions or orders to any step therapy or fail first protocols under certain circumstances. Makes other minor clarifying updates throughout the section. Latest Update available [here](#).

## **Maine**

2023 ME H.P. 1164 (NS), effective July 16, 2024, amends ME ST T. 24-A § 4303-C (Protection from surprise bills and bills for out-of-network emergency services) by adding a new paragraph requiring a carrier to reimburse an out-of-network provider for ambulance services that are considered covered emergency services at the rate applicable to the out-of-network provider. Notes an exception if the carrier and out-of-network provider agree otherwise. Makes other clarifying updates throughout the section. Amends ME ST T. 24-A § 4303-F (Reimbursement for ambulance services and participation of ambulance service providers in carrier networks) by adding that carriers cannot require air ambulance service providers to obtain prior authorization before transporting an enrollee to a hospital or between hospitals for urgent care. Makes other clarifying updates throughout the section. Latest Update available [here](#).

## **Maryland**

- 2024 MD H.B. 676 (NS), effective October 1, 2024, amends MD HEALTH GEN § 21-2B-06 (Scope of subtitle) by providing that carriers, third-party administrators and government agencies may provide coverage for the cost of individualized investigational treatment or the cost of services related to such treatment. Latest Update available [here](#).
- 2024 MD H.B. 1259 (NS), effective January 1, 2025, amends sections relating to breast and lung cancer screening coverage requirements. It applies to all policies, contracts and health benefit plans issued, delivered or renewed in Maryland on or after January 1, 2025. Latest Update available [here](#).
- 2024 MD H.B. 1337 (NS), effective July 1, 2024, amends MD INSURANCE § 15-10A-06 (Reporting requirements), by adding that the quarterly report must include the number of members entitled to health care benefits under a policy, plan or certificate issued or

delivered in the state by the carrier and the number of clean claims for reimbursement processed by the carrier. Latest Update available [here](#).

### **Michigan**

- 2023 MI S.B. 27 (NS), effective September 26, 2024, enacts MI ST 500.3406hh, which requires insurers issuing for delivery and renewing health insurance policies in the state to provide coverage for mental health and substance use disorder services. Requires benefits provided to meet all applicable federal parity requirements. Allows health plans to divide benefits provided on an in-network basis into subclassifications that reflect network tiers under certain circumstances. Addresses satisfaction of parity requirements when a health insurance policy applies different levels of financial requirements to different tiers of prescription drug benefits. Provides definitions. Latest Update available [here](#).
- 2023 MI H.B. 4131 (NS), effective June 6, 2024, amends MI ST 500.3476 (Telemedicine services) by prohibiting insurers from requiring health care professionals to provide services for a patient through telemedicine, unless the services are contractually required per the terms of a contract between the insurer and an affiliated provider or a third-party vendor for telemedicine first or telemedicine-only products and clinically appropriate as determined by the health care professional. Requires insurers to provide at least the same coverage for services provided through telemedicine under the section as if the service were provided face-to-face between a health care professional and the patient. Makes non-substantive, technical changes. Latest Update available [here](#).
- 2023 MI H.B. 4579 (NS), effective June 6, 2024, amends MI ST 500.3476 (Telemedicine services) by requiring insurers to provide at least the same coverage for services provided through telemedicine under the section as if the service were provided face-to-face between a health care professional and the patient. Latest Update available [here](#).

### **Minnesota**

- 2023 MN S.F. 4097 (NS), effective January 1, 2025, amends, enacts and repeals several sections with an insurance omnibus bill. Latest Update available [here](#).
- 2023 MN H.F. 4757 (NS), effective August 1, 2024, amends MN ST § 45.0135 (Commerce Fraud Bureau) by revising assessment amounts, beginning June 1, 2024. This section is effective the day following final enactment. Amends MN ST § 62Q.73 (External review of adverse determinations), subdivision 3, by eliminating filing fee requirements in paragraphs (a) and (c). Latest Update available [here](#).

### **New Hampshire**

2023 NH H.B. 1296 (NS), effective January 1, 2025, enacts NH ST § 417-D:2-c (Coverage for Diagnostic and Supplemental Breast Examinations), which prohibits group health plans and health issuers offering group or individual insurance coverage and providing benefits for screening and diagnostic and supplemental breast examination to covered individuals from imposing cost-sharing requirements for those services. Latest Update available [here](#).

