

October 2, 2025 Nevada Medicaid Web Announcement 3737

Attention All Providers: Centers for Medicare & Medicaid Services (CMS) Interoperability and Prior Authorization Final Rule Effective January 1, 2026

The Centers for Medicare & Medicaid Services (CMS) released the <u>CMS Interoperability and Prior Authorization</u> <u>Final Rule</u> (CMS-0057-F) on January 17, 2024, which focuses on improving prior authorization (PA) processes and practices.

As a result of CMS-0057-F, a new expedited PA review process will be established. Beginning January 1, 2026, providers may send an email to a designated email address to request an expedited review and decision of their PA request. PA requests must match the definition below to be considered expedited.

Definition: An expedited PA is required only when the standard timeframe could seriously jeopardize the enrollee's life, health, or ability to attain, maintain, or regain maximum function.

A future web announcement will be posted when the email address is available and with more details about the requirements of this process.