

NDMA 2025 Policy Forum October 3, 2025 Policy No. 5

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Subject: Prior Authorization Advancement

Summary:

NDMA has current policy supporting prior authorization reform and was successful in passing strong prior authorization regulation during the 2025 legislative session. In doing so, the policy noted that "[p]rior authorization is a health plan cost-control process that requires providers to qualify for payment by obtaining approval before performing a service. It is overused, costly, inefficient, opaque, and responsible for patient care delays."

At the federal level, there has been significant movement toward right-sizing prior authorization and establishing guidelines to make the process less administratively burdensome.

Relevant Information:

HHS announced a final rule that will help physicians identify the most appropriate treatments while preventing health insurers from blocking physician-approved care.

 The rule, set to go into effect Oct. 1, will allow health care providers using certified health information technology systems to "submit prior authorizations

- electronically, select drugs consistent with a patient's insurance coverage, and exchange electronic prescription information with pharmacies and insurance plans
- Physicians will be able to manage prior authorization requests entirely in their electronic health record systems, which "will standardize how physicians and payers exchange information, paving the way for faster decisions and more timely patient care."

Proposed Action:

NDMA will facilitate the incorporation of the new HHS rule to help ND physicians expedite prior authorizations and optimize recommendations to patients based on their specific insurance limitations.

Adopted November 25, 2025

Joan M. Connell, MD

Policy Forum Chair