### **Oklahoma**

- 2023 OK S.B. 543 (NS), effective July 1, 2024, enacts the Insurance Data Security Act in OK ST T. 36 §§ 670 to 679. Latest Update available [here](#).
- 2023 OK S.B. 1334 (NS), effective January 1, 2025, enacts Corinnes' Law in OK ST T. 36 § 6060.8b which defines "Health benefit plan," "Iatrogenic infertility," "Religious employer," "Reproductive age," and "Standard fertility preservation services." Requires coverage for standard fertility preservation services, only for individuals diagnosed with cancer and who are within reproductive age, when a medically necessary treatment may directly or indirectly cause iatrogenic infertility. Addresses preauthorization and cost-

sharing. Allows a religious employer to submit a request for exemption. Latest Update available [here](#).

- 2023 OK S.B. 1670 (NS), effective May 22, 2024, amends multiple sections relating to pharmacy benefits managers. Latest Update available [here](#).
- 2023 OK H.B. 1712 (NS), effective May 29, 2024, enacts new OK ST T. 36 § 6981 which prohibits a health benefit plan, HMO, PPO or other provider networks from refusing coverage to an insured for durable medical equipment and supplies as prescribed by a health care provider, regardless of whether they are in-network or out-of-network, unless there is an Oklahoma-licensed in-network provider within a 15-mile radius of the patient's home address that can provide in-person evaluation for durable medical equipment, supplies and related services. Latest Update available [here](#).
- 2023 OK H.B. 2872 (NS), effective January 1, 2025, enacts new OK ST T. 36 §§ 6050.1, 6050.2 and 6050.3 which creates the Out-of-Network Ambulance Service Provider Act. Provides definitions. Addresses reimbursement rates, cost-sharing and claims payments. Latest Update available [here](#).
- 2023 OK H.B. 3190 (NS), effective January 1, 2025, enacts the Ensuring Transparency in Prior Authorization Act with the following sections: OK ST T. 36 § 6570.1 through OK ST T. 36 § 6570.11. Latest Update available [here](#).
- 2023 OK H.B. 3376 (NS), effective May 15, 2024, amends sections relating to the Patient's Right to Pharmacy Choice Act. Latest Update available [here](#).

### **South Carolina**

2023 SC S.B. 962 (NS), effective May 20, 2024, amends SC ST § 38-71-2330 (Duties of pharmacy service administrative organizations; contracts with pharmacies) by removing the requirement that pharmacy service administrative organizations must act as fiduciaries to pharmacies. Latest Update available [here](#).

### **Vermont**

- 2023 VT H.B. 233 (NS), effective July 1, 2024, adopts new Chapter 77 (Pharmacy Benefit Managers) under Title 18 (Health). Also amends and repeals multiple sections. Latest Update available [here](#).
- 2023 VT H.B. 766 (NS), effective January 1, 2025, amends multiple sections relating to prior authorization, step therapy requirements, asthma controller medication coverage and edit standards. Latest Update available [here](#).

### **Recent Administrative Items**

#### **California**

2024 CA REG TEXT 665918 (NS), effective May 17, 2024, amends 28 CA ADC § 1300.74.721 (Mental Health and Substance Use Disorder Utilization Review Requirements) by updating the reference to Counsel of Autism Providers in paragraph (c)(13) to Council of Autism Service Providers. Latest Update available [here](#).

#### **Colorado**

2024 CO REG TEXT 664039 (NS), effective June 14, 2024, amends the regulation title and the following sections of 3 CO ADC 702-4:4-2-60 (Concerning Network Adequacy Filings for Short-Term Limited Duration Health Insurance Policies, Non-Affordable Care Act Medical Plans, Dental Plans, Vision Plans, Pharmacy Plans and Any Other Managed Care Health Coverage Plans). Latest Update available [here](#).

**Illinois**

- 2024 IL REG TEXT 633024 (NS), effective April 30, 2024, amends sections relating to health maintenance organizations. Latest Update available [here](#).
- 2024 IL REG TEXT 650529 (NS), effective April 30, 2024, amends 50 IL ADC 2025.30 (Definitions) adding a definition for the term "COBRA." Makes non-substantive, technical changes. Amends 50 IL ADC 2025.70 (Discontinuance of a Market) by eliminating paragraph (b) of the notice requirements, regarding notice to the Illinois Comprehensive Health Insurance Plan prior to other notifications. Makes non-substantive, technical changes. Latest Update available [here](#).
- 2024 IL REG TEXT 659560 (NS), effective April 30, 2024, adopts and amends several sections relating to health insurance rate review. Latest Update available [here](#).
- 2024 IL REG TEXT 660226 (NS), effective May 22, 2024, adopts new rules clarifying the requirements for coverage of over-the-counter (OTC) contraceptives. Prohibits health insurers from requiring a prescription for OTC contraceptives. Latest Update available [here](#).

