

Drafting Note: State laws or rules are referenced in three answers (What is Medically Necessary?, How Long Do Prior Authorization Decisions Take?, and What Rules Must Plans Follow About Prior Authorization?). States may wish to provide specific information on state laws or link to additional information. The final answer on appeals includes a reference to the state department of insurance, where it may be helpful to add contact information.

Prior Authorization: What It Is, When It's Used, and Your Options

What Is Prior Authorization?

Prior authorization means your health plan requires your doctor or other healthcare provider to get approval *before* they provide health care services or prescribe prescription drugs. Without prior authorization, your health plan may not pay for your treatment or medication.

NOTE: Emergency services don't require prior authorization.

Why Do Health Plans Require Prior Authorization?

Prior authorization serves two purposes. First, it's a check that your plan covers the proposed care. It's also a way to make sure the care is medically necessary.

try a less expensive drug first and that drug isn't

If your provider submits the request, they will send the required information to the health plan. You may y