



## How to Obtain Prior Authorization

**Tier 1 Providers:** To obtain prior authorization, please submit requests using one of the following methods:

- Access the provider portal at <https://pas.primehealthcare.com/>. This is the preferred and recommended option for submission. Portal registration is required.
- Complete the Prior Authorization (PA) Form (<https://ehp.primehealthcare.com/authorizations-claims-and-eligibility/authorization/>) and fax to 909-235-4414, 909-235-4404, 909-235-4427, with clinical documentation to support the request.

**Non Tier1 Providers:** To obtain prior authorization, please submit requests using one of the following methods:

- Complete the Prior Authorization (PA) Form (<https://ehp.primehealthcare.com/authorizations-claims-and-eligibility/authorization/>) and fax to 909-235-4414, 909-235-4404, 909-235-4427, with clinical documentation to support the request.

### Information required for prior authorization:

- All fields on the PA form marked with asterisk (\*) must be completed.
- Relevant clinical documentation to support the request must be submitted. For example: signs, symptoms, history, interventions, diagnostic test results, consultant/specialist recommendations (if applicable), treatment plan, discharge plan, or other pertinent medical information.

## Notification Timeline:

Service Type	When will Provider Receive Notification of Decision
Routine/ Standard Outpatient	Within 7-10 business days of receipt of all necessary information *Most cases are completed within 3-5 business days if received with all necessary and clinicals information.*
Urgent Outpatient	Within 72 business hours Please ensure that when you select this option
ER Observation and Inpatient	24 hours from receipt of all necessary clinicals information and notification

### Please note:

- Prior authorization determinations are based on medical necessity.
- Prior authorization approval is not a guarantee of payment.
- Payment is based on benefits and eligibility at the time of service.
- Prior authorization determination is applicable only for the CPT and ICD Codes listed and for the authorized service provider only.
- Any assistant in surgical cases must be a provider contracted with Prime Healthcare or obtain a Prior Authorization from Prime Utilization Management team.

### Questions?

- Questions regarding prior authorization process or status of authorization should be directed to Prime Customer service at 877-234-5227. Hours of operation are 6:00 a.m. to 4:00 p.m. PST, Monday through Friday, excluding holidays.
- Questions regarding eligibility, plan benefits, claims and appeals should be directed to Keenan Customer service at 888-773-7218. Hours of operation are 6:00 a.m. to 5:00 p.m. PST, Monday through Friday, excluding holidays.