**Indiana**

2024 IN REG TEXT 665966 (NS), effective May 14, 2024, adopts temporary rules which establish the All Payer Claims Data Base registration and data submission requirements for health payers and implements Title 27, Article 1, Chapter 44.5, regarding the All Payer Claims Database, of the Indiana Code. The temporary rules are effective May 14, 2024, and expire on September 30, 2024. Latest Update available [here](#).

**Oregon**

- 2024 OR REG TEXT 665429 (NS), effective May 17, 2024, amends OR ADC 431-121-2000 (Definitions) by revising the definition of "critical access pharmacy." Amends OR ADC 431-121-2020 (Program Price) by removing the phrase "in rural areas" in paragraph (6). Latest Update available [here](#).
- 2024 OR REG TEXT 665435 (NS), effective June 3, 2024, amends OR ADC 945-030-0030 (Administrative Charge on Insurers and Health Care Service Contractors) by adding assessment rates for qualified health plans per member per month (PMPM) and stand-alone dental plans PMPM for calendar year 2025. The assessment rates of \$5.50 for qualified health plans PMPM and \$0.36 for stand-alone dental plans PMPM have been maintained for calendar year 2025. Latest Update available [here](#).

**South Carolina**

- 2024 SC REG TEXT 648492 (NS), effective May 24, 2024, amends the following sections of SC ADC 69-77 (Pharmacy Benefits Managers). Latest Update available [here](#).
- 2024 SC REG TEXT 648494 (NS), effective May 24, 2024, adopts new SC ADC 69-78 (Pharmacy Services Administrative Organizations) which provides licensing, reporting and activity standards for Pharmacy Services Administrative Organizations (PSAOs). Provides the following titled sections: Purpose, Licensure Requirements, Contract Review, Examinations, Record Keeping Requirements, Confidentiality, Penalties, Severability and Conflict. Latest Update available [here](#).

**Texas**

2024 TX REG TEXT 662469 (NS), effective May 19, 2024, amends sections relating to coordination of benefits. Latest Update available [here](#).

## Recent Guidance

### Alabama

AL Bulletin 5-30-2024, effective May 30, 2024, advises insurers of the rates and form filing requirements for short-term limited duration insurance (STLDI) and independent non-coordinated excepted benefits coverage. Provides link to Federal final rules. Rescinds AL Bulletin 10-4-2018 (#1). Latest Update available [here](#).

### Colorado

CO Bulletin No. B-4.100 (Revised), effective June 10, 2024, provides carriers with guidance regarding filing procedures for rates and binders absent federal funding for cost-sharing reductions (CSRs). Latest Update available [here](#).

### District of Columbia

DC Bulletin 24-IB-002-05/21, effective May 21, 2024, reminds insurers that AI systems must comply with all applicable insurance laws and regulations. Discusses background, legislative authority, definitions, regulatory guidance and expectations and regulatory oversight and examination considerations. Latest Update available [here](#).

### Georgia

GA Bulletin 24-EX-8, effective May 21, 2024, advises that, due to the Change Healthcare cyberattack, the deadline to submit claims to the reinsurance pool has been extended until 6/17/2024. Latest Update available [here](#).

### Iowa

IA Bulletin 2024-1, effective May 28, 2024, discusses purpose and use of short-term limited duration (STLD) plans. Explains federally-mandated change to allowable duration and offerings of STLD plans, effective 9/1/204. Discusses application and operation of the changes. Provides link to find licensed agents for consumers to contact for information. Updates various notice requirements for STLD and fixed indemnity insurance plans. Latest Update available [here](#).

### Maine

- ME Bulletin 475, effective May 24, 2024, summarizes recent legislation affecting the health insurance industry. Latest Update available [here](#).
- ME Bulletin 476, effective June 10, 2024, clarifies the circumstances under which the Fertility Act and Rule 865 require health insurance carriers to cover fertility care for individuals seeking to become single parents and LGBTQ+ couples seeking to have children. Latest Update available [here](#).

