



The State of New Hampshire Insurance Department

21 South Fruit Street, Suite 14
Concord, NH 03301

David J. Bettencourt
Commissioner

Keith E. Nyhan
Deputy Commissioner

BULLETIN **Docket #INS 25-001-AB**

TO: All New Hampshire Licensed Health Carriers
FROM: Commissioner David J. Bettencourt
DATE: January 2, 2025
RE: Guidance on Prior Authorization Reporting

A handwritten signature in blue ink that reads "D.J. Bettencourt".

I. Introduction

New Hampshire law was recently amended relative to prior authorization for health care services as the result of the adoption of SB 561. The new law shortens the time allowed by health carriers to make decisions regarding prior authorizations, allows providers broader access to peer-to-peer review, and requires the Department to collect and disclose certain metrics relating to prior authorizations. The Department is in the process of rewriting administrative rules pertaining to utilization review to address these statutory changes. The Department plans to initiate the rulemaking process in early 2025. The purpose of this bulletin is to heighten attention to some of the new statutory provisions and to provide instructions relating to the new data submission requirement.

II. Important New Provisions

The Department would like to highlight some of the substantial changes that SB 561 makes to the prior authorization requirements in NH RSA 420-J:6. In particular, the new law shortens the time periods by which the health carrier is required to make a prior authorization decision. The below chart summarizes the applicable time periods based on the type of request and the method by which the request is submitted and is effective January 1, 2025. If the carrier fails to make a prior authorization determination within the applicable time period, the request shall be deemed approved.

New Time Frames for Prior Authorization Requests

Type of Submission	Urgent / Non-Urgent	Time to Request Additional Information	Time to Make Decision
Electronically	Non-Urgent	7 Calendar days	7 Calendar days
Electronically	Urgent	72 hours	72 hours
Non-electronically	Non-Urgent	7 Calendar days	14 Calendar days
Non-electronically	Urgent	72 hours	72 hours

Peer-to Peer Review

Effective January 1, 2025, there will be an option for a health care provider to request a peer-to-peer review. When prior authorization for an item or service is required by the health plan, the health carrier or utilization review entity shall allow the health care provider the opportunity to request a peer-to-peer review of a prior authorization request before an initial determination is made. Peer-to-peer review allows the health care provider to have a direct conversational exchange about the basis for the prior authorization request with a medical director or a designated provider who is a clinical peer.

III. Data Reporting Requirements and Format

Beginning January 1, 2025, all health carriers offering managed care health plans are required to collect data relating to prior authorization and provide such data in a format developed by the New Hampshire Insurance Department. The Department has created a data reporting template and will require all data be submitted using the template provided on the Department's website at https://www.insurance.nh.gov/sites/g/files/ehbemt861/files/media/media_document/prior-authorization-reporting-template.xlsx. Data for calendar year 2025 shall be submitted to the Department no later than April 1, 2026.

Health carriers are strongly encouraged to file interim reports with the Department on a quarterly basis throughout 2025 to allow the Department to assess the quality of the data and address any errors or concerns prior to the April 1, 2026, submission deadline. The interim reports shall not be displayed or publicly disclosed on the Department's website.

All health carriers are required to file complete, accurate, and compliant prior authorization data with the Department no later than April 1, 2026, for calendar year 2025. The Department may take administrative action against any health carrier that fails to file compliant data by the deadline. The Department will use the annual data to display carrier specific prior authorization metrics on <https://nhhealthcost.nh.gov>.

Data for the year 2026 and every year thereafter shall be reported annually to the Department no later than April 1st of the following year.

IV. Contact Information

Questions related to this Bulletin should be directed to Consumer Services, New Hampshire Insurance Department by email to consumerservices@ins.nh.gov or by telephone at 603-271-2261.