

Bill No.: HB0025 **Effective:** 7/1/2024
LSO No.: 24LSO-0014
Enrolled Act No.: HEA No. 0019
Chapter No.: 24
Prime Sponsor: Joint Labor, Health & Social Services Interim Committee
Catch Title: **Medicaid-third party payor conditions.**
Has Report: No
Subject: Wyoming Medical Assistance and Services Act.

Summary/Major Elements:

- Current law requires all health insurers (and other specified entities and persons) that are legally responsible for payment of a claim for a health care item or service to agree, as a condition of doing business in the state of Wyoming, to comply with certain requirements. This act amends two (2) of the requirements to clarify that health insurers (and other specified entities and persons) must:
 - Respond within sixty (60) days to any inquiry by the state regarding a claim for payment for any health care item or service that is submitted not later than three (3) years after the date of the provision of the health care item or service; and
 - Agree not to deny a claim submitted by the state solely on the basis of a failure to obtain required prior authorization if the state meets specified conditions regarding the claim.

The above summary is not an official publication of the Wyoming Legislature and is not an official statement of legislative intent. While the Legislative Service Office endeavored to provide accurate information in this summary, it should not be relied upon as a comprehensive abstract of the bill.