### Maryland

MD Bulletin 2024-13, effective May 24, 2024, reminds insurers and private review agents ("PRAs") of the requirements under Maryland law when conducting utilization review of prescription drugs, including step therapy and to provide guidance on how and when it is permitted to consider prescription drug costs as a factor for any utilization review determination related to prescription drugs. Discusses general requirements for utilization review of pharmacy services and utilization review and drug cost considerations. Latest Update available [here](#).

## **Massachusetts**

- MA Bulletin B-2024-6, effective May 24, 2024, reminds insurers and producers that paying or giving anything of value or any valuable consideration not specified in the insurance contract is prohibited as an unfair or deceptive act or practice. Prohibits providing or allowing any special favor or advantage not specified in the contract. Discusses actions taken by affiliated non-insurance entities. Latest Update available [here](#).
- MA Bulletin 6-4-2024, effective June 4, 2024, provides updates regarding implementing ordering, referring and prescribing requirements that were announced in MA All Provider Bulletin No. 361, 376 and 380. With the exception of information provided in this bulletin, all of the information in Bulletins 361, 376 and 380 remain in effect. Provides details on the opportunity for payment of claims that were initially denied due to unenrolled ORP providers and what overrides are available for pharmacy claims that were processed through the Pharmacy Online Processing System and were denied due to an unenrolled prescriber. Latest Update available [here](#).

## **New York**

NY Circular Letter No. 2024-5, effective June 5, 2024, identifies the standards expected of specified insurance companies and carriers regarding planning, preparing for and responding to disasters occurring anywhere in the world that could affect an addressee's ability to continue doing business and serving the people of New York. Repeals and replaces NY Circular Letter No. 2023-5. Notes that a separate circular letter covers disaster planning, preparedness and response by property and casualty insurers. Latest Update available [here](#).

## **Pennsylvania**

PA Notice 5-25-2024 (#2), effective January 1, 2025, declares that the Center for Medicare and Medicaid Services' (CMS) approval of the Pennsylvania 1332 Waiver Application is effective from January 1, 2021, through December 31, 2025 with a provision for possible extension at the end of the initial term. Provides details about the program and notes that, beginning on January 1, 2025, the program-adopted parameters will provide an attachment point of \$60,000, a cap of \$100,000 and a coinsurance rate of 50%. Latest Update available [here](#).

## **South Carolina**

SC Bulletin 3-2024, effective May 28, 2024, summarizes recent amendments to Regulation 69-77, which implemented a portion of Act No. 30 of 2023 providing for external review of certain pharmacy benefits manager decisions and operations. Provides details on the changes that were made, including approval of independent review organizations, the external review process, reporting and recordkeeping, required notices regarding the right to external review, examinations of pharmacy benefits managers and other changes. Latest Update available [here](#).

## **News and Insights**

- **U.S. Senate Finance Committee chair urges SEC probe into UnitedHealth cyber-attack** (June 3, 2024) available [here](#).

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## GOVERNMENT-FUNDED HEALTH INSURANCE

### Recent Legislative Items

#### Colorado

- 2024 CO S.B. 86 (NS), effective June 5, 2024, amends CO ST § 25.5-5-308 (Breast and cervical cancer prevention and treatment program - creation - legislative declaration - definitions - funds - repeal) removing a requirement that the state treasurer transfer interest and income earned on money in the breast and cervical cancer prevention and treatment fund to the disability support fund. Requires, for the 2024-25, 2025-26 and 2026-27 state fiscal years, the state treasurer to transfer \$500,000 from the breast and cervical cancer prevention and treatment fund to the breast cancer screening fund created pursuant to CO ST § 25-4-1503 (Fund created). Makes clarifying and conforming changes. Latest Update available [here](#).
- 2024 CO S.B. 110 (NS), effective June 3, 2024, adopts CO ST § 25.5-5-517 (Prescription drugs for treating mental health disorders or conditions - prior authorization - rules - definitions) prohibiting the department of health care policy and financing from requiring an adult to be prescribed an antipsychotic prescription drug that is included on the preferred drug list and used to treat a mental health disorder or mental health condition if certain requirements are met. Latest Update available [here](#).
- 2024 CO S.B. 168 (NS), effective August 7, 2024, adopts CO ST § 25.5-5-337 (Telehealth remote monitoring services for outpatient clinical services - grant program - federal authorization - rules - definitions) to provide reimbursement for telehealth remote monitoring for outpatient clinical services to increase access to health care in rural areas. Adopts CO ST § 25.5-5-338 (Continuous glucose monitors - coverage - federal authorization - definition) to provide coverage for a continuous glucose monitor and related supplies, beginning November 1, 2025. Latest Update available [here](#).
- 2024 CO S.B. 175 (NS), effective June 5, 2024, adopts and amends sections relating to health facility licensing and Medicaid coverage requirements. Latest Update available [here](#).
- 2024 CO H.B. 1360 (NS), effective July 1, 2024, amends CO ST § 25-1-801 (Patient records in custody of health-care facility--definitions) and CO ST § 25.5-5-308 (Breast and cervical cancer prevention and treatment program - creation - legislative declaration - definitions - funds - repeal) updating cross references. Latest Update available [here](#).

