

**03/12/2026**

## **CMS-0057 Interoperability Prior Authorization (PA) Metrics Requirements**

### **Background**

The Centers for Medicare & Medicaid Services (CMS) Final Rule CMS-0057-F requires states to publicly report prior authorization (PA) metrics on their websites. To meet this federal mandate, HHSC is requesting that all MCOs and DMOs submit their PA data for Calendar Year 2025. HHSC will consolidate the submitted data and publish it on the HHSC website by March 31, 2026, as required.

### **Key Details**

Under CMS#0057-F, HHSC is required to collect and publicly report standardized PA metrics from all contracted MCOs and DMOs. The data requested covers Calendar Year 2025 and must be **submitted to HHSC no later than March 20, 2026**, to allow sufficient time for HHSC to consolidate and publish the information on the HHSC website by the federally required deadline of March 31, 2026. Please complete the attached spreadsheet.

Since the deliverable doesn't contain any PHI or PII, please send your completed spreadsheet to the mailbox [hscmsinteroperability@hhs.texas.gov](mailto:hscmsinteroperability@hhs.texas.gov).

CMS Compliance requirements include:

- **March 31, 2026, | HHSC Only**
  - Mandatory publication of prior authorization metrics (starting March 31, 2026)

### **Action:**

In compliance with [§ 42 CFR 438.210\(f\)](#) and to support HHSC's statewide data consolidation efforts, MCOs and DMOs are required to submit comprehensive PA metrics for the 2025 calendar year. This data will be used to support HHSC's public reporting obligations under the CMS-0057 Final Rule, which mandates publication of PA metrics on the state website by March 31, 2026. To allow sufficient time for data review and publication, HHSC requests that all MCOs and DMOs submit the required data, [§ 42 CFR 438.210\(f\)](#) **no later than March 20, 2026**.

Please complete and return the attached MCO/DMO Data Request template (MCO DMO\_data-Request.xlsx) with all applicable fields populated. Data should reflect aggregated totals across all items and services unless otherwise specified. The required data includes the full PA list, approval/denial rates for standard and expedited requests, appeal outcomes, and average/median processing times. Data for the most recent reporting period should be submitted in the specified format by the indicated deadline to ensure federal transparency compliance. Below are the detailed requirements for the calendar year 2025.

- (1) A list of all items and services that require prior authorization.
  - (a) Total of all standard prior authorization requests.
  - (b) Total of all expedited prior authorization requests.
  - (c) Total of all standard prior authorization requests approved.
  - (d) Total of all expedited prior authorization requests approved.
  - (e) Total of all standard prior authorization requests appealed.
  - (f) Total of all expedited prior authorization requests appealed.

- (2) The percentage of standard prior authorization requests that were approved, aggregated for all items and services.
- (3) The percentage of standard prior authorization requests that were denied, aggregated for all items and services.
- (4) The percentage of standard prior authorization requests that were approved after appeal, aggregated for all items and services.
- (5) The percentage of prior authorization requests for which the timeframe for review was extended, and the request was approved, aggregated for all items and services.
- (6) The percentage of expedited prior authorization requests that were approved, aggregated for all items and services.
- (7) The percentage of expedited prior authorization requests that were denied, aggregated for all items and services.
- (8) The average and median time that elapsed between the submission of a request and a determination by the MCO, PIHP or PAHP, for standard prior authorizations, aggregated for all items and services.
- (9) The average and median time that elapsed between the submission of a request and a decision by the MCO, PIHP or PAHP, for expedited prior authorizations, aggregated for all items and services.

HHSC requests the data to be shared by the MCOs/DMOs by 3/20/2026 by completing and sending the attached worksheet.

Since the deliverable doesn't contain any PHI or PII, please send your completed spreadsheet to the mailbox: [hhscmsinteroperability@hhs.texas.gov](mailto:hhscmsinteroperability@hhs.texas.gov).

**Resources:**

<b>Attachments:</b>	MCO-DMO-PA-Data-Request.xlsx
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**Contact:**

For questions about this report, completed worksheet, CMS-0057 and compliance requirements: [hhscmsinteroperability@hhs.texas.gov](mailto:hhscmsinteroperability@hhs.texas.gov)

**Attachment:**

MCO-DMO-PA-Data-Request.xlsx

**Type:** Action Required

**To:** CHIP; DMO; STAR; STAR+PLUS; STARHEALTH; STAR\_KIDS

**From:** Operations