

Prior Authorization Reform – What You Need to Know from Senate Bill 247

Prior authorization guidelines from Senate Bill 247 go into effect June 1. Below is an outline of the standards and how HAP is meeting them.

Electronic prior authorization request transaction process required

- Contracted providers can enter prior authorization requests by logging in at **hap.org** and selecting *Authorizations*.
- Non-contracted providers can submit prior authorization requests online by visiting **hap.org\providers**, then selecting the non-contracted providers link.

Note: When authorization systems are temporarily unavailable, providers will be notified via an alert on the provider portal and public website on how to submit requests.

Benefits subject to prior authorization

Contracted and non-contracted providers can view all benefits subject to prior authorization at **hap.org**.

Prior authorization requirements and restrictions

- Contracted and non-contracted providers can easily access prior authorization requirements and restrictions when they log in to the provider portal.
- Contracted providers will be notified via the secure provider portal about new or amended prior authorization requirements and restrictions as follows:
 - For non-prescription drug benefits, 60 days before implementation
 - For prescription drug benefits, 45 days before implementation
 - Note: We will also post this information on hap.org.

Non-urgent prior authorization requests

Will be approved in 9 calendar days if no action was taken from the date of the original submission **Urgent prior authorization requests**

Will be approved if no action was taken within 72 hours after the date and time of submission