#### Connecticut

- 2024 CT S.B. 307 (NS), effective July 1, 2024, adopts uncodified section, effective July 1, 2024, requiring the Department of Social Services, to the extent permissible under federal law, to provide coverage for biomarker testing to diagnose, treat, manage or monitor a Medicaid enrollee's disease or condition. Requires coverage to be medically necessary and may require prior authorization. Also provides definitions. Latest Update available [here](#).
- 2024 CT H.B. 5367 (NS), effective July 1, 2024, adopts uncodified section requiring the Department of Social Services (DSS) commissioner to provide medically necessary Medicaid coverage for rapid whole genome sequencing for certain critically ill infants, within available appropriations. Latest Update available [here](#).
- 2024 CT H.B. 5373 (NS), effective June 6, 2024, amends CT ST § 17b-340 (Rates of payment to nursing homes, chronic disease hospitals associated with chronic and convalescent homes, rest homes with nursing supervision, residential care homes and residential facilities for persons with intellectual disability) correcting the calendar date on

which the fiscal quarter ends from April thirtieth to March thirty-first. Latest Update available [here](#).

### **Illinois**

2023 IL S.B. 3268 (NS), effective June 7, 2024, adopts and amends several sections relating to Medicaid payments and licensing. Latest Update available [here](#).

### **Iowa**

2023 IA S.F. 2385 (NS), effective July 1, 2024, amends IA ST § 514C.32 (Services provided by certain licensed master social workers, licensed mental health counselors and licensed marital and family therapists) and IA ST § 514C.33 (Services provided by provisionally licensed psychologists) (Effective July 1, 2024) by adding references to the "board of behavioral health professionals" throughout the sections. Latest Update available [here](#).

### **Louisiana**

2024 LA S.B. 224 (NS), effective August 1, 2024, adopts LA R.S. 46:153.3.2 (Medicaid prescription medication for chronic or acute pain; opioid alternatives) prohibiting a Medicaid managed care organization from denying coverage of a nonopioid prescription drug in favor of an opioid prescription drug when a licensed physician has prescribed a nonopioid medication for the treatment of chronic or acute pain. Prohibits the Department from establishing more restrictive or more extensive utilization controls for clinically appropriate nonopioid drugs than the least restrictive or extensive utilization controls applicable to any clinically appropriate opioid or narcotic drug. Adds education, awareness, technical assistance and collaboration requirements for the Department. Latest Update available [here](#).

### **Maine**

2023 ME H.P. 1317 (NS), effective August 9, 2024, adopts ME ST T. 22 § 3174-NNN (Rules regarding electronic visit verification for hospice services) authorizing the adoption of rules regarding the use of electronic visit verification for providers offering hospice services under the MaineCare program. Delays implementation until March 1, 2025. Latest Update available [here](#).

### **Maryland**

- 2024 MD H.B. 119 (NS), effective October 1, 2024, amends sections relating to privacy of health information: HIV/AIDS testing, public health, Giving Infants a Future without Transmission (GIFT) Act. Latest Update available [here](#).
- 2024 MD S.B. 119 (NS), effective October 1, 2024, amends MD STATE PERS & PEN § 2-312 (Interstate investigations or proceedings relating to legally protected health care) adding a definition of gender-affirming treatment and updating the definition of legally protected health care to include all gender-affirming treatment. Latest Update available [here](#).
- 2024 MD H.B. 1078 (NS), effective October 1, 2024, amends MD HEALTH GEN § 15-103 (Maryland Medical Assistance Program) requiring the Program to provide remote ultrasound procedures and remote fetal nonstress tests for eligible pregnant women who meet the stated requirements. Adopts MD HEALTH GEN § 15-141.5 establishing the requirements for coverage and reimbursement of remote ultrasound procedures and remote fetal nonstress tests. Latest Update available [here](#).

