



Streamlining Collection of Prior Authorization Data

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Background & Purpose

- The Health and Human Services Commission (HHSC) implemented a streamlined process to collect prior authorizations (PAs) submitted by Managed Care Organizations (MCOs) into a centralized database.
- The goal is to improve efficiency, transparency, and compliance in data reporting.
- This initiative ensures standardized data collection, making it easier to analyze trends, assess compliance, and enhance oversight of the PA lifecycle.



Scope of Services

- In-Scope
 - All services that require an authorization including all inpatient hospitalizations, both physical and behavioral health are submitted weekly.
- Out-of-Scope
 - Fee-for-service
 - Pharmacy (except clinician administered drugs)
 - Value-added services
 - Dental services



Challenges Encountered

- Data Quality Issues
 - Inconsistent formats and missing fields.
 - Variability in data submissions processes across MCOs.
- Compliance & Threshold Requirements
 - HHSC has set strict compliance benchmarks for accuracy, completeness, and timeliness.
 - Challenges to meet thresholds due to MCO system limitations or process inefficiencies.



Collaboration & Progress

- Over the past two years, HHSC has worked closely with MCOs to enhance submission of the data.
- Data accuracy and completeness have improved over time, but challenges remain.
- Compliance rates are being closely monitored, and MCOs are adapting to new requirements.



Questions?





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Thank you

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