### **Michigan**

- 2023 MI H.B. 4213 (NS), effective April 1, 2025, amends MI ST 400.105h (Telemedicine services) requiring telemedicine services to be covered under Medicaid and the Healthy

Michigan Program if those services are provided at, or contracted through, a distant site allowed in the Medicaid provider manual. Establishes requirements for coverage and reimbursement. Defines "distant provider" and "distant site." Note: The effective date is based on an estimated adjournment date and is subject to change. Latest Update available [here](#).

- 2023 MI H.B. 4580 (NS), effective April 1, 2025, amends MI ST 400.105h (Telemedicine services) providing that the medical assistance program or Healthy Michigan program shall not require a recipient to use telemedicine service in lieu of in-person consultation or contact. Also removes an obsolete date. Note: The effective date is based on an estimated adjournment date and is subject to change. Latest Update available [here](#).

### **Missouri**

2024 MO H.B. 2634 (NS), effective August 28, 2024, amends sections relating to Medicaid and public funding of abortions. Latest Update available [here](#).

### **Oklahoma**

2023 OK H.B. 3668 (NS), effective November 1, 2024, amends OK ST T. 56 § 1006 (Medicaid fraud--Penalties) updating thresholds for penalties for Medicaid fraud. Also adds additional penalties for a violation of OK ST T. 56 § 1005(A)(7) (Unlawful acts). Latest Update available [here](#).

### **Recent Administrative Items**

#### **Alabama**

2024 AL REG TEXT 665457 (NS), effective July 15, 2024, amends AL ADC 560-X-16-.08 (Injections) removing language that claims for injectable medications administered in an outpatient hospital should be made on the UB-8 92. Latest Update available [here](#).

#### **District of Columbia**

2024 DC REG TEXT 617028 (NS), effective June 7, 2024, adopts 29 DC ADC Chapter 74, Housing Supportive Services and Provider Certification Standards, to establish standards to administer the new 1915(i) State Plan Home and Community-Based Services (HCBS) Housing Supportive Services (HSS). HSS are services that focus on helping District Medicaid individuals who are homeless or at risk of homelessness find and maintain permanent housing in the community, build independent living and tenancy skills and connect them to community resources. Latest Update available [here](#).

#### **Maryland**

2024 MD REG TEXT 668701 (NS), effective May 27, 2024, adopts MD ADC 10.09.16, Behavioral Health Crisis Services, to implement Maryland Medicaid coverage of behavioral health crisis services. Establishes coverage requirements and reimbursement procedures for mobile crisis team and behavioral health crisis stabilization center services. Latest Update available [here](#).

#### **Massachusetts**

2024 MA REG TEXT 660163 (NS), effective May 10, 2024, amends and repeals sections relating to Medicaid rates of payment to resident care facilities. Latest Update available [here](#).

**Mississippi**

2024 MS REG TEXT 667925 (NS), effective July 1, 2024, amends, renames and repeals sections in 23 MS ADC Pt. 222, Chapter 2, Perinatal High-Risk Management and Infant Services, to align with the current Mississippi State Department of Health (MSDH) interagency agreement and MS SPA 21-0014. Updates include coverage and reimbursement of targeted case management services, qualifications of providers, freedom of choice and documentation requirements. Latest Update available [here](#).

**Missouri**

2024 MO REG TEXT 668993 (NS), effective May 6, 2024, adopts 13 MO ADC 70-94.030 (Transformation of Rural Community Health (ToRCH)) to implement the Transformation of Rural Community Health (ToRCH) program. ToRCH provides MO HealthNet coverage of both clinical and health-related social needs through a hub-based model. Provides definitions, selection criteria and requirements for ToRCH entities and payment methodology. Latest Update available [here](#).

**Nebraska**

2024 NE REG TEXT 650878 (NS), effective June 2, 2024, amends 471 NE ADC Ch. 36 (Medicaid Hospice Benefit) to update definitions; clarify authorization language; update references to acute medical crisis and payment; update section headings and formatting; update terminology; remove direction to agency staff; remove duplicate statutory and inconsistent language from the regulations; and restructure the regulatory chapter. Latest Update available [here](#).

**Oklahoma**

- 2024 OK REG TEXT 668242 (NS), effective March 27, 2024, amends OK ADC 317:30-5-42.7 (Emergency department (ED) care/services) adding that emergency department care must include provision of emergency opioid antagonist upon discharge as per state law. Amends OK ADC 317:30-5-47 (Reimbursement for inpatient hospital services) adding that separate reimbursement may be obtained for provision of 2 doses of emergency opioid antagonist upon discharge as per state law. Latest Update available [here](#).
- 2024 OK REG TEXT 668243 (NS), effective March 27, 2024, amends OK ADC 317:30-5-558 (Private duty nursing (PDN) coverage limitations) clarifying the three methods an assessment by an OHCA care management nurse may be conducted. Also changes the designated care hours from "per day" to "per week" and provides that private duty nursing is not authorized in excess of 112 hours per week. Amends OK ADC 317:30-5-560 (Treatment plan) changing the private duty nursing requested hours from "per day" to "per week." Latest Update available [here](#).

**Oregon**

- 2024 OR REG TEXT 662922 (NS), effective May 22, 2024, amends OR ADC 410-130-0015 (Doula Services) to update the billing codes for birth doula services. Strikes language providing that doula services shall be recommended by a physician or other licensed birth provider acting within the scope of authorized practice under State law. Provides that no pre-authorization is required for payment for birth doula services. Makes other technical and clarifying changes. Latest Update available [here](#).
- 2024 OR REG TEXT 665172 (NS), effective May 24, 2024, amends sections relating to Medicaid covered services and reimbursement. Latest Update available [here](#).
- 2024 OR REG TEXT 668764 (NS), effective May 31, 2024, adopts OR ADC 411-014, Eligibility Criteria Rules for Oregon Project Independence-Medicaid (OPI-M), establishing

the requirements to define eligibility requirements for the Oregon Project Independence-Medicaid program. Latest Update available [here](#).

#### **Texas**

- 2024 TX REG TEXT 662464 (NS), effective June 2, 2024, amends 1 TX ADC § 354.1271 (Benefits and Limitations) to remove the reference to a 60-day time frame for postpartum services. Latest Update available [here](#).
- 2024 TX REG TEXT 662465 (NS), effective June 2, 2024, amends 1 TX ADC § 366.303 (Definitions) to add a definition for "Change in circumstance" and updates the definition for "Continuous coverage." Also makes other technical and clarifying changes. Amends 1 TX ADC § 366.827 (Medicaid Eligibility Effective Dates) specifying that once a pregnant woman meets spend down, she remains continuously eligible through her pregnancy and the end of the month in which the 12-month postpartum period ends and is not required to meet spend down again until the end of her 12-month postpartum period. Latest Update available [here](#).
- 2024 TX REG TEXT 662466 (NS), effective June 2, 2024, amends 1 TX ADC § 370.42 (Age Limits) providing that a pregnant CHIP member is eligible to receive coverage until the end of their 12-month postpartum period even if the member turns nineteen years old. Latest Update available [here](#).

#### **Washington**

- 2024 WA REG TEXT 613533 (NS), effective July 1, 2024, amends WA ADC 182-501-0065 (Health care coverage—Description of service categories) to include Community behavioral health support services (CBHS) as a service category. Adopts WA ADC 182-561, Community Behavioral Health Support Services Benefit, establishing the community behavioral support services (CBHS) benefit. The CBHS benefit tailors services designed to assist eligible clients to acquire, retain, restore and improve the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Latest Update available [here](#).
- 2024 WA REG TEXT 662175 (NS), effective May 25, 2024, amends WA ADC 182-550-4650 ("Full cost" public hospital certified public expenditure (CPE) payment program) clarifying subsection (5)(c) regarding initial payment for inpatient hospital services to provide that if the state's applicable federal medical assistance percentage (FMAP) is 0 percent, the amount derived in subsection (5)(b) is multiplied by the lowest Washington state specific Medicaid FMAP in effect at the time of claim payment. Latest Update available [here](#).
- 2024 WA REG TEXT 662189 (NS), effective June 9, 2024, amends WA ADC 182-531A-0900 (Applied behavior analysis (ABA)—Covered services) providing that the agency does not pay for ABA services that are provided by a family member. Latest Update available [here](#).
- 2024 WA REG TEXT 667170 (NS), effective May 8, 2024, amends WA ADC 182-502-0005 (Core provider agreement (CPA)) and WA ADC 182-502-0006 (Enrollment for nonbilling individual providers) to allow for the enrollment of a provider applicant to be effective on a date designated by the agency. Makes other clarifying and conforming changes. Note: This emergency rulemaking continues the previous emergency rulemaking with certain changes. Latest Update available [here](#).

## Recent Guidance

### Federal

- CMS Transmittal R12645CP, effective June 17, 2024, updates Pub. 100-04 Medicare Claims Processing Manual, Chapter 23, Section 60.3 Gap-filling DMEPOS Fees to include update factors for gap-filling purposes. Transmittal available [here](#).
- CMS Transmittal R12649CP, effective April 7, 2024, further implements the policy covered in NCD 200.3, Monoclonal Antibodies Directed Against Amyloid for the Treatment of AD. Transmittal available [here](#).
- CMS Transmittal R12652CP, effective October 1, 2024, provides the Medicare contractors with the October 2024 (2025 File) ICD-10-CM updates. This recurring update notification applies to chapter 23, section 10. Transmittal available [here](#).
- CMS Transmittal R12653CP, effective October 1, 2024, informs contractors about the new HCPCS codes for 2024 that are subject to and excluded from CLIA edits. This Recurring Update Notification applies to Chapter 16, section 70.9. Transmittal available [here](#).
- CMS Transmittal R12654CP, effective October 1, 2024, provides the October 2024 update to the HH Grouper software. This recurring update notification applies to chapter 10, section 80. Transmittal available [here](#).
- CMS Transmittal R12655CP, effective October 1, 2024, instructs the Medicare contractors that the quarterly update to the HCPCS file is available for them to download. The complete HCPCS file is updated and released quarterly to the Medicare contractors. The file contains existing, new, revised and discontinued HCPCS codes for the October 2024 quarter. Contractors must download the file via the CMS mainframe in September 2024. The recurring update notification applies to chapter 23, section 20 of the Medicare Claims Processing Manual. Transmittal available [here](#).
- CMS Transmittal R12659CP, effective October 7, 2024, updates the RARC and CARC lists and to instruct the ViPS Medicare System (VMS) and the Fiscal Intermediary Shared System (FISS) to update the MREP and the PC Print. This Recurring Update Notification (RUN) applies to Chapter 22, Sections 40.5, 60.2 and 60.3 of Publication (Pub.) 100-04. Transmittal available [here](#).
- CMS Transmittal R12660CP, effective October 7, 2024, directs the Medicare shared system maintainers to obtain the most recent external code sets and use them to update the necessary tables and/or reference files as part of the CCEM software utilized by the A/B Medicare Administrative Contractors (MACs). This recurring update notification applies to publication 100-04, chapter 24, section 50.3.4. Transmittal available [here](#).
- CMS Transmittal R12662CP, effective October 7, 2024, instructs the contractors and Shared System Maintainers (SSMs) to update systems based on the CORE 360 Uniform use of CARC, RARC and CAGC rule publications. These system updates are based on the CORE Code Combination List to be published on or about June 1, 2024. This recurring update notification (RUN) applies to chapter 22, section 80.2. Transmittal available [here](#).
- CMS Transmittal R12667OTN, effective July 1, 2024, updates the denial liability from a patient responsibility liability to a contractual obligation liability. Transmittal available [here](#).
- CMS Transmittal R12671CP, effective January 1, 2024, informs MACs that Claims for covered Telehealth services using POS 10, if payable by Medicare, shall be paid at the Medicare Physician Fee Schedule non-facility rate and to revise the Internet Only Manual (IOM) Publication (Pub) 100-04 references to payment differentials based on Place of Service codes for Telehealth services. Transmittal available [here](#).
- CMS Transmittal R12672OTN, effective July 8, 2024, provides instructions for processing claims for replacement power or manual wheelchairs when 1) the manufacturer exits the wheelchair business resulting in the wheelchair ceasing to exist on the market, and 2)

there is no availability of aftermarket repair or replacement parts to make the manufacturer's equipment operable. Transmittal available [here](#).

## **News and Insights**

- **U.S. health agency reports nearly \$3 billion in expected recoveries in semiannual report to Congress** (June 13, 2024) available [here](#).